



State and Federal Laws Relating to Cervical Cancer

**Division of Cancer
Prevention and Control**

Legislative Summary
January 1977 to May 2000



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention

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**Office of Program and Policy Information
Division of Cancer Prevention and Control
National Center for Chronic Disease Prevention
and Health Promotion
Centers for Disease Control and Prevention
4770 Buford Highway, NE (Mailstop K-64)
Atlanta, Georgia 30341**

EXECUTIVE SUMMARY

The Centers for Disease Control and Prevention (CDC) is working under federal mandate and with partners to conduct, fund, and support activities and programs for the prevention of cervical cancer. CDC recognizes that legislation is a very important public health tool in the fight against cervical cancer; therefore, as a service to its partners, CDC has compiled this digest of statutes regarding cervical cancer. The report includes relevant statutes enacted by states, the District of Columbia, and the federal government between January 1, 1977, and May 31, 2000. United States' territories, American Indian and Alaskan Native tribal organizations do not pass statutes. The statutes, which reflect the past and present concerns of legislatures regarding cervical cancer, are grouped into five major categories:

- Cervical cancer screening and/or education programs
- Funding for cervical cancer programs
- Reimbursement for cervical cancer screening
- Income tax checkoff for cervical cancer research
- Accreditation of facilities and technologists.

The statutes were identified and obtained by searching LEXIS-NEXIS, an online commercial information service. The statutes were reviewed for their relevance to the five categories of cervical cancer legislation above; those that were relevant are included in this report.

ANALYSIS OF RESULTS BY STATUTE CATEGORY

Cervical Cancer Screening and/or Education Programs

Eleven states and the federal government have created cervical cancer screening and education programs by statute. These public health programs provide many services, including cervical cancer screening for low-income or underserved populations, distribution of brochures or standardized summaries of treatment methods, operation of referral services and cancer registries, creation of advisory councils, and education of female students in public schools about cervical cancer screening.

Funding for Cervical Cancer Programs

CDC funds the National Breast and Cervical Cancer Early Detection Program in all states, the District of Columbia, 6 U.S. territories, 12 American Indian and Alaska Native tribal organizations. The participating entities support this detection program with \$1 of their own funds for every \$3 provided by CDC.

Only four states (Nebraska, Rhode Island, West Virginia, and Wisconsin), however, have established additional funds for cervical cancer programs that focus on screening, education, research, diagnosis, or treatment. In some states (Nebraska, Rhode Island, and West Virginia), patients must fulfill medical and financial criteria to be eligible for services reimbursed by these funds.

Reimbursement for Cervical Cancer Screening

Most jurisdictions have traditionally required insurance coverage of preventive care in general. In 1984, only one state (Virginia) specifically required that insurers cover cervical cancer screening. By the end of May 2000, the District of Columbia, 21 states, and the federal government had mandated health insurance reimbursement for cervical cancer screening for all

insured women. These statutes, most of which were enacted during or after 1991, typically apply to accident and health insurers, health maintenance organizations (HMOs), and hospital and medical service corporations ("the Blues"). Several states have separate provisions for public employee health insurance plans or Medicare supplement insurance, and some require coverage only if the insurer also covers laboratory services. By statute, mandated cervical cancer screening coverage specifically applies to Medicaid or comparable medical assistance programs in four jurisdictions (California, the District of Columbia, Ohio, and Virginia). By statute or agency policy, Medicaid or public assistance programs in all 50 states and the District of Columbia cover screening for cervical cancer either routinely or upon a physician's recommendation.

The statute abstracts related to this category indicate age and frequency requirements for cervical cancer screening. The majority of states mandate coverage of screening annually, or more often, based upon a physician's recommendation; however, most do not stipulate the age or frequency requirements for screening. Several states' coverage mandates include quality assurance requirements for cervical cancer screening; these provisions typically require laboratory facilities to meet the screening Pap test accreditation standards adopted by the state. Coverage may also include a physician's interpretation of the results.

Income Tax Checkoff for Cervical Cancer Research

Two states, Illinois (1993) and Pennsylvania (1997), have enacted laws that enable taxpayers to contribute to state cervical cancer funds via income tax checkoffs. Contributions can be designated on individual or corporate income tax returns. The funds are used to support cervical cancer research or screening and education programs within the state.

Accreditation of Facilities and Technologists

Only one state has enacted a law related to accreditation. In 1988, New York enacted a law (last amended in 1994) that requires a limit on the number of Pap tests cytotechnologists may examine during a particular time period and a limit on the quantity, speed, and manner of slide examination by cytotechnologists.

TABLES

Tables I through III provide a snapshot of cervical cancer legislation by enactor (state, District of Columbia, or federal government). Table I shows cervical cancer laws by category and enactor. Table II provides a snapshot of cervical cancer laws by enactor, category of cervical cancer law, and year the law was enacted. Table III shows laws relating to reimbursement for cervical cancer screening by enactor and type of provision enacted.

TABLE I
CERVICAL CANCER LAWS BY CATEGORY AND ENACTOR
(JANUARY 1977 TO MAY 2000)

Enactor	Category of Cervical Cancer Law				
	Cervical Cancer Screening and/or Education Programs	Funding for Cervical Cancer Programs*	Reimbursement for Cervical Cancer Screening	Income Tax Checkoff for Cervical Cancer Research	Accreditation of Facilities and Technologists
United States	•		•		
District of Columbia			•		
Alabama					
Alaska			•		
Arizona					
Arkansas					
California	•		•		
Colorado					
Connecticut	•				
Delaware			•		
Florida					
Georgia	•		•		
Hawaii					
Idaho					
Illinois	•		•	•	
Indiana					
Iowa					
Kansas			•		
Kentucky					
Louisiana	•		•		
Maine					
Maryland	•				
Massachusetts	•				
Michigan					
Minnesota			•		
Mississippi					
Missouri			•		

*This category includes funding for cervical cancer diagnostic, public education, referral, research, screening, and treatment programs.

TABLE I (CONTINUED)
CERVICAL CANCER LAWS ENACTED BY CATEGORY AND ENACTOR
(JANUARY 1977 TO MAY 2000)

Enactor	Category of Cervical Cancer Law				
	Cervical Cancer Screening and/or Education Programs	Funding for Cervical Cancer Programs	Reimbursement for Cervical Cancer Screening	Income Tax Checkoff for Cervical Cancer Research	Accreditation of Facilities and Technologists
Montana					
Nebraska	•	•			
Nevada			•		
New Hampshire					
New Jersey	•		•		
New Mexico					
New York	•		•		•
North Carolina			•		
North Dakota					
Ohio			•		
Oklahoma					
Oregon			•		
Pennsylvania			•	•	
Rhode Island		•	•		
South Carolina			•		
South Dakota					
Tennessee					
Texas					
Utah					
Vermont					
Virginia			•		
Washington					
West Virginia	•	•	•		
Wisconsin		•			
Wyoming			•		

TABLE II
CERVICAL CANCER LEGISLATION BY ENACTOR,
CATEGORY OF CERVICAL CANCER LAW, AND YEAR LAW WAS ENACTED
(JANUARY 1977 TO MAY 2000)

Category of Cervical Cancer Law	Year Enacted and Enactor						Total
	1977 to 1996	1996	1997	1998	1999	2000	
Cervical Cancer Screening and/or Education Programs	United States California Georgia Louisiana Maryland Nebraska New Jersey New York West Virginia	Connecticut Maryland	Massachusetts	Nebraska		Nebraska Illinois	12
Funding for Cervical Cancer Programs*	Nebraska West Virginia Wisconsin		Rhode Island		Nebraska	Nebraska	4
Reimbursement for Cervical Cancer Screening	District of Columbia California Georgia Kansas Louisiana Minnesota Nevada New Jersey New York North Carolina Oregon Pennsylvania Rhode Island Virginia West Virginia	Alaska Virginia West Virginia	Illinois Virginia	Delaware South Carolina Wyoming	Missouri Ohio	United States**	23
Income Tax Checkoff for Cervical Cancer Research	Illinois		Pennsylvania				2
Accreditation of Facilities and Technologists	New York						1

*This category includes funding for cervical cancer diagnostic, public education, referral, research, screening, and treatment programs.

