



1 Key points

On March 24, 2025, Governor Little signed into law new breast cancer supplemental screening requirements that, effective January 1, 2026, will apply to current and new health insurance policies regulated by the Idaho Department of Insurance (DOI). The new law adds Chapter 23 to Title 39, Idaho Code.

<u>DOI Bulletin 25-03</u> provides guidance to insurers that highlights the key statutory requirements effective January 1, 2026, and outlines necessary compliance.

The bill applies to health insurance plans other than Medicaid or self-insured ERISA-regulated plans.

It provides for coverage of supplemental breast cancer screening using technology such as magnetic resonance imaging, contrast mammogram imaging or ultrasound for persons at heightened risk of breast cancer due to such factors as genetic predisposition to breast cancer, presence of BRCA1 or BRCA2 gene mutations, prior radiation therapy or extremely dense breast tissue.

What is "supplemental breast screening?"

Supplemental breast screening is a medically necessary and clinically appropriate examination of the breast using either standard or abbreviated magnetic resonance imaging, contrast mammogram imaging, or, if such imaging is not possible, ultrasound if recommended by the treating physician to screen for breast cancer when there is no abnormality seen or suspected in the breast.

FAQ

I thought my mammograms were already covered by insurance.

This coverage is for screenings that are supplemental to preventive screenings already covered by health insurance plans.

How much will it cost?

There is no cost for service if going to in-network provider.

How will I know if I'm covered?

Consumers will be notified by their employer or insurer.

4 Who qualifies?

Supplemental breast cancer screening is available one time per year for those at increased risk:

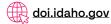
- Personal history of atypical breast histologies;
- Personal history or family history of breast cancer;
- Genetic predisposition for breast cancer;
- Prior therapeutic thoracic radiation therapy;
- Lifetime risk of breast cancer of greater than twenty percent (20%) according to risk assessment tools based on family history;
- Extremely dense breast tissue based on breast composition categories of the breast imaging and reporting data system established by the American College of Radiology; or
- Heterogeneously dense breast tissue based on breast composition categories with any one (1) of the following risk factors:
 - Personal history of BRCA1 or BRCA2 gene mutations;
 - First-degree relative with a BRCA1 or BRCA2 gene mutation who has not undergone genetic testing;
 - 3. Prior therapeutic thoracic radiation therapy from ten (10) to thirty (30) years of age; or
 - 4. Personal history of Li-Fraumeni syndrome, Cowden syndrome, or Bannayan-Riley-Ruvalcaba syndrome, or a first-degree relative with one (1) of these syndromes.



Contact DOI's Consumer Affairs if you experience issues with accessing coverage:



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