ASSEMBLY, No. 4447

STATE OF NEW JERSEY

219th LEGISLATURE

INTRODUCED JULY 23, 2020

Sponsored by:
Assemblywoman VALERIE VAINIERI HUTTLE
District 37 (Bergen)

SYNOPSIS

Requires health insurers to provide coverage for screening and therapeutic treatment of syphilis.

CURRENT VERSION OF TEXT

As introduced.

AN ACT requiring health insurance benefits for expenses incurred requiring health insurance benefits for expenses incurred the for screening and treatment of syphilis and supplementing P.L.1938, c.366 (C.17:48-1 et seq.), P.L.1940, c.74 (C.17:48A-1 et seq.), P.L.1985, c.236 (C.17:48E-1 et seq.), chapters 26 and 27 of Title 17B of the New Jersey Statutes, P.L.1992, c.161 (C.17B:27A-2 et seq.), P.L.1992, c.162 (C.17B:27A-17 et seq., P.L.1973, c.337 (C.26:2J-1 et seq.), P.L.1961, c.49 (C.52:14-17.25 et. seq.), and, P.L.2007, c.103 (52:14-17.46.1 et seq.).

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

1. Every hospital service corporation contract that provides hospital or medical expense benefits and is delivered, issued, executed or renewed in this State pursuant to P.L.1938, c.366 (C.17:48-1 et seq.), or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance on or after the effective date of this act, shall provide benefits to a covered person for expenses incurred in conducting syphilis screening and in the therapeutic treatment of syphilis.

The benefits shall be provided to the same extent as for any other medical condition under the contract.

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

2. Every medical service corporation contract that provides hospital or medical expense benefits and is delivered, issued, executed or renewed in this State pursuant to P.L.1940, c.74 (C.17:48A-1 et seq.), or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance on or after the effective date of this act, shall provide benefits to a covered person for expenses incurred in conducting syphilis screening and in the therapeutic treatment of syphilis.

The benefits shall be provided to the same extent as for any other medical condition under the contract.

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

3. Every health service corporation contract that provides hospital or medical expense benefits and is delivered, issued, executed or renewed in this State pursuant to P.L.1985, c.236 (C.17:48E-1 et seq.), or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance on or after the effective date of this act, shall

provide benefits to a covered person for expenses incurred in conducting syphilis screening and in the therapeutic treatment of syphilis.

The benefits shall be provided to the same extent as for any other medical condition under the contract.

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

4. Every individual policy that provides hospital or medical expense benefits and is delivered, issued, executed or renewed in this State pursuant to N.J.S.17B:26-1 et seq., or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance on or after the effective date of this act, shall provide benefits to a covered person for expenses incurred in conducting syphilis screening and in the therapeutic treatment of syphilis.

The benefits shall be provided to the same extent as for any other medical condition under the policy.

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

5. Every group policy that provides hospital or medical expense benefits and is delivered, issued, executed or renewed in this State pursuant to N.J.S.17B:27-26 et seq., or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance on or after the effective date of this act, shall provide benefits to a covered person for expenses incurred in conducting syphilis screening and in the therapeutic treatment of syphilis.

The benefits shall be provided to the same extent as for any other medical condition under the policy.

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

6. Every individual health benefits plan that provides hospital or medical expense benefits and is delivered, issued, executed or renewed in this State pursuant to P.L.1992, c.161 (C.17B:27A-2 et seq.), or approved for issuance or renewal in this State on or after the effective date of this act, shall provide benefits to a covered person for expenses incurred in conducting syphilis screening and in the therapeutic treatment of syphilis.

The benefits shall be provided to the same extent as for any other medical condition under the health benefits plan.

The provisions of this section shall apply to all health benefit plans in which the carrier has reserved the right to change the premium.

7. Every small employer health benefits plan that provides hospital or medical expense benefits and is delivered, issued, executed or renewed in this State pursuant to P.L.1992, c.162 (C.17B:27A-17 et seq.), or approved for issuance or renewal in this State on or after the effective date of this act, shall provide benefits to a covered person for expenses incurred in conducting syphilis screening and in the therapeutic treatment of syphilis.

The benefits shall be provided to the same extent as for any other medical condition under the health benefits plan.

The provisions of this section shall apply to all health benefit plans in which the carrier has reserved the right to change the premium.

8. Every enrollee agreement that provides hospital or medical expense benefits and is delivered, issued, executed or renewed in this State pursuant to P.L.1973, c.337 (C.26:2J-1 et seq.), or approved for issuance or renewal in this State by the Commissioner of Health on or after the effective date of this act, shall provide health care services to a covered enrollee for expenses incurred in conducting syphilis screening and in the therapeutic treatment of syphilis.

The health care services shall be provided to the same extent as for any other medical condition under the enrollee agreement.

The provisions of this section shall apply to all enrollee agreements in which the health maintenance organization has reserved the right to change the schedule of charges.

9. The State Health Benefits Commission shall ensure that every contract purchased by the commission on or after the effective date of this act that provides hospital and medical expense benefits shall provide coverage for expenses incurred in conducting syphilis screening and in the therapeutic treatment of syphilis.

The benefits shall be provided to the same extent as for any other medical condition under the contract.

10. The School Employees' Health Benefits Commission shall ensure that every contract purchased by the commission on or after the effective date of this act that provides hospital and medical expense benefits shall provide coverage for expenses incurred in conducting syphilis screening and in the therapeutic treatment of syphilis.

The benefits shall be provided to the same extent as for any other medical condition under the contract.

11. This act shall take effect on the 180th day after enactment.

STATEMENT

This bill requires hospital, medical and health service corporations, individual, small employer and large group commercial insurers, health maintenance organizations, the State Health Benefits Commission, and the School Employee Health Benefits Commission to provide coverage for the screening and therapeutic treatment of syphilis. The coverage required under the bill is to be provided to the same extent as for any other medical condition covered under the health benefits plan.