

ASSEMBLY, No. 973

STATE OF NEW JERSEY

219th LEGISLATURE

PRE-FILED FOR INTRODUCTION IN THE 2020 SESSION

Sponsored by:

Assemblyman HERB CONAWAY, JR.

District 7 (Burlington)

SYNOPSIS

Requires health benefits coverage for buprenorphine and buprenorphine/naloxone under certain conditions.

CURRENT VERSION OF TEXT

Introduced Pending Technical Review by Legislative Counsel.



1 **AN ACT** concerning health benefits coverage for buprenorphine and
2 buprenorphine/naloxone and supplementing various parts of the
3 statutory law.

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

7
8 1. a. A hospital service corporation contract that provides
9 hospital or medical expense benefits and is delivered, issued,
10 executed or renewed in this State, or approved for issuance or
11 renewal in this State by the Commissioner of Banking and
12 Insurance, on or after the effective date of this act, shall provide
13 coverage for any expenses incurred by a covered person for the
14 prescription and purchase of buprenorphine or
15 buprenorphine/naloxone for the treatment of opioid addiction.
16 Coverage provided pursuant to this section shall not be subject to
17 any prior authorization, dollar limit, copayment, deductible, or
18 coinsurance.

19 b. The provisions of this section shall apply to all hospital
20 service corporation contracts in which the hospital service
21 corporation has reserved the right to change the premium.

22
23 2. a. A medical service corporation contract that provides
24 hospital or medical expense benefits and is delivered, issued,
25 executed or renewed in this State, or approved for issuance or
26 renewal in this State by the Commissioner of Banking and
27 Insurance, on or after the effective date of this act, shall provide
28 coverage for any expenses incurred by a covered person for the
29 prescription and purchase of buprenorphine or
30 buprenorphine/naloxone for the treatment of opioid addiction.
31 Coverage provided pursuant to this section shall not be subject to
32 any prior authorization, dollar limit, copayment, deductible, or
33 coinsurance.

34 b. The provisions of this section shall apply to all medical
35 service corporation contracts in which the medical service
36 corporation has reserved the right to change the premium.

37
38 3. a. A health service corporation contract that provides
39 hospital or medical expense benefits and is delivered, issued,
40 executed or renewed in this State, or approved for issuance or
41 renewal in this State by the Commissioner of Banking and
42 Insurance, on or after the effective date of this act, shall provide
43 coverage for any expenses incurred by a covered person for the
44 prescription and purchase of buprenorphine or
45 buprenorphine/naloxone for the treatment of opioid addiction.
46 Coverage provided pursuant to this section shall not be subject to
47 any prior authorization, dollar limit, copayment, deductible, or
48 coinsurance.

1 b. The provisions of this section shall apply to all health
2 service corporation contracts in which the health service
3 corporation has reserved the right to change the premium.

4
5 4. a. An individual health insurance policy that provides
6 hospital or medical expense benefits and is delivered, issued,
7 executed or renewed in this State, or approved for issuance or
8 renewal in this State by the Commissioner of Banking and
9 Insurance, on or after the effective date of this act, shall provide
10 coverage for any expenses incurred by a covered person for the
11 prescription and purchase of buprenorphine or
12 buprenorphine/naloxone for the treatment of opioid addiction.
13 Coverage provided pursuant to this section shall not be subject to
14 any prior authorization, dollar limit, copayment, deductible, or
15 coinsurance.

16 b. The provisions of this section shall apply to those policies in
17 which the insurer has reserved the right to change the premium.

18
19 5. a. A group health insurance policy that provides hospital or
20 medical expense benefits and is delivered, issued, executed or
21 renewed in this State, or approved for issuance or renewal in this
22 State by the Commissioner of Banking and Insurance, on or after
23 the effective date of this act, shall provide coverage for any
24 expenses incurred by a covered person for the prescription and
25 purchase of buprenorphine or buprenorphine/naloxone for the
26 treatment of opioid addiction. Coverage provided pursuant to this
27 section shall not be subject to any prior authorization, dollar limit,
28 copayment, deductible, or coinsurance.

29 b. The provisions of this section shall apply to all policies in
30 which the insurer has reserved the right to change the premium.

