

I MINA' TRENTA NA LIHESLATURAN GUÅHAN
2010 (Second) Regular Session

2010 OCT 12 AM 9:01
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Bill No. 477-30 (COR)

Introduced by:

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AN ACT TO PROVIDE ANNUAL MAMMOGRAMS FOR WOMEN AGED 40 AND OLDER WHO ARE CLIENTS OF THE MEDICALLY INDIGENT PROGRAM, WHEN MEDICALLY NECESSARY AND AS OTHERWISE STIPULATED, BY AMENDING TITLE 10 GCA, DIVISION 1, CHAPTER 2, § 2907.2. (a).

1 BE IT ENACTED BY THE PEOPLE OF GUAM:

2 Section 1. Legislative findings and intent. *I Liheslaturan Guåhan*
3 finds that recommendations for annual mammograms have become
4 common for all women over 40 as a preventive measure for breast
5 cancer. Breast cancer is the most common non-skin cancer in women,
6 and the second leading cause of cancer death in women in the United
7 States.

8 Over a quarter of a million women were diagnosed with breast
9 cancer in 2009, and the U.S. National Cancer Institute projects nearly
10 40,000 deaths from this dread disease will take place in 2010.

11 The National Cancer Institute recommends mammograms for
12 women over 40 every 1 to 2 years. Standard Medicare health
13 insurance coverage already includes annual mammograms for

1 women over 40. The American Cancer Society also recommends
2 annual mammograms for women age 40 and older. Support for
3 annual mammograms has grown stronger in recent years, and
4 evidence has confirmed that mammograms offer substantial benefit
5 for women in their 40s.

6 A yearly screening mammogram should become a standard
7 practice for as long as women are in good health. Women can feel
8 confident about the benefits associated with regular mammograms to
9 assist in early discovery of cancer.

10 Women should be advised about the benefits, limitations, and
11 potential harms linked with regular screening. Mammograms can
12 miss some cancers. But despite their limitations, they remain a very
13 effective and valuable tool for decreasing suffering and death from
14 breast cancer. Mammograms for older women should be based on
15 the individual, her health, and other serious illnesses, such as
16 congestive heart failure, end-stage renal disease, chronic obstructive
17 pulmonary disease, and moderate-to-severe dementia. Age alone
18 should not be the reason to stop having regular mammograms. As
19 long as a woman is in good health and would be a candidate for
20 treatment, she should continue to be screened with a mammogram.

21 In light of these stark facts, the Legislature finds that it is
22 imperative that the coverage provided under Medically Indigent

1 Program be updated to reflect the current standard for the use of
2 mammograms in the early detection of breast cancer.

3 **Section 2. Title 10 Guam Code Annotated, Divison 1, Chapter 2,**
4 **§ 2907.2 (a) is hereby amended to read:**

5 **“§ 2907.2. Out-Patient Services.**

6 (a) The following out-patient medical services shall be covered
7 when medically necessary and as otherwise stipulated:

8 (1) Physician Evaluation and Management Services;

9 (2) Laboratory Diagnostic Services;

10 (3) Diagnostic Radiology, Ultrasound and Mammography
11 Screening Services to include annual mammograms for women 40
12 years of age and older, or as recommended by the American Medical
13 Association (AMA), and patients shall be advised about the benefits,
14 limitations, and potential harms linked with regular screening;

15 (i) CT Scan or MRI services must be authorized by the
16 MIP Program prior to the rendering of services;

17 (4) Prescription Drugs;

18 (5) Ambulatory Surgical Services;

19 (6) Renal Dialysis;

20 (7) Physical and Occupational Therapy;

21 (8) Respiratory Therapy;

1 (9) Emergency Room Services. The use of the Guam Memorial
2 Hospital Emergency Room shall be limited to urgent and life
3 threatening situations as diagnosed by the emergency physician and
4 a Five Dollar (\$5.00) co-payment is required.”

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