** Law establishes a national minimum payment amount for a diagnostic or screening Pap test. See p. 19.

TABLE III
LAWS ON REIMBURSEMENT FOR CERVICAL CANCER SCREENING
BY ENACTOR AND TYPE OF PROVISION ENACTED
(JANUARY 1977 TO MAY 2000)

Enactor	Type of Provision Enacted				
	Mandate Applies to Reimbursement for Cervical Cancer Screening	Mandate Applies to Medicaid or Public Assistance	Mandate References Public Employee Health Benefits	Mandate Applies to Medicare Supplement Insurance	Mandate Includes an Age and Frequency Provision
United States	•				
District of Columbia	•	•			
Alabama					
Alaska	•				•
Arizona					
Arkansas					
California	•	•			
Colorado					
Connecticut					
Delaware	•				
Florida					
Georgia	•				
Hawaii					
Idaho					
Illinois	•				
Indiana					
Iowa					
Kansas	•				
Kentucky					
Louisiana	•		•		
Maine					
Maryland					
Massachusetts					
Michigan					
Minnesota	•			•	
Mississippi					
Missouri	•				

TABLE III (CONTINUED)
LAWS ON REIMBURSEMENT FOR CERVICAL CANCER SCREENING
BY ENACTOR AND TYPE OF PROVISION ENACTED
(JANUARY 1977 TO MAY 2000)

Enactor	Type of Provision Enacted				
	Mandate Applies to Reimbursement for Cervical Cancer Screening	Mandate Applies to Medicaid or Public Assistance	Mandate References Public Employee Health Benefits	Mandate Applies to Medicare Supplement Insurance	Mandate Includes an Age and Frequency Provision
Montana					
Nebraska					
Nevada	•				•
New Hampshire					
New Jersey	•				•
New Mexico					
New York	•				•
North Carolina	•		•		
North Dakota					
Ohio	•	•	•		
Oklahoma					
Oregon	•				•
Pennsylvania	•				
Rhode Island	•				
South Carolina	•				
South Dakota					
Tennessee					
Texas					
Utah					
Vermont					
Virginia	•	•	•		
Washington					
West Virginia	•		•		•
Wisconsin					
Wyoming	•				

CDC'S NATIONAL BREAST AND CERVICAL CANCER EARLY DETECTION PROGRAM: A FEDERALLY MANDATED PROGRAM

CDC is working under federal mandate and with states, U.S. territories, American Indian and Alaska Native tribal organizations, and other partners to conduct, fund, and support activities and programs for the prevention of cervical cancer. CDC recognizes that legislation is a very important public health tool in the fight against cervical cancer; therefore, as a service to its partners, CDC has compiled this digest of statutes regarding cervical cancer. This section describes CDC's federally mandated National Breast and Cervical Cancer Early Detection Program (NBCCEDP).

In 1990, federal legislation established the NBCCEDP. The program's goal is to increase the early detection of breast and cervical cancer. The program provides breast and cervical cancer screening exams and referral services to underserved women, including those who are older, have low incomes, or are members of racial and ethnic minority groups. Programs also support public education, professional education, quality assurance, surveillance, program evaluation, and administration. The federal law created a comprehensive approach to controlling cervical cancer.

The program operates in all 50 states, the District of Columbia, 6 U.S. territories, and 12 Native Indian/Alaska Native tribal organizations. Screening services provided by the program include clinical breast examinations, mammograms, pelvic examinations, and Pap tests. Postscreening diagnostic services, such as surgical consultation and biopsy, are also funded by the program to ensure that all women with abnormal screening results receive timely and adequate diagnostic evaluation and treatment referrals.

A budget of more than \$160 million in FY 2000 is enabling CDC to increase education and outreach programs for women and health care providers, improve quality assurance measures for screening, provide enhanced case management services, and improve access to screening and follow-up services.

The NBCCEDP has made significant progress in building state partnerships to serve women. Five states (Connecticut, Nebraska, New York, Rhode Island, and West Virginia) have created federally funded cervical cancer early detection programs by statute. State health agencies contract with a broad range of provider agencies on the basis of available resources, to deliver screening services. In Nebraska, for example, the state contracts directly with health clinics of Nebraska's federally recognized American Indian tribal organizations, Indian health organizations, or other public health organizations that have a substantial American Indian clientele to provide cervical cancer screening and early detection services targeted to American Indian populations (see p. 42). The success of NBCCEDP over the past decade has contributed to the growing pressure on state legislatures to focus more attention on cervical cancer prevention and control.

Nationwide Program Accomplishments (1990 through September 1999)

- **Nearly 1.2 million mammograms provided.**
- **More than 1.3 million Pap tests provided.**
- **More than 7,300 breast cancers diagnosed.**
- **More than 37,000 precancerous cervical lesions diagnosed.**
- **More than 600 cervical cancers diagnosed.**

Research

CDC conducts and supports research through this program, providing information that can be used to protect women from breast and cervical cancer in all other arenas. For example, available data suggest mammography rescreening rates are low among women in the program, despite their access to free examinations. Comparing mammograms taken over time for each woman is essential for early detection of changes in the breast, particularly those that might lead to cancer. CDC is conducting a study to determine valid, precise estimates of mammography rescreening rates in the program and the risk factors that contribute to women not being rescreened on schedule. This information can be used to identify the women most at risk of not being rescreened and to help overcome the identified barriers and risk factors.

Programs

Working with health care professionals and organizations, human services and voluntary organizations, academia, and health agencies, CDC provides effective outreach programs. CDC funds a strong and effective network of partners that are well-positioned in communities at risk. These partners have developed projects that are focused on underserved populations and cover a wide range of public and professional education interventions. For example, many projects are involved with developing low-literacy, bilingual, and culturally appropriate educational materials that are used in diverse training and outreach programs and educational campaigns. The various interventions used by the different projects contribute to the common goal of increasing access to and use of screening services among priority populations.

Quality Control

CDC provides national guidance and support to ensure that professional and medical services related to cervical cancer screening incorporate current techniques and best practices. CDC also provides screening and diagnostic guidelines to all funded programs, assists them in evaluating their clinical services, and distributes case management procedures and policies to them.

Training

Through professional education services, NBCCEDP has helped a wide range of health care professionals—including physicians, nurses, radiology technologists, and cytologists—better understand and perform their key roles in the early detection of breast and cervical cancer.

For example,

- CDC's national training center for cancer detection and prevention has recently developed a self-study packet with a videotape to help providers—particularly those in rural areas—improve follow-up of women who have abnormal screening results from clinical breast examinations and mammograms. The training center also offers American Indian nurses “Native Web” training to enhance their clinical breast examination skills.
- Professional education opportunities are also offered through the program's state, tribal, and territorial programs. For example, the Kentucky Cancer Program offers a self-study kit to help primary care physicians increase and improve routine breast and cervical cancer screenings. The program features a videotape discussing communication strategies, physical examination recommendations and techniques, risk management, and office reminder systems.

LIST OF STATUTES BY STATE AND NUMBER

United States

42 USCS §§ 300k, 300l, 300l-1, 300m, 300n to 300n-5
42 USCS § 13951(h)

District of Columbia

D.C. Code §§ 35-2401 to 35-2403

Alaska

Alaska Stat. § 21.42.395

California

Cal. Health & Saf Code § 1367.66
Cal. Ins Code § 10123.18
Cal. Wel & Inst Code § 14132.17
Cal. Health & Saf Code § 104880

Connecticut

Conn. Gen. Stat. § 19a-266

Delaware

18 Del. C. § 3552

Georgia

O.C.G.A. § 31-15-5
O.C.G.A. §§ 33-29-3.2, 33-30-4.2

Illinois

20 ILCS 2310/2310-425
215 ILCS 5/356u
20 ILCS 2310.55.70, 35 ILCS 5/507L, 35 ILCS 5/509, 35 ILCS 5/510, 1999 ILL. ALS 107

Kansas

Kan. Stat. Ann. §§ 40-2229, 40-2230

Louisiana

La. R.S. 17:275
La. R.S. § 22:215.11

Maryland

Md. HEALTH-GENERAL Code Ann § 18-303
Md. HEALTH-GENERAL Code Ann § 19-348

Massachusetts

Mass. Ann. Laws Ch. 111, § 4K

Minnesota

Minn. Stat. §§ 62A.30, 62A.315, 62A.316

Missouri

§ 376.1250 R.S.Mo.