31
32 6. a. An individual health benefits plan that provides hospital
33 or medical expense benefits and is delivered, issued, executed or
34 renewed in this State, or approved for issuance or renewal in this
35 State by the Commissioner of Banking and Insurance, on or after
36 the effective date of this act, shall provide coverage for any
37 expenses incurred by a covered person for the prescription and
38 purchase of buprenorphine or buprenorphine/naloxone for the
39 treatment of opioid addiction. Coverage provided pursuant to this
40 section shall not be subject to any prior authorization, dollar limit,
41 copayment, deductible, or coinsurance.

42 b. The provisions of this section shall apply to all individual
43 health benefits plans in which the carrier has reserved the right to
44 change the premium.

45
46 7. a. A small employer health benefits plan that provides
47 hospital or medical expense benefits and is delivered, issued,
48 executed or renewed in this State, or approved for issuance or

1 renewal in this State by the Commissioner of Banking and
2 Insurance, on or after the effective date of this act, shall provide
3 coverage for any expenses incurred by a covered person for the
4 prescription and purchase of buprenorphine or
5 buprenorphine/naloxone for the treatment of opioid addiction.
6 Coverage provided pursuant to this section shall not be subject to
7 any prior authorization, dollar limit, copayment, deductible, or
8 coinsurance.

9 b. The provisions of this section shall apply to all small
10 employer health benefits plans in which the carrier has reserved the
11 right to change the premium.

12
13 8. a. A health maintenance organization contract that provides
14 hospital or medical expense benefits and is delivered, issued,
15 executed or renewed in this State, or approved for issuance or
16 renewal in this State by the Commissioner of Banking and
17 Insurance, on or after the effective date of this act, shall provide
18 coverage for any expenses incurred by an enrollee for the
19 prescription and purchase of buprenorphine or
20 buprenorphine/naloxone for the treatment of opioid addiction.
21 Coverage provided pursuant to this section shall not be subject to
22 any prior authorization, dollar limit, copayment, deductible, or
23 coinsurance.

24 b. The provisions of this section shall apply to those contracts
25 for health care services by health maintenance organizations under
26 which the health maintenance organization has reserved the right to
27 change the schedule of charges.

28
29 9. The State Health Benefits Commission shall ensure that
30 every contract purchased by the commission on or after the
31 effective date of this act that provides hospital or medical expense
32 benefits shall provide coverage for any expenses incurred by a
33 covered person for the prescription and purchase of buprenorphine
34 or buprenorphine/naloxone for the treatment of opioid addiction.
35 Coverage provided pursuant to this section shall not be subject to
36 any prior authorization, dollar limit, copayment, deductible, or
37 coinsurance.

38
39 10. The School Employees' Health Benefits Commission shall
40 ensure that every contract purchased by the commission on or after
41 the effective date of this act that provides hospital or medical
42 expense benefits shall provide coverage for any expenses incurred
43 by a covered person for the prescription and purchase of
44 buprenorphine or buprenorphine/naloxone for the treatment of
45 opioid addiction. Coverage provided pursuant to this section shall
46 not be subject to any prior authorization, dollar limit, copayment,
47 deductible, or coinsurance.

1 11. This act shall take effect on the 90th day after enactment.

2

3

4

STATEMENT

5

6 This bill requires health insurers (health, hospital and medical
7 service corporations, commercial individual and group health
8 insurers; health maintenance organizations, health benefits plans
9 issued pursuant to the New Jersey Individual Health Coverage and
10 Small Employer Health Benefits Programs, the State Health
11 Benefits Program, and the School Employees' Health Benefits
12 Program) to provide health benefits coverage for any expenses
13 incurred by a covered person for the prescription and purchase of
14 buprenorphine or buprenorphine/naloxone for the treatment of
15 opioid addiction. The bill provides that coverage is not subject to
16 any prior authorization, dollar limit, copayment, deductible, or
17 coinsurance.

18 Buprenorphine, commonly referred to by the brand name,
19 Subutex, and buprenorphine/naloxone, commonly referred to by the
20 brand name Suboxone, are medications used to treat opioid
21 dependence. This bill seeks to make these medications more
22 readily available and affordable for people with opioid dependence
23 issues that have insurance and are seeking treatment.