

116TH CONGRESS
1ST SESSION

H. R. 1370

To amend title XVIII of the Social Security Act to provide coverage for custom fabricated breast prostheses following a mastectomy.

IN THE HOUSE OF REPRESENTATIVES

FEBRUARY 26, 2019

Ms. JUDY CHU of California (for herself and Mrs. WALORSKI) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To amend title XVIII of the Social Security Act to provide coverage for custom fabricated breast prostheses following a mastectomy.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE; FINDINGS.**

4 (a) **SHORT TITLE.**—This Act may be cited as the
5 “Breast Cancer Patient Equity Act”.

6 (b) **FINDINGS.**—Congress finds the following:

7 (1) There are currently more than 3,500,000
8 women with a history of breast cancer in the United

1 States, many of whom experience unreconstructed
2 breast loss.

3 (2) In 2018, more than 260,000 women were
4 diagnosed with invasive breast cancer that required
5 surgery, with many having to undergo surgical
6 breast removal.

7 (3) In 2018, more than 40,000 women in the
8 United States are expected to die from breast can-
9 cer.

10 (4) Annually, there are 144,000 women in the
11 United States who undergo mastectomies, a surgical
12 removal of the breast.

13 (5) The number of breast mastectomies in the
14 United States has increased among younger women,
15 ages 18 to 34 years old, at a rate of 30 percent and
16 at a rate of 15 percent for women ages 35 to 44
17 years old.

18 (6) The results of breast reconstruction surgery
19 can vary and, as with any surgical procedure, there
20 are inherent risks associated with such surgery. Ad-
21 ditionally, reconstruction of the breast using im-
22 plants requires lifelong follow up to ensure the
23 health of the patient.

24 (7) While the number of women choosing to un-
25 dergo surgical breast reconstruction continues to in-

1 crease, many women continue to lack the viable op-
2 tion of custom fabricated prosthetic breasts to re-
3 store the lost breast.

4 (8) Both older women and minority women are
5 less likely to be offered or undergo surgical breast
6 reconstruction and are disproportionately disadvan-
7 taged by a lack of access to the option of custom
8 fabricated prosthetic breasts.

9 (9) Currently, the Medicare program provides
10 coverage and reimbursement for custom fabricated
11 prostheses for any body part, with the exception of
12 breasts, that has been lost.

13 (10) Following passage of the Women’s Health
14 and Cancer Rights Act of 1998 (Public Law 105–
15 277; 42 U.S.C. 201 note), many private insurers
16 and group health plans began to provide coverage
17 for custom fabricated breast prostheses as an alter-
18 native to surgical breast reconstruction.

19 (11) While the Medicare program recognizes
20 custom fabricated breast prostheses as a discrete de-
21 vice and valid treatment option, having assigned a
22 billing code for such option under the Healthcare
23 Common Procedure Coding System (“HCPCS”) and
24 setting a maximum allowable fee, Medicare does not
25 provide reimbursement and denies claims as ‘not

1 medically necessary'. Medicare does provide reim-
2 bursement, however, for more costly surgical breast
3 reconstruction.

4 (12) Due to the fact that the Medicare program
5 does not provide reimbursement for custom fab-
6 ricated breast prostheses, many private insurance
7 companies have also begun to limit their reimburse-
8 ment for them.

9 (13) The Department of Veterans Affairs does
10 provide the option of a custom fabricated prosthetic
11 breast for women post-mastectomy.

12 (14) Providing coverage for custom fabricated
13 prosthetic breast devices and components will not in-
14 crease the incidence of breast mastectomies.

15 **SEC. 2. COVERAGE.**

16 (a) IN GENERAL.—Section 1861(s)(8) of the Social
17 Security Act (42 U.S.C. 1395x(s)(8)) is amended—

18 (1) by adding “and” after the semicolon at the
19 end;

20 (2) by inserting “(A)” after “(8)”; and

21 (3) by inserting after subparagraph (A) the fol-
22 lowing new subparagraph:

23 “(B) custom fabricated breast prostheses fol-
24 lowing surgical removal of the breast, including re-
25 placement of such prostheses;”.

1 (b) CONFORMING AMENDMENT.—Section 1862(a)(7)
2 of such Act (42 U.S.C. 1395y(a)(7)) is amended by strik-
3 ing “1861(s)(8)” and inserting “1861(s)(8)(A)”.

4 (c) EFFECTIVE DATE.—The amendments made by
5 this section shall apply to items and services furnished on
6 or after the date of enactment of this Act.

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