Nebraska

R.R.S. Neb. §§ 71-7001.01, 71-7010, 71-7012
R.R.S. Neb. § 71-7614
R.R.S. Neb. § 71-7617
1999 Neb. ALS 480, 1999 Neb. Laws 480, 1999 Neb. LB 480

Nevada

Nev. Rev. Stat. Ann. §§ 689A.0405, 689B.0374, 695B.191, 695C.1735, 695B.1912

New Jersey

N.J. Stat. § 26:2-113
N.J. Stat. §§ 17:48-6i, 17:48A-7h, 17:48E-35.6, 17B:26-2.1h, 17B:27-46.1h, 26:2J-4.6
N.J. Stat. §§ 17:48-6O, 17:48A-7m, 17:48E-35.12, 17B:27-46.1n, 26:2J-4.12

New York

NY CLS Pub Health §§ 2406, 2408
NY CLS Pub Health § 2500-c
NY CLS Ins §§ 3216(15), 3221(14), 4303(t)
NY CLS Pub Health § 576-a

North Carolina

N.C. Gen. Stat. §§ 58-51-57, 58-65-92, 58-67-76, 58-50-155
N.C. Gen. Stat. §§ 135-40.5, 135-40.6(8)s

Ohio

ORC Ann. 1751.62, 3923.52 to 3923.54, 5111.024

Oregon

ORS § 743.728

Pennsylvania

40 P.S. §§ 1572, 1574
72 P.S. § 7315.2

Rhode Island

R.I. Gen. Laws §§ 23-67-1, 23-67-2
R.I. Gen. Laws §§ 5-37-32, 23-17-33, 27-18-41, 27-18-43, 27-19-20, 27-19-22, 27-20-17,
27-20-19, 27-41-30, 27-41-32, 42-62-28

South Carolina

S.C. Code Ann. § 38-71-145

Virginia

Va. Code Ann. § 38.2-3418.1:2
Va. Code Ann. § 2.1-20.1
Va. Code Ann. § 32.1-325

West Virginia

W. Va. Code Ann. §§ 16-33-1 to 16-33-12
W. Va. Code Ann. §§ 33-15-4c, 33-16-3g, 33-24-7b, 33-25-8a, 33-25A-8a
W. Va. Code Ann. §§ 5-16-7, 5-16-9

Wisconsin

Wis. Stat. § 255.07

Wyoming

Wyo. Stat. § 26-18-103

STATUTE ABSTRACTS

In most instances, the abstracts in this digest reflect the terminology used by the respective state legislature. Statutory citations appear at the beginning of each abstract indicating the location of the law in the current edition of the appropriate state code(s). The citations do not include Act and Bill numbers, except in one abstract of Nebraska law (1999 Neb. ALS 480, 1999 Neb. Laws 480, 1999 Neb. LB 480), which was not yet codified when this document was prepared. The abstracts indicate the effective dates of the statute and relevant amendments. Abstracts omit the dates of minor modifications or editorial changes found in subsequent amendments. Court or regulatory agency decisions may modify statutes.

For statutes mandating insurance coverage for specific procedures, the abstracts indicate the types of policies subject to the mandates and any limits on coverage. The abstracts also indicate if the insurance provisions contain any quality assurance requirements. Abstracts are organized alphabetically by state. Federal and District of Columbia abstracts are listed before state abstracts.

United States **42 USCS §§ 300k, 300l, 300l-1, 300m, 300n to 300n-5**

Scope Cervical Cancer Screening and Education Programs

Policies and Limits Law establishes the Centers for Disease Control and Prevention's National Breast and Cervical Cancer Early Detection Program. The program provides breast and cervical cancer screening exams to underserved women, including those who are older, have low incomes, or are members of racial and ethnic minority groups.

Law authorizes the Secretary of the U.S. Department of Health and Human Services, acting through the Director of the Centers for Disease Control and Prevention, to make grants to states for the purpose of carrying out statewide programs:

- To screen women for breast and cervical cancer as a preventive health measure. In the case of cervical cancer, both a pelvic examination and a Pap test are to be conducted.
- To provide appropriate referrals for medical treatment of women screened under the program and to ensure the provision of appropriate follow-up services and support services, such as case management.
- To develop and disseminate public information and education programs for the detection and control of breast and cervical cancer.
- To improve the education, training, and skills of health professionals (including allied health professionals) in the detection and control of breast and cervical cancer.
- To establish mechanisms through which the states can monitor the quality of screening procedures for breast and cervical cancer, including the interpretation of such procedures.
- To evaluate the activities, specified above, through appropriate surveillance or program-monitoring activities.

Law provides grant and contract authority of states. States may expend the federal grants to carry out the specified programs through grants to public and nonprofit private entities and through contracts with public and private entities.

Law authorizes the Secretary of Health and Human Services, acting through the Director of the Centers for Disease Control and Prevention, to establish a committee to coordinate the activities of the agencies of the Public Health Service (and other appropriate federal agencies) that are carried out toward achieving the objectives established by the Secretary for reductions in mortality rates from breast and cervical cancer in the United States by the year 2000.

Quality Assurance Not indicated.

Effective Date

August 10, 1990, effective date of U.S. Public Law 101-354; last amendment effective October 31, 1998.

United States 42 USCS § 13951(h)

Scope Reimbursement for Cervical Cancer Screening

Policies and Limits Law establishes a national minimum payment amount for a diagnostic or screening Pap test (including all cervical cancer screening technologies that have been approved by the Food Drug Administration as a primary screening method for detection of cervical cancer) equal to \$14.60 for tests furnished in the year 2000. For tests furnished in subsequent years, the national minimum payment amount shall be adjusted annually (to become effective on January 1 of each year) by a percentage increase or decrease equal to the percentage increase or decrease in the Consumer Price Index for All Urban Consumers (United States city average).

Quality Assurance Not indicated.

Effective Date January 1, 2000.

**District of
Columbia**

D.C. CODE §§ 35-2401 to 35-2403

Scope

Reimbursement for Cervical Cancer Screening

*Woman's Age,
Frequency
of Pap Test*

- Each year.
- Age not stipulated.

*Policies
and Limits*

Law requires insurers to provide benefits for annual cervical cytologic screening and cervical cytologic screening upon certification by an attending physician that the test is medically necessary.

Law applies to any individual or group health insurance policy or service, including Medicaid, offered by Group Hospitalization and Medical Services, Inc., a health insurance company, a health self-insured, an insurance purchasing trust, or any health maintenance organization.

Law does not apply to hospital indemnity policies, disability insurance policies, accident only policies, or student accident policies.

Law defines "cytologic screening."

Quality Assurance

Not indicated.

Effective Date

120 days after March 7, 1991.

Alaska

ALASKA STAT. § 21.42.395

Scope

Reimbursement for Cervical Cancer Screening

*Woman's Age,
Frequency
of Pap Test*

18+ Each year

*Policies
and Limits*

Law requires insurers to provide coverage for annual Pap test cancer screening.

Law applies to all health insurers, except for fraternal benefit societies, that offer, issue for delivery, deliver, or renew in the state of Alaska a health care insurance plan.

Quality Assurance

Not indicated.

Effective Date

September 18, 1996; last amendment effective July 1, 1997.

California

**CAL HEALTH & SAF CODE § 1367.66
CAL INS CODE § 10123.18**

Scope

Reimbursement for Cervical Cancer Screening

*Woman's Age,
Frequency
of Pap Test*

- Each year.
- Age not stipulated.

*Policies
and Limits*

Law requires health insurers to provide coverage for an annual cervical cancer screening test (upon referral by participating nurse practitioner, certified nurse midwife, or physician) if the policy or contract covers cervical cancer treatment or surgery.

Law applies to individual and group health care service plan contracts and disability insurance policies.

Law does not apply to supplemental policies covering a specified disease or other limited benefit.

Law does not establish a new mandated benefit or prevent application of deductible or copayment provisions in a policy or plan.

Quality Assurance

Not indicated.

Effective Date

January 1, 1991.

California

CAL WEL & INST CODE § 14132.17

Scope

Reimbursement for Cervical Cancer Screening

*Woman's Age,
Frequency
of Pap Test*

- Each year.
- Age not stipulated.

