

SENATE, No. 3282

STATE OF NEW JERSEY
219th LEGISLATURE

INTRODUCED DECEMBER 14, 2020

Sponsored by:

Senator VIN GOPAL

District 11 (Monmouth)

Senator LINDA R. GREENSTEIN

District 14 (Mercer and Middlesex)

Co-Sponsored by:

Senators Singleton, A.M.Bucco, Ruiz, Stack and Pou

SYNOPSIS

Reduces age at which health benefit plans cover colorectal cancer screenings from 50 to 45.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 2/11/2021)

1 **AN ACT** concerning health benefits for colorectal cancer screenings,
2 amending P.L.2001, c.295, and supplementing P.L.1961, c.49.

3
4 **BE IT ENACTED** *by the Senate and General Assembly of the State*
5 *of New Jersey:*

6
7 1. Section 1 of P.L.2001, c.295 (C.17:48-6y) is amended to
8 read as follows:

9 1. Every hospital service corporation contract that provides
10 hospital or medical expense benefits and is delivered, issued,
11 executed or renewed in this State pursuant to P.L.1938, c.366
12 (C.17:48-1 et seq.), or approved for issuance or renewal in this State
13 by the Commissioner of Banking and Insurance on or after the
14 effective date of this act, shall provide benefits to any named
15 subscriber or other person covered thereunder for expenses incurred
16 in conducting colorectal cancer screening at regular intervals for
17 persons age **[50]** 45 and over and for persons of any age who are
18 considered to be at high risk for colorectal cancer. The methods of
19 screening for which benefits shall be provided shall include: a
20 screening fecal occult blood test, flexible sigmoidoscopy,
21 colonoscopy, barium enema, or any combination thereof; or the
22 most reliable, medically recognized screening test available. The
23 method and frequency of screening to be utilized shall be in
24 accordance with the most recent published guidelines of the
25 American Cancer Society and as determined medically necessary by
26 the covered person's physician, in consultation with the covered
27 person.

28 As used in this section, "high risk for colorectal cancer" means a
29 person has:

30 a. a family history of: familial adenomatous polyposis;
31 hereditary non-polyposis colon cancer; or breast, ovarian,
32 endometrial or colon cancer or polyps;

33 b. chronic inflammatory bowel disease; or

34 c. a background, ethnicity or lifestyle that the physician
35 believes puts the person at elevated risk for colorectal cancer.

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

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

41 (cf: P.L.2001, c.295, s.1)

42
43 2. Section 2 of P.L.2001, c.295 (C.17:48A-7x) is amended to
44 read as follows:

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.

1 2. Every medical service corporation contract that provides
2 hospital or medical expense benefits and is delivered, issued,
3 executed or renewed in this State pursuant to P.L.1940, c.74
4 (C.17:48A-1 et seq.), or approved for issuance or renewal in this
5 State by the Commissioner of Banking and Insurance on or after the
6 effective date of this act, shall provide benefits to any named
7 subscriber or other person covered thereunder for expenses incurred
8 in conducting colorectal cancer screening at regular intervals for
9 persons age [50] 45 and over and for persons of any age who are
10 considered to be at high risk for colorectal cancer. The methods of
11 screening for which benefits shall be provided shall include: a
12 screening fecal occult blood test, flexible sigmoidoscopy,
13 colonoscopy, barium enema, or any combination thereof; or the
14 most reliable, medically recognized screening test available. The
15 method and frequency of screening to be utilized shall be in
16 accordance with the most recent published guidelines of the
17 American Cancer Society and as determined medically necessary by
18 the covered person's physician, in consultation with the covered
19 person.

20 As used in this section, "high risk for colorectal cancer" means a
21 person has:

- 22 a. a family history of: familial adenomatous polyposis;
23 hereditary non-polyposis colon cancer; or breast, ovarian,
24 endometrial or colon cancer or polyps;
25 b. chronic inflammatory bowel disease; or
26 c. a background, ethnicity or lifestyle that the physician
27 believes puts the person at elevated risk for colorectal cancer.

