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Vermont Department of Financial Regulation

Division of Insurance

Insurance Bulletin No.195

Coding of Screening Mammograms

It has been brought to the Department's attention that a small number of callback Screening mammograms have been coded so as to result in a financial obligation for insureds. 8 V.S.A. § 4100a requires that:

(a) Insurers shall provide coverage for screening by mammography for the presence of occult breast cancer, as provided by this subchapter. Benefits provided shall cover the full cost of the mammography service and shall not be subject to any co-payment, deductible, coinsurance, or other cost-sharing requirement or additional charge.

(d)(3) "Screening" includes the mammography test procedure and a qualified physician's interpretation of the results of the procedure, including additional views and interpretation as needed.

The Department understands that insurers are working with their contracted providers to assure compliance with this requirement. The Department encourages such communication and cooperation. The collaborative efforts promote required compliance, which will help produce better health outcomes, and provide efficiencies for insurers and their contracted providers in meeting the statutory requirement.

Dated:

10/4/17



Michael Pieciak, Commissioner