*Policies
and Limits*

Law states that Medi-Cal covers annual cervical cancer tests for screening or diagnostic purposes, upon the referral of a patient's physician.

Quality Assurance

Not indicated.

Effective Date

January 1, 1991.

California

CAL HEALTH & SAF CODE § 104880

Scope

Cervical Cancer Screening Program

Policies and Limits

Law provides for the referral of women who took diethylstilbestrol (DES) during pregnancy and their offspring who were exposed to DES prenatally for the purpose of follow-up care and treatment of long term problems associated with DES exposure. Law requires the designation of at least one program for screening and follow-up care for each health service area.

Law requires consideration of providers' compliance with state and federally mandated standards, the location in relation to the geographic distribution of persons exposed to DES, and the capacity of providers to properly screen for cervical cancer and any other malignancy and abnormal conditions resulting from DES exposure.

Law requires the designation of existing facilities presently serving the DES-exposed population as screening programs pursuant to this law. If existing positions are not available, training for screening and follow-up may be offered to the personnel in existing facilities and clinics.

Quality Assurance

Not indicated.

Effective Date

Before 1982; last amended in 1995.

Connecticut Conn. Gen. Stat. § 19a-266

Scope Cervical Cancer Screening and Education Programs

Policies and Limits Law establishes a breast and cervical cancer early detection and treatment referral program within the Department of Public Health. The program is to promote screening, detection, and treatment of breast and cervical cancer among unserved or underserved populations; to educate the public regarding cervical cancer and the benefits of early detection; and to provide counseling and referral services for treatment.

The program shall establish a public education and outreach initiative; develop professional education programs; and establish a tracking and follow-up system for all women screened under the program.

The Department of Public Health must provide unserved and underserved populations, within existing appropriations and through contracts with health care providers: (i) one Pap test for cervical cancer per year for unserved or underserved populations age 19 to 64 who have had a positive finding, otherwise one every 3 years or more frequently as directed by a physician; (ii) a 60-day follow-up Pap test for victims of sexual assault; and (iii) a Pap test every 6 months for women who have tested HIV positive.

The Department may accept funds from federal, other public, or private sources to support the program.

Quality Assurance The program shall ensure that participating providers are in compliance with national and state quality assurance legislative mandates.

Effective Date July 1, 1996.

Delaware

18 DEL. C. § 3552

Scope

Reimbursement for Cervical Cancer Screening

*Woman's Age,
Frequency
of Pap Test*

Not stipulated.

*Policies
and Limits*

Law requires all group and blanket health insurance policies, which are delivered or issued for delivery in Delaware by any health insurer or health service corporation, and which provide benefits for outpatient services to provide benefits for cervical cancer screening.

Quality Assurance

Not indicated.

Effective Date

Last amendment effective July 13, 1998.

Georgia

O.C.G.A. § 31-15-5

Scope

Cervical Cancer Screening and Education Programs

Policies and Limits

Law requires the Commissioner of Health, with the advice of the Cancer Advisory Committee, to:

- Develop standards for determining eligibility of patients for care and treatment under the program.
- Allocate state matching funds.
- Extend financial aid to cancer patients.
- Assist in the development and execution of programs for the early detection of cancer, including the Pap test for cervical cancer.
- Institute and support, directly or through health organizations such as the American Cancer Society and the Georgia Cancer Management Network, educational programs for physicians, providers of health care, and the public concerning cancer, including the dissemination of information regarding prevention, early detection, and treatment.
- Support a statewide cancer registry.

Quality Assurance

Not indicated.

Effective Date

1977.

Georgia

O.C.G.A. §§ 33-29-3.2, 33-30-4.2

Scope

Reimbursement for Cervical Cancer Screening

*Woman's Age,
Frequency
of Pap Test*

- Each year.
- Age not stipulated.

*Policies
and Limits*

Law requires insurers to offer coverage for annual Pap tests or more often if ordered by a physician.

Law applies to individual accident and sickness insurance policies issued by fraternal benefit societies, nonprofit hospital service corporations, nonprofit medical service corporations, health care plans, health maintenance organizations, or similar entities.

Law states that any exclusions, reductions, or limitations on coverages, deductibles, or coinsurance provisions must apply generally to other similar benefits under the policy.

Law does not prohibit: (i) policies offering benefits greater than specified; (ii) payment or coinsurance differences between preferred and nonpreferred providers.

Law defines "Pap test."

Quality Assurance

Not indicated.

Effective Date

July 1, 1992.

Illinois

20 ILCS 2310/2310-425

Scope

Cervical Cancer Screening and/or Education Programs

Policies and Limits

Law requires the Department of Public Health to publish in plain language, in both an English and a Spanish version, a pamphlet providing information regarding health care for women, which will include summaries of: (i) the various medical conditions, including cervical cancer, widely affecting women's reproductive health; and (ii) recommended schedule and indications for physical examinations, including Pap tests or other tests designed to detect medical conditions of the uterus and other reproductive organs.

Law requires the summary to be updated every 2 years.

Law requires the Department to distribute the summary to: (i) hospitals, public health centers, and physicians, who shall make the summaries available to the public; and (ii) any person, organization, or other interested parties upon request.

Law provides that the summary may be duplicated by any person provided the copies are identical to the current summary prepared by the Department.

Quality Assurance

Not indicated.

Effective Date

Last amendment effective January 1, 2000.

Illinois

215 ILCS 5/356u

Scope

Reimbursement for Cervical Cancer Screening

*Woman's Age,
Frequency
of Pap Test*

- Each year.
- Age not stipulated.

*Policies
and Limits*

Law requires insurers to provide coverage for annual Pap tests for female insureds.

Law applies to a group policy of accident and health insurance that provides coverage for hospital or medical treatment, or services for illness on an expense-incurred basis.

Law does not apply to agreements, contracts, or policies that provide coverage for a specified disease or other limited benefit coverage.

Quality Assurance

Not indicated.

Effective Date

June 10, 1997.

Illinois **20 ILCS 2310/55.70, 35 ILCS 5/507L, 35 ILCS 5/509,
35 ILCS 5/510, 1999 ILL. ALS 107**

Scope Income Tax Checkoff for Cervical Cancer Research

*Policies
and Limits* Law provides that Illinois shall include on its standard individual income tax form (beginning with taxable years ending December 31, 1999), a provision that will allow a taxpayer to indicate that he or she wishes to contribute to the Penny Severns Breast and Cervical Cancer Research Fund.

Law directs the Illinois Department of Public Health to award grants from the Penny Severns Breast and Cervical Cancer Research Fund to eligible physicians, hospitals, laboratories, educational institutions, and other organizations and persons for the conduct of research. Research includes expenditures to develop and advance the understanding, techniques, and modalities effective in the prevention, screening, early detection, treatment, and cure of breast and cervical cancer and may include clinical trials.

Law authorizes the Penny Severns Breast and Cervical Cancer Research Fund to include tax checkoff receipts and gifts, grants, and awards from private foundations, nonprofit organizations, and other governmental entities and persons.

Law directs the Department to create an advisory committee to include members from the Illinois Chapter of the American Cancer Society, Y-Me, and the State Board of Health for the purpose of awarding research grants. Members of the advisory committee shall not be eligible for any financial compensation or reimbursement.

Quality Assurance Not indicated.

Effective Date July 14, 1993; last amendment effective July 13, 1999.

Kansas

KAN. STAT. ANN. §§ 40-2229, 40-2230

Scope

Reimbursement for Cervical Cancer Screening

*Woman's Age,
Frequency
of Pap Test*

Not stipulated.

*Policies
and Limits*

Law requires health insurers to reimburse for Pap tests only if the policy already covers laboratory services. Law states that reimbursement shall not be denied for Pap tests when performed at the direction of a physician.

Law applies to individual, group, or blanket policies of accident and sickness; to medical or surgical expense coverage; and to health maintenance organization contracts.

Law does not apply to Medicare supplement policies, policies of long-term care, specified disease, specified accident, and accident-only coverage.

Law provides that deductibles, coinsurance, and other limitations apply to these benefits.

Quality Assurance

Not indicated.

Effective Date

July 1, 1988.

