

# SENATE NO. 586

## AN ACT PROVIDING COVERAGE FRO LYMPHEDEMA TREATMENTS

*Be it enacted by the Senate and House of Representatives in General Court assembled,  
And by the authority of the same, as follows:*

1 SECTION 1. Chapter 32A is hereby amended by inserting after section 17I, inserted by section  
2 1of chapter 292 of the acts of 2006, the following section:-  
3 Section 17J. (a) The commission shall provide to any active or retired employee of the  
4 commonwealth who is insured under the group insurance commission coverage for the cost of  
5 treatment and follow-up treatment for lymphedema including but not limited to complete  
6 decongestive therapy, manual lymph drainage, surgical treatments, compression garments,  
7 bandages, replacement garments or bandages or other course of treatment recommended by a  
8 health care provider in accordance with generally accepted current medical standards. The  
9 course of treatment for lymphedema shall be determined by a health care provider authorized  
10 under law to prescribe or provide lymphedema treatments, products, and services, including but  
11 not limited to the prescribed number of visits for complete decongestive therapy, supplies  
12 required for complete decongestive therapy, bandages and the full range of compression  
13 garments, follow-up treatment, out-patient self-management training and education,  
14 lymphedema and lymphedema-related surgery, and hospitalization for third-stage lymphedema  
15 treatment A health care provider authorized under law to prescribe or provide lymphedema

16 treatments, products, and services shall include, but not be limited to a health care provider  
17 licensed under chapter 112. No person other than a health care provider health care provider  
18 authorized under law to prescribe or provide lymphedema treatments, products, and services or  
19 licensed under chapter 112 and competent to evaluate the specific clinical issues involved in the  
20 treatment of lymphedema may deny requests for the payment of benefits under this section.  
21 The commission shall also provide coverage for treatment of lymphedema by a physical  
22 therapist licensed under section 23B of chapter 112.

23 (b) The commission shall not impose upon any person receiving benefits under this  
24 section any co-payment, fee or condition that is not equally imposed upon all individuals in the  
25 same benefit category. The commission also shall not impose any policy year or calendar year  
26 dollar or durational benefit limitations or maximums for benefits or services provided to a  
27 person under this section.

28 SECTION 2. Chapter 118E, as appearing in the 2004 Official Edition, is hereby amended by  
29 inserting after section 10F the following section:-

30 Section 10G. (a) The division shall provide coverage for the cost of treatment and follow-up  
31 treatment for lymphedema, including but not limited to complete decongestive therapy, manual  
32 lymph drainage, surgical treatments, compression garments, bandages, replacement garments or  
33 bandages or other course of treatment recommended by a health care provider in accordance  
34 with generally accepted current medical standards. The course of treatment for lymphedema  
35 shall be determined by a health care provider authorized under law to prescribe or provide  
36 lymphedema treatments, products, and services, including but not limited to the prescribed  
37 number of visits for complete decongestive therapy, supplies required for complete  
38 decongestive therapy, bandages and the full range of compression garments, follow-up

39 treatment, out-patient self-management training and education, lymphedema and lymphedema-  
40 related surgery, and hospitalization for third-stage lymphedema treatment A health care  
41 provider authorized under law to prescribe or provide lymphedema treatments, products, and  
42 services shall include, but not be limited to a health care provider licensed under chapter 112.  
43 No person other than a health care provider health care provider authorized under law to  
44 prescribe or provide lymphedema treatments, products, and services or licensed under chapter  
45 112 and competent to evaluate the specific clinical issues involved in the treatment of  
46 lymphedema may deny requests for the payment of benefits under this section. The commission  
47 shall also provide coverage for treatment of lymphedema by a physical therapist licensed under  
48 section 23B of chapter 112.

49 (b) The division shall not impose upon any person receiving benefits under this section  
50 any co-payment, fee or condition that is not equally imposed upon all individuals in  
51 the same benefit category. The division also shall not impose any policy year or  
52 calendar year dollar or durational benefit limitations or maximums for benefits or  
53 services provided to a person under this section.

