

Comparative Analysis of State Density Inform Efforts and Insurance Coverage

**States listed in order of effective date*

State	Effective Date	Notification Required or Suggested	Mandates Specific Language	Who Receives Information	Informs Woman Her Breasts are Dense	Includes Personal Breast Density Category	"Cancer" or "Abnormality" Masking Effect Mentioned	Density as a Risk Factor Mentioned	Supplemental Screening Tests Mentioned ^a	3D and/or Supplemental Screening Insurance Coverage ^b	Copay and Deductible Apply for Supplemental Screening
CT	10/1/2009	R	Yes	Dense ^c	No	No	Yes	No	Yes	If dense, US; if high-risk, US or MRI ^d . All women, 3D (1/1/17)	Yes; \$20 maximum for US
TX	9/1/2011	R	Yes ^e	All ^c	No	No	Yes	Yes	Yes	All women, 3D (9/1/17)	No
UT	5/8/2012	S	No	Dense	Yes	No	No	No	Yes		
VA	7/1/2012, amended 7/1/2013	R	Yes	Dense	Yes	No	Yes	Yes	Yes		
NY	1/19/2013	R	Yes	Dense	Yes	No	Yes	Yes	Yes	All women, screening (all modalities) + diagnostic breast imaging (1/1/17)	No
CA	4/1/2013 ^f	R	Yes	Dense	Yes	No	No	Yes	No		
AL	8/1/2013	R	Yes	Dense	Yes	No	Yes	Yes	Yes		
MD	10/1/2013	R	Yes	All	No	No	Yes	Yes	No	All women, 3D (1/1/18)	Yes
IL	1/1/2014	Neither ^g	N/A	N/A	N/A	N/A	N/A	N/A	N/A	If dense, US, 3D, MRI (1/1/18)	No
TN	1/1/2014	R	Yes ^e	Dense	Yes	No	No	Yes	No		
HI	1/1/2014	R	Yes	Dense	Yes	No	Yes	Yes	Yes		
NV	1/1/2014, amended 7/1/2015	R	Yes	All	Yes	Yes	No	Yes	No		
OR	1/1/2014	R	Yes	Extremely Dense	Yes	No	Yes	Yes	Yes		
NC	1/1/2014	R	Yes	Dense	Yes	Yes	Yes	Yes	No		
PA	1/30/2014	R	Yes	All	Yes	Yes	Yes	Yes	No	All women, 3D (10/1/15)	No
NJ	5/1/2014	R	Yes	All	No	No	Yes	Yes	No	If extremely dense or as determined by health care provider, not modality specific	Yes

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MN	7/1/2014	R	No	Dense	Yes	No	Yes	Yes	No		
RI	10/1/2014	R	Yes	Dense	Yes	Yes	Yes	Yes	Yes		
AZ	10/1/2014	R	Yes	Dense	Yes	No	Yes	Yes	No		
MO	1/1/2015	R	Yes ^e	All	No	No	Yes	Yes	Yes		
MA	1/1/2015	R	No	Dense	Yes	Yes	Yes	Yes	Yes		
OH	3/19/2015	R	Yes	Dense	Yes	No	Yes	Yes	No		
ND	4/8/2015 ^h	R-expired	No	Dense	Yes	No	Yes	Yes	No		
MI	6/1/2015	R	Yes	Dense	Yes	No	Yes	Yes	Yes		
ME ⁱ	N/A	S	No	Dense	Yes	No	Yes	Yes	Yes		
DE ^j	12/21/2015	R	No	All	Yes	Yes	Yes	Yes	Yes		
LA	1/1/2016	R	Yes	All	No	No	Yes	Yes	Yes		
SC	5/12/2016	R	Yes	"Where applicable"	Yes	No	No	Yes	No		
IN ^k	7/1/2016	R	No	Unclear	No	No	No	No	No	If dense, not modality specific	Yes
OK	11/1/2016	R	Yes	Dense	Yes	Yes	Yes	Yes	No		
VT	1/15/2017	R	No	Dense	Yes	Yes	Yes	Yes	No		
KY	7/3/2017 ^l	R	Yes	Dense	Yes	No	Yes	Yes	No	All women, 3D	No
NE	7/24/2017	R	No	All	Yes	Yes	Yes	Yes	No		
AR	8/3/2017 ^m	Neither	N/A	N/A	N/A	N/A	N/A	N/A	N/A	All women, 3D; if dense, US	Yes
CO	10/1/2017	R	Yes	Dense	Yes	No	No	Yes	No		
IA	11/15/2017	R	No	All	Yes	Yes	TBD	Yes	No		

Abbreviations used: R = required; S = suggested; 3D = 3D mammography (tomosynthesis); US = ultrasonography; MRI = contrast-enhanced breast magnetic resonance imaging; N/A = not applicable; TBD = to be determined.

^a "Supplemental screening tests mentioned" indicates state inform law requires the notification to mention imaging tests that might be added to mammography (generally or by modality). State inform laws that mention only "screening options" have been excluded as this language may be interpreted to refer to screening frequency.

^b A state insurance law does not necessarily apply to all policies within the state. Further, national insurance providers may be exempt from state laws.

^c "Dense" refers to women with heterogeneously dense or extremely dense breasts per the mammography report. "All" means every woman receives some notification post-mammogram.

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^d Benefits must also include screening MRI of an entire breast or breasts in accordance with guidelines established by the American Cancer Society.

^e State law requires notification but does not specify that notification must be included in the patient letter

^f Sunset Clause, 1/1/2019

^g Not a density inform law. A law was passed which directs, from funds made available for this purpose, publication of a summary outlining methods for the early detection and diagnosis of breast cancer. The material is to include the meaning and consequences of "dense breast tissue" under the guidelines of the Breast Imaging Reporting and Data System of the American College of Radiology.

^h Sunset Clause, 7/31/2017; law no longer in effect.

ⁱ No law, however, a state Work Group recommended Maine radiologists voluntarily communicate information about breast density to women with heterogeneously or extremely dense breasts in the letter sent to them after their mammograms.

^j No language specifically required, however Delaware mammography facilities have been provided sample wording to use based on guidelines from the American College of Radiology (ACR). The notification will include the patient's breast density based on the ACR Breast Imaging Reporting and Data System (BI-RADS), and awareness statements about breast density. It will also include notice to patients to use this information to guide discussions about screening with their referring physicians. Table data completed on assumption facilities will utilize ACR sample lay letter: Negative or Benign Finding(s) / dense tissue (<http://www.acr.org/Quality-Safety/Accreditation/Mammography/Lay-Letters>)

^k Not specified. The law does not provide specific guidelines, suggest/recommend reporting language or require that a patient be provided information on breast density in clear language.

Law specifies only that if imaging facility determines patient has "an amount of breast and connective tissue in comparison to fat in the breast" the facility shall notify the patient of the determination.

^l Sunset Clause, 1/1/2021

^m Not a density inform law; insurance only

DenseBreast-info.org endeavors to provide an informed interpretation of the state laws as they relate to breast density; however, state legislative language varies and can be complex or vague. These codes may not be the most recent version; a state may have more current, amended or accurate information. No representations or warranties of any kind are made, express or implied, about the completeness, accuracy or reliability of the information or interpretation provided. Questions about a state law should be directed to that state's legislature.