Louisiana

LA. R.S. 17:275

Scope

Cervical Cancer Screening and/or Education Programs

*Policies
and Limits*

Law requires public junior and senior high schools to provide instruction to all female students in the need for an annual Pap test for cervical cancer. Such instruction may be provided in the context of courses in the study of health, physical education, or such other appropriate curriculum or instruction period, as may be determined by the respective local school boards.

Law requires the instruction to be taught by a school nurse, physician, or competent medical instructor.

Law authorizes the local school boards to adopt rules and regulations necessary for the implementation of the program.

Law provides that a student, whose parent or tutor submits a written statement indicating that such instruction conflicts with the religious beliefs of the student, shall not be required to take such instruction.

Quality Assurance

Not indicated.

Effective Date

August 1, 1980.

Louisiana

LA. R.S. § 22:215.11

Scope

Reimbursement for Cervical Cancer Screening

*Woman's Age,
Frequency
of Pap Test*

- Each year.
- Age not stipulated.

*Policies
and Limits*

Law requires insurers to include benefits payable for an annual Pap test for cervical cancer.

Law applies to hospital, health, medical expense insurance policies; the state employees' group benefit program (effective July 1, 1998); hospital or medical service contracts; employee welfare benefit plans; health and accident insurance policies; or any other insurance contract of this type, including a group insurance plan; or any policy of family group, blanket, or franchise health and accident insurance; a self-insurance plan; an employee welfare benefit plan; and a health maintenance organization subscriber agreement.

Law does not apply to limited benefit and supplemental health insurance policies.

Law provides that the benefits are payable under the same circumstances and conditions as benefits paid under the policies for all other diagnoses, illnesses, or accidents.

Quality Assurance

Not indicated.

Effective Date

January 1, 1992; last amended 1997.

Maryland

MD. HEALTH-GENERAL CODE ANN § 18-303

Scope

Cervical Cancer Screening Program

Policies and Limits

Law provides for a statewide public information campaign on diethylstilbestrol (DES) to reach individuals who have been exposed to DES and each offspring of those individuals, to encourage them to seek medical care for the prevention or treatment of cancer that results from the exposure to DES.

Law requires an expansion of the existing cancer screening programs to detect any cancer or other abnormal condition that results from exposure to DES, including cervical cancer.

Law requires the establishment of a program to train physicians, physician's assistants, and nurses in: (i) identifying individuals who have been exposed to DES; (ii) diagnosing and treating any cancer or other abnormal condition that results from the exposure; and (iii) preventing exposure to DES.

Law states that a sliding fee schedule *may* be set for services provided. The state shall reimburse a provider of screening and diagnosis in the amount that the screening and diagnosis exceeds the total of the fee charged for the service and of all third party payments for the service.

Quality Assurance

Not indicated.

Effective Date

Last amendment effective June 1, 1995.

Maryland

MD. HEALTH-GENERAL CODE ANN § 19-348

Scope

Cervical Cancer Screening Program

*Woman's Age,
Frequency
of Pap Test*

Not stipulated.

*Policies
and Limits*

Law requires hospitals to offer to each adult female inpatient of the hospital a Pap test for detection of cervical cancer unless: (i) the attending physician orders otherwise; or (ii) the patient has had the examination within the preceding year.

Law provides the patient with the right to refuse the examination.

Quality Assurance

Not indicated.

Effective Date

Last amendment effective October 1, 1996.

Massachusetts **MASS. ANN. LAWS CH. 111, § 4K**

Scope Cervical Cancer Screening Program

Policies and Limits Law requires the establishment, promotion, and maintenance of a statewide public information program regarding diethylstilbestrol (DES).

Law requires the program to designate and enter into contracts with providers of health care for the purpose of establishing regional screening programs for women who were exposed to DES during pregnancy and their offspring who were exposed prenatally.

Law requires consideration of providers' compliance with state and federally mandated standards, the location in relation to the geographic distribution of persons exposed to DES, and the capacity of the provider to properly screen for cervical cancer and any other malignancy and abnormal conditions resulting from DES exposure.

Law requires the establishment of a program to train physicians, physician's assistants, and nurses in the detection, diagnosis, treatment, and prevention of diseases in women who were exposed to DES during pregnancy and their offspring who were exposed prenatally.

Quality Assurance Not indicated.

Effective Date Last amendment effective June 6, 1997.

Minnesota

Minn. Stat. §§ 62A.30, 62A.315, 62A.316

Scope

Reimbursement for Cervical Cancer Screening

*Woman's Age,
Frequency
of Pap Test*

Not stipulated.

*Policies
and Limits*

Law requires insurers to provide coverage for routine Pap test screening procedures.

Law applies to all policies of accident and health insurance; health maintenance contracts; health benefit certificates of fraternal benefit societies; and subscriber contracts of nonprofit health service plans. Basis and Extended Basic Medicare supplement plans must cover 100 percent of the cost of routine screening procedures for cancer, including Pap tests.

Law does not apply to policies designed primarily to provide coverage payable on a per diem, fixed indemnity, or non-expense-incurred basis, or policies that provide only accident coverage.

Quality Assurance

Not indicated.

Effective Date

August 1, 1988; last amended 1998.

Missouri

§ 376.1250 R.S.Mo.

Scope

Reimbursement for Cervical Cancer Screening

*Woman's Age,
Frequency
of Pap Test*

Not stipulated.

*Policies
and Limits*

Law requires insurers to provide coverage for pelvic examinations and Pap tests for nonsymptomatic women.

Law applies to individual and group health insurance policies providing coverage on an expense-incurred basis; individual and group service or indemnity type contracts issued by nonprofit corporations; health maintenance organization; all self-insured group arrangements (to the extent not preempted by federal law); and managed health care delivery entities.

Law does not apply to accident-only, hospital indemnity, Medicare supplement, long-term care, or other limited-benefit health insurance policies.

Law requires coverage and benefits to be at least as favorable and subject to the same dollar limits, deductibles, and copayments as other covered laboratory benefits or services.

Quality Assurance

Not indicated.

Effective Date

August 28, 1999.

Nebraska

R.R.S. NEB. §§ 71-7001.01, 71-7010, 71-7012

Scope

Cervical Cancer Screening and Education Programs/
Funding for Cervical Cancer Programs

*Policies
and Limits*

Law establishes the Breast and Cervical Cancer Advisory Committee. Duties of the committee shall include, but not be limited to:

- Encouraging payment of public and private funds to the Breast and Cervical Cancer Cash Fund.
- Researching and recommending to the Nebraska State Department of Health reimbursement limits for planning and implementing outreach and educational programs to Nebraska women.
- Advising on the operation of the early detection of breast and cervical cancer federal grant.
- Encouraging payment of public and private funds to the fund.
- Researching and recommending appropriate definitive diagnostic procedures that may be reimbursed.

Law creates the Breast and Cervical Cancer Cash Fund. Law permits the Department of Health and Human Services to: (i) receive federal and other public and private funds for the Breast and Cervical Cancer Cash Fund; and (ii) apply for, receive, and administer such funds to pay for definitive diagnostic procedures for women enrolled in the program.

The funds obtained from definitive diagnostic procedures are required to be credited to the Breast and Cervical Cancer Cash Fund. Money credited to the fund shall be used to reimburse the costs of definitive diagnostic procedures.

Quality Assurance

Not indicated.

Effective Date

September 9, 1995. Establishment of Breast Cancer Advisory Committee under Section 71-7012, enacted 1991; last amended 1996, effective April 4, 1996, operative January 1, 1997.

Nebraska

R.R.S. NEB. § 71-7614

Scope

Funding for Cervical Cancer Programs

Policies and Limits

Law requires the Excellence in Health Care Trust Fund to be used to award grants for public health services that focus on education and preventive measures for cervical cancer, including services for reservation or service areas of federally recognized American Indian tribal organizations in Nebraska and organizations that focus on the health of minority groups.

Law creates the Excellence in Health Care Council. The Council, with the approval of the Director of Finance and Support, shall award grants to improve access to or delivery of health care services to medically underserved individuals or in medically underserved areas.

Law requires recipients of such grants to provide, upon request, such data relating to the funded projects, as is deemed necessary.

Quality Assurance

Not indicated.

Effective Date

January 15, 1999; last amendment effective April 29, 1999.

