



## 98TH GENERAL ASSEMBLY

### State of Illinois

2013 and 2014

HB3175

by Rep. Kay Hatcher

#### SYNOPSIS AS INTRODUCED:

20 ILCS 2310/2310-665 new

Amends the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois. Sets forth the General Assembly's findings concerning breast cancer patient education. Provides that the Director of Public Health shall provide for the planning and implementation of an education campaign to inform breast cancer patients, especially those in racial and ethnic minority groups, anticipating surgery regarding the availability and coverage of breast reconstruction, prostheses, and other options. Provides that the campaign shall include the dissemination, at a minimum, on relevant State health Internet websites, including the Department of Public Health's Internet website, of certain information. Provides that beginning no later than 2 years after the effective date of the amendatory Act and continuing each second year thereafter, the Director shall submit to the General Assembly a report describing the activities carried out under the provision concerning breast reconstruction education during the preceding 2 fiscal years, including evaluating the extent to which the activities have been effective in improving the health of racial and ethnic minority groups.

LRB098 09375 RPM 39516 b

FISCAL NOTE ACT  
MAY APPLY

A BILL FOR

1 AN ACT concerning health.

2 **Be it enacted by the People of the State of Illinois,**  
3 **represented in the General Assembly:**

4 Section 5. The Department of Public Health Powers and  
5 Duties Law of the Civil Administrative Code of Illinois is  
6 amended by adding Section 2310-665 as follows:

7 (20 ILCS 2310/2310-665 new)

8 Sec. 2310-665. Breast cancer patient education.

9 (a) The General Assembly makes the following findings:

10 (1) Annually, about 207,090 new cases of breast cancer  
11 are diagnosed, according to the American Cancer Society.

12 (2) Breast cancer has a disproportionate and  
13 detrimental impact on African-American women and is the  
14 most common cancer among Hispanic and Latina women.

15 (3) African-American women under the age of 40 have a  
16 greater incidence of breast cancer than Caucasian women of  
17 the same age.

18 (4) Individuals undergoing surgery for breast cancer  
19 should give due consideration to the option of breast  
20 reconstructive surgery, either at the same time as the  
21 breast cancer surgery or at a later date.

22 (5) According to the American Cancer Society,  
23 immediate breast reconstruction offers the advantage of

1 combining the breast cancer surgery with the  
2 reconstructive surgery and is cost effective.

3 (6) According to the American Cancer Society, delayed  
4 breast reconstruction may be advantageous in women who  
5 require post-surgical radiation or other treatments.

6 (7) A woman suffering from the loss of her breast may  
7 not be a candidate for surgical breast reconstruction or  
8 may choose not to undergo additional surgery and instead  
9 choose breast prostheses.

10 (8) The federal Women's Health and Cancer Rights Act of  
11 1998 requires health plans that offer breast cancer  
12 coverage to also provide for breast reconstruction.

13 (9) Required coverage for breast reconstruction  
14 includes all the necessary stages of reconstruction.  
15 Surgery of the opposite breast for symmetry may be  
16 required. Breast prostheses may be necessary. Other  
17 sequelae of breast cancer treatment, such as lymphedema,  
18 must be covered.

19 (10) Several states have enacted laws to require that  
20 women receive information on their breast cancer treatment  
21 and reconstruction options.

22 (b) In this Section:

23 "Hispanic" has the same meaning as in Section 1707 of  
24 the federal Public Health Services Act.

25 "Racial and ethnic minority group" has the same meaning  
26 as in Section 1707 of the federal Public Health Services

1 Act.

2 (c) The Director shall provide for the planning and  
3 implementation of an education campaign to inform breast cancer  
4 patients, especially those in racial and ethnic minority  
5 groups, anticipating surgery regarding the availability and  
6 coverage of breast reconstruction, prostheses, and other  
7 options. The campaign shall include the dissemination, at a  
8 minimum, on relevant State health Internet websites, including  
9 the Department of Public Health's Internet website, of the  
10 following information:

11 (1) Breast reconstruction is possible at the time of  
12 breast cancer surgery or in a delayed fashion.

13 (2) Prostheses or breast forms may be available.

14 (3) Federal law mandates both public and private health  
15 plans to include coverage of breast reconstruction and  
16 prostheses.

17 (4) The patient has a right to choose the provider of  
18 reconstructive care, including the potential transfer of  
19 care to a surgeon that provides breast reconstructive care.

20 (5) The patient may opt to undergo breast  
21 reconstruction in a delayed fashion for personal reasons or  
22 after completion of all other breast cancer treatments.

23 The campaign may include dissemination of such other  
24 information, whether developed by the Director or by other  
25 entities, as the Director determines relevant. The campaign  
26 shall not specify, or be designed to serve as a tool to limit,

1 the health care providers available to patients.

2 (d) In developing the information to be disseminated under  
3 this Section, the Director shall consult with appropriate  
4 medical societies and patient advocates related to breast  
5 cancer, patient advocates representing racial and ethnic  
6 minority groups, with a special emphasis on African-American  
7 and Hispanic population's breast reconstructive surgery, and  
8 breast prostheses and breast forms.

9 (e) Beginning no later than 2 years after the effective  
10 date of this amendatory Act of the 98th General Assembly and  
11 continuing each second year thereafter, the Director shall  
12 submit to the General Assembly a report describing the  
13 activities carried out under this Section during the preceding  
14 2 fiscal years, including evaluating the extent to which the  
15 activities have been effective in improving the health of  
16 racial and ethnic minority groups.