

Comparative Analysis of State Density Inform Efforts and Insurance Coverage

**States listed in alphabetical order*

State	"Inform" Law 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	Insurance: 3D and/or Supplemental Screening Coverage ^{b,c}	Insurance: Copay and Deductible Apply for Supplemental Screening ^c
AL	8/1/2013	R	Yes	Dense	Yes	No	Yes	Yes	Yes		
AR	8/2017 ^m amended 8/2019 ^m , 8/2021 ^m	Neither	N/A	N/A	N/A	N/A	N/A	N/A	N/A	All women, 3D; ages 35-40 mammo; if dense, US (8/2017)	No (amendment, effective 8/21)
AZ	10/1/2014	R	Yes	Dense	Yes	No	Yes	Yes	No	Screening, diag imaging based on NCCN high-risk recommendations, includes 3D/mammo, MRI, US or other (90 days after 2023 session ends)	Yes
CA	4/1/2013 ^f	R	Yes	Dense	Yes	No	No	Yes	No		
CO	10/1/2017	R	Yes	Dense	Yes	No	No	Yes	No	If high risk, dense or diag, "non-invasive" modality coverage (1/1/21)	No, if "non-invasive"
CT	10/1/2009	R	Yes, if dense ^p	All, general info If dense, supplemental screening info ^p	No	No	Yes	No	Yes, if dense	If dense or at increased risk, US (10/1/06); High-risk, MRI (1/1/12) ^d ; All women, 3D (1/1/17); mammo ages 35-39 (1/1/20), Or ages <35 if increased risk (1/1/23)	Yes; US \$20 maximum copay (1/1/15), \$20 maximum out of pocket (1/1/20) 3D, no (1/1/19) US, MRI, no (10/1/21)
DC ^t	3/22/2019	R	Yes	Dense	Yes	Yes	Yes	Yes	Yes	All women, 3D; if dense/high-risk, US, MRI, MBI (3/22/19)	No, 3D Yes, all else
DE ^l	12/21/2015	R	No	All	Yes	Yes	Yes	Yes	Yes		

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FL	7/1/2018 ^g	R	Yes	Dense	Yes	No	Yes	Yes	No		
GA	7/1/2019	R	Yes	Dense	Yes	No	Yes	Yes	Yes	All women, diag imaging; supplemental based on NCCN guidelines (1/1/23)	No
HI	1/1/2014	R	Yes	Dense	Yes	No	Yes	Yes	Yes		
IA	11/15/2017	R	No	All	Yes	Yes	Possibly ⁿ	Yes	No		
IL	1/1/2019 ^e	R	No ^f	Dense	Yes	No	Yes	Yes	No	Diag mammo (1/1/20); Screening: if dense, US (3/27/09); all, 3D (7/1/16); high-risk, MRI (1/1/18)	No
IN ^k	7/1/2016	R	No	Unclear	No	No	No	No	No	If dense, not modality specific (7/1/13)	Yes
KY	7/1/2017, expired 1/1/2021; reinstated 7/1/2021 ^l	R	Yes	Dense	Yes	No	Yes	Yes	No	All women, 3D (on/about 7/3/17)	No
LA	1/1/2016	R	Yes	All	No	No	Yes	Yes	Yes	All women, 3D (1/1/19); all women screening US, diag mammo/US (1/1/21); pathogenic mutation/chest wall radiation age >25, MRI, age >30, mammo; high-risk age >35 mammo/MRI; dense, prior history age <50, supplemental imaging (1/1/22)	No, mammogram, screening US, diagnostic mammogram (1/1/21) Coverage ambiguous, (amendments 1/1/22)

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MA	1/1/2015	R	No	Dense	Yes	Yes	Yes	Yes	Yes		
MD	10/1/2013, amended 10/1/2017	R	Yes	All	No	No	Yes	Yes	No	All women, 3D (1/1/18); Supplemental MRI, US; diag mammo, MRI, US (1/1/24)	Yes, 3D No, all else (1/1/24)
ME ⁱ	N/A	S	No	Dense	Yes	No	Yes	Yes	Yes		
MI	6/1/2015	R	Yes	Dense	Yes	No	Yes	Yes	Yes		
MN	7/1/2014	R	No	Dense	Yes	No	Yes	Yes	No	Dense or other risk, 3D (1/1/20)	No
MO	1/1/2015	R	Yes ^e	All	No	No	Yes	Yes	Yes	All women, 3D (1/1/19); Medically necessary, not not modality specific; above-average risk, US, MRI (08/28/20 ^u)	No, 3D Yes, all else No, all else (amendment, effective 1/1/24)
MT	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Supplemental US, MRI; diag imaging (10/1/23)	No
NC	1/1/2014	R	Yes	Dense	Yes	Yes	Yes	Yes	No		
ND	4/8/2015 ^h	R-expired	No	Dense	Yes	No	Yes	Yes	No		
NE	7/24/2017	R	No ^f	All	Yes	Yes	Yes	Yes	No	Mammo/3D age 35-39; Increased risk based on NCCN guidelines, mammo, 3D, US, diag MRI; dense, US; dense and increased risk, MRI (1/1/24)	Yes, if only risk is dense, MRI No, all else