Nebraska

R.R.S. NEB. § 71-7617

Scope

Cervical Cancer Screening Program

*Policies
and Limits*

Law requires the Department of Health and Human Services to contract with the health clinics of Nebraska's federally recognized American Indian tribal organizations, Indian health organizations, or other public health organizations that have a substantial American Indian clientele to provide cervical cancer screening and early detection services targeted to American Indian populations.

Quality Assurance

Not indicated.

Effective Date

April 14, 1998.

Nebraska **1999 NEB. ALS 480, 1999 NEB. LAWS 480, 1999 NEB. LB 480**

Scope Cervical Cancer Screening and Education Programs/
Funding for Cervical Cancer Programs

Policies and Limits Law creates the Women’s Health Initiative of Nebraska within the Department of Health and Human Services. The Women’s Health Initiative of Nebraska shall strive to improve the health of women in Nebraska by fostering the development of a comprehensive system of coordinated services, policy development, advocacy, and education.

Law requires the Initiative to:

- Serve as a clearinghouse for information regarding women’s health issues, including cervical cancer.
- Perform strategic planning to develop Department-wide plans for implementation of goals and objectives for women’s health.
- Conduct Department-wide policy analysis on specific issues related to women’s health.
- Coordinate pilot projects and planning projects funded by the state that are related to women’s health.
- Communicate and disseminate information to providers of health, social, educational, and support services to women.
- Provide technical assistance to communities, other public entities, and private entities for initiatives in women’s health.
- Encourage innovative responses by public and private entities that are attempting to address women’s health issues.

Law creates the Women’s Health Initiative Advisory Council and the Women’s Health Initiative Fund. The fund shall consist of money received as gifts or grants or collected as fees or charges from any federal, state, public, or private source. Money in the fund shall be used to reimburse the expenses of the Women’s Health Initiative of Nebraska and expenses of members of the Women’s Health Initiative Advisory Council.

Quality Assurance Not indicated.

Effective Date April 11, 2000.

Nevada	NEV. REV. STAT. ANN. §§ 689A.0405, 689B.0374, 695B.191, 695C.1735, 695B.1912
<i>Scope</i>	Reimbursement for Cervical Cancer Screening
<i>Woman's Age, Frequency of Pap Test</i>	18+ Each year
<i>Policies and Limits</i>	<p>Law requires health insurers to provide coverage for annual cytologic screening tests.</p> <p>Law applies to health insurance policies; group health insurance policies; hospital or medical service corporation policies; and health maintenance plans.</p> <p>Insurance policies and health maintenance organizations may not require insured individuals to obtain prior authorization for any of the services provided under this law.</p>
<i>Quality Assurance</i>	Not indicated.
<i>Effective Date</i>	October 1, 1989; last amendment effective October 1, 1997.

New Jersey

N.J. STAT. § 26:2-113

Scope

Cervical Cancer Screening Program

*Policies
and Limits*

Law provides for a statewide public information campaign on diethylstilbestrol (DES) to reach individuals who have been exposed to DES and each offspring of those individuals, to encourage them to seek medical care for the prevention or treatment of cancer that results from the DES exposure.

Law requires an expansion of the existing cancer screening programs to detect any cancer or other abnormal condition that results from exposure to DES, including cervical cancer.

Law requires the establishment of a program to train physicians, physician's assistants, and nurses in: (i) identifying individuals who have been exposed to DES; and (ii) diagnosing and treating any cancer or other abnormal condition that results from the exposure.

Quality Assurance

Not indicated.

Effective Date

September 23, 1981.

New Jersey **N.J. STAT. §§ 17:48-6i, 17:48A-7h, 17:48E-35.6, 17B:26-2.1h, 17B:27-46.1h, 26:2J-4.6**

Scope Reimbursement for Cervical Cancer Screening

Woman's Age, Frequency of Pap Test 20+ Every two years (or more frequently upon physician or other health care provider's recommendation)

Policies and Limits Law requires insurers to provide benefits for expenses incurred in a health promotion program through wellness health examinations and counseling, which shall include Pap tests for cervical cancer.

Law provides that if a physician or health care provider recommends that it would be medically appropriate for a covered person to receive a different schedule of tests than that specified above, insurers are to provide payment for the tests actually provided, within the following limits of the amounts:
(i) \$125 a year for each person between the ages of 20 to 39, inclusive; and (ii) \$235 a year for each woman age 40 and over.

Law applies to health, hospital, and medical service corporations; individual and group health insurance policies; and health maintenance organizations.

Quality Assurance Not indicated.

Effective Date December 31, 1994.

New Jersey

**N.J. STAT. §§ 17:48-6O, 17:48A-7m, 17:48E-35.12,
17B:27-46.1n, 26:2J-4.12**

Scope

Reimbursement for Cervical Cancer Screening

*Woman's Age,
Frequency
of Pap Test*

Not stipulated.

*Policies
and Limits*

Law requires insurers to provide benefits to all covered women for expenses incurred in conducting a Pap test in order to be approved for issuance or renewed in the state.

Law applies to health, hospital, and medical service corporations; individual and group health insurance policies; and health maintenance organizations.

Law requires coverage for Pap tests to be provided to the same extent as for any other medical condition under the contracts.

Quality Assurance

Not indicated.

Effective Date

1995.

New York

NY CLS PUB HEALTH §§ 2406, 2408

Scope

Cervical Cancer Screening and Education Programs

Policies and Limits

Law provides that within the amounts of state or federal funds appropriated for cervical cancer early detection and diagnosis, approved organizations may be authorized by the Department of Health and Human Services to provide such services among unserved or underserved populations.

Law requires cervical cancer early detection services to include, but not be limited to, complete pelvic examinations, Pap tests, patient education, counseling, follow-up, and referral.

Law requires the Commissioner of Health to submit an annual report to the governor and the legislature concerning the experience of the program in providing cervical cancer early detection and diagnostic services.

Quality Assurance

Not indicated.

Effective Date

July 10, 1989; last amendment effective July 26, 1995. Law applicable to Advisory Council under § 2408, effective July 28, 1995.

New York**NY CLS PUB HEALTH § 2500-c***Scope*

Cervical Cancer Screening Program

Policies and Limits

Law requires the establishment, promotion, and maintenance of a statewide public information program regarding diethylstilbestrol (DES).

Law requires the program to designate and enter into contracts with providers of health care for the purpose of establishing regional screening programs for women who were exposed to DES during pregnancy and their offspring who were exposed prenatally.

Law requires consideration of providers' compliance with state and federally mandated standards, the location in relation to the geographic distribution of persons exposed to DES, and the capacity of the provider to properly screen for cervical cancer and any other malignancy and abnormal conditions resulting from DES exposure.

Law requires the establishment of a program to train physicians, physician's assistants, and nurses in the detection, diagnosis, treatment, and prevention of diseases in women who were exposed to DES during pregnancy and their offspring who were exposed prenatally.

Law requires the bureau of cancer control within the health department to establish and maintain a registry of women who took DES during pregnancy and their offspring who were exposed to DES prenatally for the purpose of follow-up care and treatment of long-term problems associated with DES exposure. Enrollment in the registry shall be upon a voluntary basis.

Quality Assurance

Not indicated.

Effective Date

August 7, 1978.

New York

NY CLS Ins §§ 3216(15), 3221(14), 4303(t)

Scope

Reimbursement for Cervical Cancer Screening

*Woman's Age,
Frequency
of Pap Test*

18+ Each year

*Policies
and Limits*

Law requires insurers providing coverage for hospital, surgical, or medical care or provides reimbursement for laboratory tests to provide coverage for annual cervical cytology screening for cervical cancer and its precursor states.

Law requires cervical cytology screening to include an annual pelvic examination, collection and preparation of a Pap smear, and laboratory and diagnostic services provided in connection with examining and evaluating the Pap smear.

Law applies to individual, group, or blanket accident and health insurance policies; medical expense indemnity corporations; hospital service corporations; and health service corporations.

Law provides that coverage may be subject to annual deductibles and coinsurance consistent with those established for other benefits within a given policy.

Quality Assurance

Not indicated.

Effective Date

January 1, 1993; last amendment effective April 1, 2000.