54 SECTION 3. Chapter 175 is hereby amended by inserting after section 47Z, inserted by section  
55 2 of chapter 292 of the acts of 2006, the following section:-

56 Section 47AA. (a) Any policy of accident and sickness insurance described in section 108  
57 which provides hospital expense and surgical expense insurance and which is delivered, issued  
58 or subsequently renewed by agreement between the insurer and policyholder in the  
59 commonwealth; any blanket or general policy of insurance described in subdivision (A), (C) or  
60 (D) of section 110 which provides hospital expense and surgical expense insurance and which is  
61 delivered, issued or subsequently renewed by agreement between the insurer and the

62 policyholder, within or without the commonwealth, except policies providing supplemental  
63 coverage to Medicare; or any employers' health and welfare fund which provides hospital  
64 expense and surgical expense benefits and which is delivered, issued or renewed to any person  
65 or group of persons in the commonwealth, shall provide coverage for the cost of treatment and  
66 follow-up treatment for lymphedema, including but not limited to complete decongestive  
67 therapy, manual lymph drainage, surgical treatments, compression garments, bandages,  
68 replacement garments or bandages or other course of treatment recommended by a health care  
69 provider in accordance with generally accepted current medical standards. The course of  
70 treatment for lymphedema shall be determined by a health care provider authorized under law to  
71 prescribe or provide lymphedema treatments, products, and services, including but not limited  
72 to the prescribed number of visits for complete decongestive therapy, supplies required for  
73 complete decongestive therapy, bandages and the full range of compression garments, follow-up  
74 treatment, out-patient self-management training and education, lymphedema and lymphedema-  
75 related surgery, and hospitalization for third-stage lymphedema treatment. A health care  
76 provider authorized under law to prescribe or provide lymphedema treatments, products, and  
77 services shall include, but not be limited to a health care provider licensed under chapter 112.  
78 No person other than a health care provider health care provider authorized under law to  
79 prescribe or provide lymphedema treatments, products, and services or licensed under chapter  
80 112 and competent to evaluate the specific clinical issues involved in the treatment of  
81 lymphedema may deny requests for the payment of benefits under this section. The commission  
82 shall also provide coverage for treatment of lymphedema by a physical therapist licensed under  
83 section 23B of chapter 112.

84 (b) No insurer shall impose upon any person receiving benefits under this section any  
85 co-payment, fee or condition that is not equally imposed upon all individuals in the  
86 same benefit category. No insurer shall impose any policy year or calendar year  
87 dollar or durational benefit limitations or maximums for benefits or services  
88 provided to a person under this section.

89 SECTION 4. Chapter 176A is hereby amended by inserting after section 8AA, inserted by  
90 section 3 of chapter 292 of the acts of 2006, the following section:-

91 Section 8BB. Any contract, except contracts providing supplemental coverage to Medicare or  
92 other governmental programs, between a subscriber and the corporation under an individual or  
93 group hospital service plan which is delivered, issued or renewed in the commonwealth shall  
94 provide as benefits to all individual subscribers or members within the commonwealth and to all  
95 group members having a principal place of employment within the commonwealth coverage for  
96 expenses incurred in the treatment and follow-up treatment for lymphedema, including but not  
97 limited to complete decongestive therapy, manual lymph drainage, surgical treatments,  
98 compression garments, bandages, replacement garments or bandages or other course of  
99 treatment recommended by a health care provider in accordance with generally accepted current  
100 medical standards. The course of treatment for lymphedema shall be determined by a health  
101 care provider authorized under law to prescribe or provide lymphedema treatments, products,  
102 and services, including but not limited to the prescribed number of visits for complete  
103 decongestive therapy, supplies required for complete decongestive therapy, bandages and the  
104 full range of compression garments, follow-up treatment, out-patient self-management training  
105 and education, lymphedema and lymphedema-related surgery, and hospitalization for third-  
106 stage lymphedema treatment A health care provider authorized under law to prescribe or

107 provide lymphedema treatments, products, and services shall include, but not be limited to a  
108 health care provider licensed under chapter 112. No person other than a health care provider  
109 health care provider authorized under law to prescribe or provide treatments, products, and  
110 services or licensed under chapter 112 and competent to evaluate the specific clinical issues  
111 involved in the treatment of lymphedema may deny requests for the payment of benefits under  
112 this section. The commission shall also provide coverage for treatment of lymphedema by a  
113 physical therapist licensed under section 23B of chapter 112.

114 (b) No corporation shall impose upon any person receiving benefits under this section  
115 any co-payment, fee or condition that is not equally imposed upon all individuals in the same  
116 benefit category. No corporation shall impose any policy year or calendar year dollar or  
117 durational benefit limitations or maximums for benefits or services provided to a person under  
118 this section.

