

[First Reprint]

SENATE, No. 3108

STATE OF NEW JERSEY
217th LEGISLATURE

INTRODUCED MAY 1, 2017

Sponsored by:

Senator NICHOLAS P. SCUTARI

District 22 (Middlesex, Somerset and Union)

Senator GERALD CARDINALE

District 39 (Bergen and Passaic)

SYNOPSIS

Prohibits health insurance carriers from requiring optometrists to become providers with vision care plans as condition of becoming providers in carriers' panel of providers; prohibits certain practices under vision care provider contracts.

CURRENT VERSION OF TEXT

As reported by the Senate Commerce Committee on December 4, 2017, with amendments.



1 AN ACT concerning optometrists and vision care plans and
2 supplementing P.L.1997, c.192 (C.26:2S-1 et seq.).
3

4 **BE IT ENACTED** *by the Senate and General Assembly of the State*
5 *of New Jersey:*
6

7 1. a. A carrier shall not require an optometrist to participate in
8 a vision care plan as a condition for entering into a contract with
9 that carrier for the provision of medically necessary physician
10 services within the scope of practice of an optometrist ¹**["when those**
11 **services are provided as a health benefit for covered persons"]**¹.

12 b. ¹**["For purposes of this section, "vision care plan" means an**
13 **organization with which a carrier subcontracts to provide or**
14 **administer supplemental vision or medically necessary physician**
15 **services within the scope of practice of an optometrist, or both, to**
16 **covered persons on behalf of the carrier.**

17 c.¹ Nothing in this section shall be construed to prevent a
18 carrier from entering into a contract with a vision care plan.
19

20 ¹2. a. No contract between a carrier or a vision care plan and a
21 vision care provider may seek to or require that a vision care
22 provider provide services or materials at a fee limited or set by the
23 carrier or vision care plan unless the services or materials are
24 reimbursed as covered services or covered materials under the
25 contract.

26 b. A vision care provider shall not charge more for services and
27 materials that are noncovered services or noncovered materials to
28 an enrollee of a vision care plan or carrier than the provider's usual
29 and customary rate for those services and materials.¹
30

31 ¹3. No contract between a carrier or vision care plan and a
32 vision care provider shall restrict or limit, either directly or
33 indirectly, the vision care provider's choice of sources and suppliers
34 of services or materials or use of optical labs provided by the vision
35 care provider to an enrollee.¹
36

37 ¹4. As used in this act:

38 "Contractual discount" means a reduction from a vision care
39 provider's usual and customary rate for covered services and
40 materials required under a participating provider agreement.

41 "Covered materials" means materials for which reimbursement
42 from the carrier or vision care plan is provided to a vision care
43 provider by a covered person's plan contract, or for which a
44 reimbursement would be available but for the application of the

EXPLANATION – Matter enclosed in bold-faced brackets **["thus"]** in the above bill is
not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹Senate SCM committee amendments adopted December 4, 2017.

1 enrollee's contractual limitations of deductibles, copayments, or
2 coinsurance.

3 "Covered services" means services for which reimbursement
4 from the carrier or vision care plan is provided to a vision care
5 provider by an enrollee's plan contract, or for which a
6 reimbursement would be available but for the application of the
7 enrollee's contractual limitations of deductibles, copayments, or
8 coinsurance.

9 "Materials" means ophthalmic devices including but not limited
10 to lenses, devices containing lenses, ophthalmic frames and other
11 lens mounting apparatus, prisms, lens treatments and coatings
12 contact lenses, and prosthetic devices to correct, relieve, or treat
13 defects or abnormal conditions of the human eye or its adnexa.

14 "Services" means the professional work performed by a vision
15 care provider.

16 "Vision care plan" means an entity that creates, promotes, sells,
17 provides, advertises or administers, an integrated or stand-alone
18 vision benefit plan, or a vision care insurance policy or contract
19 which provides vision or medically necessary benefits to an enrollee
20 pertaining to the provision of covered services or covered materials.

21 "Vision care provider" means a licensed doctor of optometry
22 practicing under the authority of R.S.45:12-1 et seq. or a licensed
23 medical or osteopathic doctor practicing under the authority of
24 R.S.45:9-1 et seq. that has also completed a residency in
25 ophthalmology.¹

26

27 ¹**[2.] 5.**¹ This act shall take effect on the 120th day next
28 following enactment.