New York

NY CLS PUB HEALTH § 576-a

Scope

Accreditation of Facilities and Technologists

Policies and Limits

Law requires the limitation on the number of Pap smears a cytotechnologist may examine during a particular time period; and limitation on the quantity, speed, or manner of examination of slides by a cytotechnologist. Law does not allow any clinical laboratory to require, authorize, encourage or permit any cytotechnologist to exceed the applicable cytotechnologist work standard.

Law requires all cytotechnologists who are employed by a clinical laboratory to register with the Department of Health and Human Services. Law provides that clinical laboratories shall only employ cytotechnologists registered in this manner.

Law requires each clinical laboratory and cytotechnologist to maintain records, in a form prescribed by the department, which set forth:

- The name and identification (registration) number of the cytotechnologist.
- The name and address of the clinical laboratory.
- The number of hours worked by the cytotechnologist in each work day.
- The number of gynecologic slides examined and how many were one-slide and two-slide cases, during each work day.

Law requires the records to be made available for inspection and copying by the Department upon request.

Law provides the standards for gynecologic slides and re-examination of slides.

Law provides that the Department may, pursuant to regulation, increase the maximum number of slides which may be examined in a work day for clinical laboratories using slide examination or preparation technology approved by the Food and Drug Administration.

Effective Date

December 9, 1988; last amendment effective July 1, 1994.

North Carolina N.C. GEN. STAT. §§ 58-51-57, 58-65-92, 58-67-76, 58-50-155

Scope Reimbursement for Cervical Cancer Screening

*Woman’s Age,
Frequency
of Pap Test*

- Each year.
- Age not stipulated.

*Policies
and Limits* Law requires insurers to provide coverage for annual Pap tests . Coverage shall include the examination, the laboratory fee, and the physician’s interpretation of the laboratory results.

Law applies to accident or health insurance policies or contracts; and health maintenance organization plans.

Law provides that the same deductibles, coinsurance, and other limitations as apply to similar services covered under the policy, contract, or plan apply.

Quality Assurance Law states that when the screening Pap test accreditation standard adopted by the North Carolina Medical Care Commission becomes effective, reimbursement for laboratory fees shall be made only if the laboratory meets those standards. Facilities utilizing services of laboratories that do not meet accreditation standards must, prior to performing the Pap test examination, inform the patient that such laboratory fees will not be covered.

Effective Date January 1, 1992; last amendment effective January 1, 1998.

North Carolina N.C. GEN. STAT. §§ 135-40.5, 135-40.6(8)s

Scope Reimbursement for Cervical Cancer Screening for Public Employees

<i>Woman's Age, Frequency of Pap Test</i>	To 40	Every 3 years
	To 50	Every 2 years
	Over 50	Each year

Policies and Limits Law requires the state employee health benefit plan to pay 100 percent of allowable charges for Pap tests (and other routine diagnostic examinations, up to a maximum of \$150 per fiscal year per covered individual). The schedule specified above applies unless more frequent examinations are warranted by a medical condition, and the additional examinations are performed in a medically supervised facility.

Law states that the examinations are not covered when they are incurred to obtain or continue employment, to secure insurance coverage, to comply with legal proceedings, to attend schools or camps, to meet travel requirements, to participate in athletic and related activities, or to comply with governmental licensing requirements.

Quality Assurance Not indicated.

Effective Date Enacted 1982; last amended 1995.

Ohio **ORC ANN. 1751.62, 3923.52 TO 3923.54, 5111.024**

Scope Reimbursement for Cervical Cancer Screening

*Woman's Age,
Frequency
of Pap Test* Not stipulated.

*Policies
and Limits* Law requires insurers to provide benefits for cytologic screening (Pap test) for the presence of cervical cancer.

Law applies to individual and group health maintenance organization contracts, individual or group sickness and accident insurance policies, public employee benefit plans, employer health care plans, and medical assistance programs.

Law states that benefits paid under this law constitutes full payment. Law prohibits any further compensation to the provider.

Quality Assurance Law states that benefits shall be provided only for cytologic screening that is processed and interpreted in a laboratory certified by the College of American Pathologists.

Effective Date Last amendment effective March 22, 1999. Law applicable to policies issued under public welfare medical assistance programs effective July 1, 1992; last amendment effective November 24, 1995.

Oregon**ORS § 743.728***Scope*

Reimbursement for Cervical Cancer Screening

*Woman's Age,
Frequency
of Pap Test*

18-64 Each year

Any age At any time, upon referral from health care provider

*Policies
and Limits*

Law requires insurers to offer coverage for Pap tests .

Law applies to health insurance policies that cover hospital, medical, or surgical expenses.

Law does not apply to supplemental contracts covering a specified disease or other limited benefits.

Quality Assurance

Not indicated.

Effective Date

1993; last amendment effective July 1, 1999.

Pennsylvania 40 P.S. §§ 1572, 1574

Scope Reimbursement for Cervical Cancer Screening

*Woman's Age,
Frequency
of Pap Test*

- Each year.
- Age not stipulated.

*Policies
and Limits* Law states that as the issue of health care is debated at the federal and state levels, the special health care needs of women must be addressed; if women had access to quality preventative health care, many diseases, including cervical cancer, could be prevented or treated in their early stages when it is less expensive and there is a much better chance of recovery.

Law requires insurers to provide coverage for: (i) annual pelvic examinations, and (ii) routine Pap tests in accordance with the recommendations of the American College of Obstetricians and Gynecologists.

Law applies to all health insurance policies, which are delivered, issued for delivery, renewed, extended or modified in Pennsylvania by health care insurers.

Quality Assurance Not indicated.

Effective Date 60 days after April 22, 1994.

Pennsylvania **72 P.S. § 7315.2**

Scope Income Tax Checkoff for Cervical Cancer Research

Policies and Limits Law creates an income tax checkoff to allow a contribution to cervical cancer research. Directs the Department of Revenue to create the space for this checkoff and to provide adequate instructions within the tax form to include information about the use of the funds. Law directs the Department of Health to conduct a public information campaign to make taxpayers aware of the opportunity to contribute in this manner.

Law requires the funds to be transferred to the Pennsylvania Cancer Control, Prevention, and Research Advisory Board within the Department of Health.

Quality Assurance Not indicated.

Effective Date May 7, 1997.

Rhode Island **R.I. GEN. LAWS §§ 23-67-1, 23-67-2**

Scope Funding for Cervical Cancer Programs

Policies and Limits Law establishes the Rhode Island Research and Treatment Fund for Breast and Cervical Cancer. The General Treasurer is authorized to accept any grant, devise, bequest, donation, gift, services in kind, or assignment of money, bonds, or other valuable securities for deposit in the Fund.

Law requires the state to distribute annually, by September 30, the moneys in the Fund to all organizations that have been certified by the Department of Health for the funding year. All funds distributed must be used for research on the prevention of breast or cervical cancer, or for the diagnosis and treatment of breast and cervical cancers among uninsured or underinsured women. The funds shall be supplemental to all other moneys available for these purposes.

Eligible organizations that seek to qualify for funds must submit an application to the Department of Health not later than July 15 of each year.

Quality Assurance Not indicated.

Effective Date 1995; reenacted and recodified 1997.

Rhode Island	R.I. GEN. LAWS §§ 5-37-32, 23-17-33, 27-18-41, 27-18-43, 27-19-20, 27-19-22, 27-20-17, 27-20-19, 27-41-30, 27-41-32, 42-62-28
<i>Scope</i>	Reimbursement for Cervical Cancer Screening
<i>Woman's Age, Frequency of Pap Test</i>	Not stipulated.
<i>Policies and Limits</i>	<p>Law requires insurance coverage for Pap tests, in accordance with American Cancer Society guidelines.</p> <p>Law applies to insurers, nonprofit hospital service plans, nonprofit medical service plans, and health maintenance organizations.</p> <p>Law does not apply to insurance companies providing benefits for hospital confinement indemnity; disability income; accident only; long-term care; Medicare supplement; limited benefit health; specified disease indemnity; sickness or bodily injury or death by accident or both; and other limited benefit policies.</p>
<i>Quality Assurance</i>	Law requires any licensed physician performing a Pap test or supervising the performance of a Pap test to submit the smear for processing only to laboratory which is licensed by the State Department of Health specifically to perform cervical cytology, or is accredited by the American Society of Cytology, or is accredited by the College of American Pathologists, or is a hospital accredited by the Joint Commission for the Accreditation of Health Care Organizations, or is a hospital accredited by the American Osteopathic Association.
<i>Effective Date</i>	1988 (coverage); 1989 (quality assurance standards).