119 SECTION 5. Chapter 176B is hereby amended by inserting after section 4AA, inserted by  
120 section 4 of chapter 292 of the acts of 2006, the following section:-

121 Section 4BB. Any subscription certificate under an individual or group medical service  
122 agreement, except certificates which provide supplemental coverage to Medicare or other  
123 governmental programs, delivered, issued or renewed within the commonwealth shall provide  
124 as benefits to all individual subscribers or members within the commonwealth and to all group  
125 members having a principal place of employment in the commonwealth, coverage for expenses  
126 incurred in the treatment and follow-up treatment for lymphedema, including but not limited to  
127 complete decongestive therapy, manual lymph drainage, surgical treatments, compression  
128 garments, bandages, replacement garments or bandages or other course of treatment  
129 recommended by a health care provider in accordance with generally accepted current medical

130 standards. The course of treatment for lymphedema shall be determined by a health care  
131 provider authorized under law to prescribe or provide lymphedema treatments, products, and  
132 services, including but not limited to the prescribed number of visits for complete decongestive  
133 therapy, supplies required for complete decongestive therapy, bandages and the full range of  
134 compression garments, follow-up treatment, out-patient self-management training and  
135 education, lymphedema and lymphedema-related surgery, and hospitalization for third-stage  
136 lymphedema treatment. A health care provider authorized under law to prescribe or provide  
137 lymphedema treatments, products, and services shall include, but not be limited to a health care  
138 provider licensed under chapter 112. No person other than a health care provider health care  
139 provider authorized under law to prescribe or provide lymphedema treatments, products, and  
140 services or licensed under chapter 112 and competent to evaluate the specific clinical issues  
141 involved in the treatment of lymphedema may deny requests for the payment of benefits under  
142 this section. The commission shall also provide coverage for treatment of lymphedema by a  
143 physical therapist licensed under section 23B of chapter 112.

144 (b) No corporation shall impose upon any person receiving benefits under this section  
145 any co-payment, fee or condition that is not equally imposed upon all individuals in the same  
146 benefit category. No corporation shall impose any policy year or calendar year dollar or  
147 durational benefit limitations or maximums for benefits or services provided to a person under  
148 this section.

149 SECTION 6. Chapter 176G is hereby amended by inserting after section 4S, inserted by section  
150 5 of chapter 292 of the acts of 2006, the following section:-

151 Section 4T. An individual or group health maintenance contract, except contracts providing  
152 supplemental coverage to Medicare or to other government programs, shall provide coverage

153 and benefits for expenses incurred in the treatment and follow-up treatment for lymphedema,  
154 including but not limited to complete decongestive therapy, manual lymph drainage, surgical  
155 treatments, compression garments, bandages, replacement garments or bandages or other course  
156 of treatment recommended by a health care provider in accordance with generally accepted  
157 current medical standards. The course of treatment for lymphedema shall be determined by a  
158 health care provider authorized under law to prescribe or provide lymphedema treatments,  
159 products, and services, including but not limited to the prescribed number of visits for complete  
160 decongestive therapy, supplies required for complete decongestive therapy, bandages and the  
161 full range of compression garments, follow-up treatment, out-patient self-management training  
162 and education, lymphedema and lymphedema-related surgery, and hospitalization for third-  
163 stage lymphedema treatment. A health care provider authorized under law to prescribe or  
164 provide lymphedema treatments, products, and services shall include, but not be limited to a  
165 health care provider licensed under chapter 112. No person other than a health care provider  
166 health care provider authorized under law to prescribe or provide lymphedema treatments,  
167 products, and services or licensed under chapter 112 and competent to evaluate the specific  
168 clinical issues involved in the treatment of lymphedema may deny requests for the payment of  
169 benefits under this section. The commission shall also provide coverage for treatment of  
170 lymphedema by a physical therapist licensed under section 23B of chapter 112.

171 (b) No health maintenance organization shall impose upon any person receiving benefits  
172 under this section any co-payment, fee or condition that is not equally imposed upon all  
173 individuals in the same benefit category. No health maintenance organization shall impose any  
174 policy year or calendar year dollar or durational benefit limitations or maximums for benefits or  
175 services provided to a person under this section.

