

SB 1137 A -A2 STAFF MEASURE SUMMARY

Joint Committee On Ways and Means

Prepared By: MaryMichelle Sosne, Fiscal Analyst

Meeting Dates: 5/27, 5/28

WHAT THE MEASURE DOES:

The measure requires health benefit plans that cover implant-based breast reconstruction procedures to cover autologous breast reconstruction procedures with terms and conditions no less favorable than implant-based procedures.

Detailed Summary:

Requires health benefit plans that provide implant-based breast reconstruction procedures to cover autologous breast reconstruction procedures with the same utilization review requirements and out-of-pocket costs.

- Defines “accepted standard of care,” “autologous breast reconstruction procedure,” and “revision to autologous breast reconstruction procedure.”
- Requires health benefit plans to provide all medically necessary inpatient and outpatient services for autologous breast reconstruction services.

Requires health benefit plans to satisfy network adequacy standards for coverage required by measure.

- Directs health benefit plans to contract with out-of-network providers on a case-by-case basis to ensure members can access coverage without “unreasonable delay.”

Exempts coverage requirement from automatic sunset. Applies to health benefit plans issued, renewed, or extended on or after January 1, 2026.

ISSUES DISCUSSED:

- Types of breast reconstruction procedures.
- Impact of the measure.

EFFECT OF AMENDMENT:

-A2 The amendment makes a correction on page 1 line 17 of the engrossed version of the bill, changing “muscle sparking” to “muscle sparing.”

BACKGROUND:

The Women’s Health and Cancer Rights Act of 1998 ([WHCRA](#)) is a federal law that requires group and individual health plans to cover services for patients who choose to have breast reconstruction in connection with a mastectomy. The most common breast reconstruction procedure is implant-based reconstruction, in which either silicone or saline implants are used to complete the reconstruction. Autologous breast reconstruction procedures use tissue from another part of a patient’s body to complete the reconstruction.

Senate Bill 1137 A requires a health benefit plan to cover implant-based and autologous breast reconstruction procedures in the same way, including parity in utilization review requirements and out-of-pocket costs.