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NH	8/7/18 ^m amended 9/10/19	Neither	N/A	N/A	N/A	N/A	N/A	N/A	N/A	All women, 3D (8/7/18)	Yes (amendment 9/10/19)
NJ	5/1/2014	R	Yes	All	No	No	Yes	Yes	No	All women, 3D (8/1/18) If extremely dense, US, MRI (5/1/14)	No, 3D Yes, all else
NM	7/1/2019	R	Yes	Dense	Yes	Yes	No	Yes	No	Supplemental US, MRI; diag imaging (1/1/24)	No
NV	1/1/2014, amended 7/1/2015	R	Yes	All	Yes	Yes	No	Yes	No		
NY	1/19/2013	R	Yes	Dense	Yes	No	Yes	Yes	Yes	All women, screening + diag breast imaging including diag mammo, US, MRI (1/1/17); ages 35-39, mammo (9/1/19)	No
OH	3/19/2015 amended 9/23/2022	R	Yes	Dense	Yes	No	Yes	Yes	No Yes (9/23/22)	All women, 3D; supplemental screening based on ACR guidelines if dense or increased risk (9/23/22)	Yes
OK	11/1/2016	R	Yes	Dense	Yes	Yes	Yes	Yes	No	All women, 3D (11/1/18); Diag mammo ages 35-39 every 5 years, age 40+ annually; diag exams/other modalities (11/1/22)	No
OR	1/1/2014	R	Yes	Extremely Dense	Yes	No	Yes	Yes	Yes		

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PA	1/30/2014	R	Yes	All	Yes	Yes	Yes	Yes	No	All women, 3D (10/1/15); if extremely dense, high-risk, or heterogeneously dense + high-risk, US, MRI (8/30/20 ^h); all costs associated with 1 annual supp screening (1/1/25)	No, 3D Yes, all else No, all else (May 2023 amendment - effective on plan renewals by 1/1/25)
RI	10/1/2014	R	Yes	Dense	Yes	Yes	Yes	Yes	Yes	<5-year survivor/high risk/high risk lesion, 2 screening mammos/year; dense, screening per ACR guidelines incl. MRI, US, or MBI	Yes
SC	5/12/2016	R	Yes	"Where applicable"	Yes	No	No	Yes	No		
SD	7/1/2019	R	Yes	Dense	Yes	Yes	Yes	Yes	Yes		
TN	1/1/2014, amended 7/1/2018	R	Yes ^e	Dense	Yes	No	Yes, amendment	Yes	Yes, amendment	Mammo, baseline ages 35-40, annually ages 35-40 if personal/family history, dense breasts or other risk factors; annually ages 40+; supplemental breast screening if personal and/or family history, dense breasts or other risk factors (effective 5/25/22)	Yes No (amendment, effective 8/9/23)

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TX	9/1/2011	R	Yes ^e	All ^c	No	No	Yes	Yes	Yes	All women, 3D (9/1/17); If personal history or dense, US/MRI; diag imaging (9/1/21)	No
UT	5/8/2012, amended 5/8/2018	R, amendment	Yes	Dense ^c	Yes	No	Yes	Yes	No		
VA	7/1/2012, amended 7/1/2013	R	Yes	Dense	Yes	No	Yes	Yes	Yes		
VT	1/15/2017	R	No ^f	Dense	Yes	Yes	Yes	Yes	No	All women, 3D; if dense, US (1/1/19 ^g)	No
WA	1/1/2019 ^o	R	Yes	Dense	Yes	Yes	No	Yes	No	All women, 3D (6/7/18); Supplemental US, MRI; diag imaging (7/23/23)	No
WI	4/4/2018	R	No ^f	Dense	Yes	No	Yes	Yes	No		

R = required; S = suggested; 3D = 3D mammography (tomosynthesis); US = ultrasonography; MRI = contrast-enhanced breast magnetic resonance imaging; N/A = not applicable

- ^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.
- ^b3D screening benefit guaranteed at age 40 or above, if younger under certain circumstances.
- ^cOut-of-state, federal, and employer insurance plans set up as “self funded” (check with your benefit administrator) do not, generally, have to comply with state insurance laws. Check with your insurance company regarding details of your coverage.
- ^d“Dense” refers to women with heterogeneously or extremely dense breasts per the mammogram report. “All” means every woman receives some notification post-mammogram.
- ^eBenefits must also include screening MRI of an entire breast or breasts in accordance with guidelines established by the American Cancer Society for an insured aged 35+ or younger if believed to be at increased risk (1/1/2023).
- ^fState law requires notification but does not specify that notification must be included in the patient letter
- ^gSunset Clause, 1/1/2025
- ^hDirects patients to their breast imaging health provider for questions
- ⁱSunset Clause, 7/31/2017; law no longer in effect.
- ^jNo 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.
- ^kNo 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>)
- ^lNot 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.
- ^mOn or about 7/1/2021; Sunset Clause, 1/1/2025
- ⁿNot a density inform law; insurance only
- ^oState law requires notification about “...the effects of dense breast tissue on screening mammography...”, however no specific language is required.
- ^pBecomes law on 6/7/2018, compliance required by 1/1/2019. Sunset Clause, 1/1/2025
- ^qAll women receive “information about breast density.” No further specifications are provided. The law additionally states that “where applicable” notification is required about supplemental screening. “Where applicable” has been interpreted to mean women with heterogeneously or extremely dense breasts.
- ^rSunset Clause, 6/30/2023, extended to 9/10/2024.
- ^sInform language must be “substantially similar” to that included in the law
- ^tEffective January 1, 2019 on such date as a health insurer offers, issues, or renews the health insurance plan, but in no event later than January 1, 2020
- ^uThe District of Columbia is not a U.S. state
- ^vSubject to individual policy applicability date, issuance or renewal date

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.