South Carolina **S.C. CODE ANN. § 38-71-145**

Scope Reimbursement for Cervical Cancer Screening

*Woman's Age,
Frequency
of Pap Test*

- Each year.
- Age not stipulated.

Policies and Limits Law requires insurers to provide coverage for annual Pap tests.

Law applies to all individual and group health insurance policies issued by a fraternal benefit society, an insurer, a health maintenance organization, or any similar entity, except as exempted by ERISA.

Law provides that the coverage may not contain any exclusions, reductions, or other limitations as to coverages, deductibles, or coinsurance provisions which apply to that coverage unless these provisions apply generally to other similar benefits provided and paid for under the health insurance policy.

Law provides that insurers are not prohibited from providing benefits greater than those required to be offered or more favorable to the enrollee than those required to be offered.

Law defines "Pap test."

Quality Assurance Not indicated.

Effective Date June 8, 1998.

Virginia

VA. CODE ANN. § 38.2-3418.1:2

Scope

Reimbursement for Cervical Cancer Screening

*Woman's Age,
Frequency
of Pap Test*

- Each year.
- Age not stipulated.

*Policies
and Limits*

Law requires insurers to provide coverage for annual Pap tests (this provision is effective July 1, 1996) and to provide for annual testing performed by any Food and Drug Administration-approved gynecologic cytology screening technologies (this provision is effective July 1, 1999).

Law applies to individual or group accident and sickness insurance policies providing hospital, medical, and surgical, or major medical coverage on an expense-incurred basis; corporations providing individual or group accident and sickness subscription contracts; and health maintenance organizations.

Law does not apply to short-term travel, accident-only, limited- or specified-disease policies, or to short-term nonrenewable policies of not more than 6 months' duration.

Quality Assurance

Not indicated.

Effective Date

July 1, 1996; last amendment effective July 1, 1999.

Virginia

VA. CODE ANN. § 2.1-20.1

Scope

Reimbursement for Cervical Cancer Screening for Public Employees

*Woman's Age,
Frequency
of Pap Test*

- Each year.
- Age not stipulated.

*Policies
and Limits*

Law requires state employee's health insurance plan to provide coverage for annual Pap tests, including coverage for annual testing performed by any Food and Drug Administration-approved gynecologic cytology screening technologies (this provision is effective July 1, 1999).

Law requires the Governor to provide health insurance coverage for state employees and retired state employees with the Commonwealth of Virginia paying the cost thereof to the extent of the coverage included in such plan. The plan chosen shall provide means whereby coverage for the families or dependents of state employees may be purchased. The Commonwealth may pay all or a portion of the cost thereof, and for such portion as the Commonwealth does not pay, the employee may purchase the coverage by paying the additional cost over the cost of coverage for an employee.

Quality Assurance

Not indicated.

Effective Date

1984 enactment; last amended effective July 1, 1999.

Virginia

VA. CODE ANN. § 32.1-325

Scope

Reimbursement for Cervical Cancer Screening for Recipients of Medical Assistance

Woman's Age, Frequency of Pap Test

- Each year.
- Age not stipulated.

Policies and Limits

Law requires a payment of medical assistance to cover annual Pap tests.

Law provides the Director of Medical Assistance Services with the authority to enter into agreements with contracts with medical care facilities, physicians, and other health care providers where necessary to carry out the provisions of the state plan.

Quality Assurance

Not indicated.

Effective Date

280 days from March 21, 1997.

West Virginia **W. VA. CODE ANN. §§ 16-33-1 to 16-33-12**

Scope Cervical Cancer Screening and Education Programs/
Funding for Cervical Cancer Programs

Policies and Limits *Breast and Cervical Cancer Detection and Education Program:*
Law establishes the Breast and Cervical Cancer Detection and Education Program. The program is established to promote screening and detection of breast and cervical cancers among unserved or underserved populations, to educate the public regarding breast and cervical cancers and the benefits of early detection, and to provide counseling and referral services.

The West Virginia Director of Health shall make grants to approved organizations for the provision of services relating to the screening and detection of breast and cervical cancers.

Law creates the Breast and Cervical Cancer Detection and Education Program Coalition to advise the Director. The Director shall report annually to the Governor and Legislature concerning the operation of the program.

Breast and Cervical Cancer Diagnostic and Treatment Fund:
Law establishes the Breast and Cervical Cancer Diagnostic and Treatment Fund for the care of indigent patients requiring diagnostic or treatment services for breast or cervical cancer.

The Fund shall be administered by the Office of Maternal and Child Health within the Bureau of Public Health, and may include moneys appropriated by the Legislature or received from the federal government or other public and private sources.

Procedures and requirements for use of the Fund shall be established by the medical advisory committee of the Breast and Cervical Cancer Detection and Education Program Coalition.

To be financially eligible for services reimbursed by the Fund, a patient cannot be covered by Medicaid, Medicare, or other medical insurance, and must have an income at or below 200 percent of the federal poverty level. To be medically eligible for diagnostic services, a patient must have a condition strongly suspicious of cancer and need diagnostic services to confirm a preliminary diagnosis. A positive pathology report is required to be eligible for treatment services.

The Fund is the payor of last resort. Payments for services shall be at the prevailing rates established by Medicare.

Quality Assurance Not indicated.

Effective Date

July 1, 1992; amended in 1996.

West Virginia **W. VA. CODE §§ 33-15-4c, 33-16-3g, 33-24-7b, 33-25-8a, 33-25A-8a**

Scope Reimbursement for Cervical Cancer Screening

Woman's Age, Frequency of Pap Test 18+ Each year (or more frequently based on physician's recommendation)

Policies and Limits Law requires insurance policies covering laboratory services to also provide coverage for Pap tests when performed for cancer screening or diagnostic purposes, at the direction of a person licensed to practice medicine and surgery by the board of medicine.

Law applies to individual and group accident and sickness policies; health maintenance organizations; health care corporations; and hospital, medical, dental, and health service corporations.

Law states that the insurer may apply the same deductibles, coinsurance, and other limitations as apply to other covered services.

Quality Assurance Not indicated.

Effective Date July 1, 1989.

West Virginia **W. VA. CODE §§ 5-16-7, 5-16-9**

<i>Scope</i>	Reimbursement for Cervical Cancer Screening for Public Employees
<i>Woman's Age, Frequency of Pap Test</i>	18+ Once a year (or more frequently based on the recommendation of the woman's physician)
<i>Policies and Limits</i>	<p>Law requires health insurance plan for public employees to provide coverage for laboratory services in connection with Pap tests when performed for cancer screening or diagnostic services.</p> <p>Law requires plan to cover employees of state agencies and county boards of education, as well as employees of participating counties, cities, towns, and other public agencies .</p>
<i>Quality Assurance</i>	Not indicated.
<i>Effective Date</i>	Last amendment 1996.

Wisconsin

Wis. STAT. § 255.07

Scope

Funding for Cervical Cancer Programs

*Policies
and Limits*

Law permits the department to distribute not more than \$25,000 in each fiscal year to applying organizations for the provision of specialized training of nurse practitioners to perform, in rural areas, colposcopic examinations and follow-up activities for treatment of cervical cancer.

Quality Assurance

Not indicated.

Effective Date

1991; last amendment in 1999.

Wyoming

Wyo. Stat. § 26-18-103

Scope

Reimbursement for Cervical Cancer Screening

*Woman's Age,
Frequency
of Pap Test*

Not stipulated.

*Policies
and Limits*

Law requires individual and group insurance policies issued or delivered on or after January 1, 1999 to disclose (on the face of the policy in type of no less than 14 point bold) the extent to which the policy includes comprehensive adult wellness benefits, including testing for cervical cancer.

Benefits are not subject to policy deductibles and must provide a minimum benefit equal to 80 percent of the reimbursement allowance under the private health benefit plan with a maximum of 20 percent coinsurance by the insured and which provide a benefit structure to the insured equal to a minimum of \$150 per insured adult per calendar year.

Quality Assurance

Not indicated.

Effective Date

Last amendment effective July 1, 1998.

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