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

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

33 (cf: P.L.2001, c.295, s.2)

34

35 3. Section 3 of P.L.2001, c.295 (C.17:48E-35.23) is amended
36 to read as follows:

37 3. Every health service corporation contract that provides
38 hospital or medical expense benefits and is delivered, issued,
39 executed or renewed in this State pursuant to P.L.1985, c.236
40 (C.17:48E-1 et seq.), or approved for issuance or renewal in this
41 State by the Commissioner of Banking and Insurance on or after the
42 effective date of this act, shall provide benefits to any named
43 subscriber or other person covered thereunder for expenses incurred
44 in conducting colorectal cancer screening at regular intervals for
45 persons age [50] 45 and over and for persons of any age who are
46 considered to be at high risk for colorectal cancer. The methods of
47 screening for which benefits shall be provided shall include: a
48 screening fecal occult blood test, flexible sigmoidoscopy,
49 colonoscopy, barium enema, or any combination thereof; or the

1 most reliable, medically recognized screening test available. The
2 method and frequency of screening to be utilized shall be in
3 accordance with the most recent published guidelines of the
4 American Cancer Society and as determined medically necessary by
5 the covered person's physician, in consultation with the covered
6 person.

7 As used in this section, "high risk for colorectal cancer" means a
8 person has:

9 a. a family history of: familial adenomatous polyposis;
10 hereditary non-polyposis colon cancer; or breast, ovarian,
11 endometrial or colon cancer or polyps;

12 b. chronic inflammatory bowel disease; or

13 c. a background, ethnicity or lifestyle that the physician
14 believes puts the person at elevated risk for colorectal cancer.

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

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

20 (cf: P.L.2001, c.295, s.3)

21

22 4. Section 4 of P.L.2001, c.295 (C.17B:26-2.1u) is amended to
23 read as follows:

24 4. Every individual policy that provides hospital or medical
25 expense benefits and is delivered, issued, executed or renewed in
26 this State pursuant to N.J.S.17B:23-1 et seq., or approved for
27 issuance or renewal in this State by the Commissioner of Banking
28 and Insurance on or after the effective date of this act, shall provide
29 benefits to any named insured or other person covered thereunder
30 for expenses incurred in conducting colorectal cancer screening at
31 regular intervals for persons age [50] 45 and over and for persons of
32 any age who are considered to be at high risk for colorectal cancer.
33 The methods of screening for which benefits shall be provided shall
34 include: a screening fecal occult blood test, flexible sigmoidoscopy,
35 colonoscopy, barium enema, or any combination thereof; or the
36 most reliable, medically recognized screening test available. The
37 method and frequency of screening to be utilized shall be in
38 accordance with the most recent published guidelines of the
39 American Cancer Society and as determined medically necessary by
40 the covered person's physician, in consultation with the covered
41 person.

42 As used in this section, "high risk for colorectal cancer" means a
43 person has:

44 a. a family history of: familial adenomatous polyposis;
45 hereditary nonpolyposis colon cancer; or breast, ovarian,
46 endometrial or colon cancer or polyps;

47 b. chronic inflammatory bowel disease; or

48 c. a background, ethnicity or lifestyle that the physician
49 believes puts the person at elevated risk for colorectal cancer.

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

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

6 (cf: P.L.2001, c.295, s.4)

7

8 5. Section 5 of P.L.2001, c.295 (C.17B:27-46.1y) is amended
9 to read as follows:

10 5. Every group policy that provides hospital or medical
11 expense benefits and is delivered, issued, executed or renewed in
12 this State pursuant to N.J.S.17B:27-26 et seq., or approved for
13 issuance or renewal in this State by the Commissioner of Banking
14 and Insurance on or after the effective date of this act, shall provide
15 benefits to any named insured or other person covered thereunder
16 for expenses incurred in conducting colorectal cancer screening at
17 regular intervals for persons age [50] 45 and over and for persons of
18 any age who are considered to be at high risk for colorectal cancer.
19 The methods of screening for which benefits shall be provided shall
20 include: a screening fecal occult blood test, flexible sigmoidoscopy,
21 colonoscopy, barium enema, or any combination thereof; or the
22 most reliable, medically recognized screening test available. The
23 method and frequency of screening to be utilized shall be in
24 accordance with the most recent published guidelines of the
25 American Cancer Society and as determined medically necessary by
26 the covered person's physician, in consultation with the covered
27 person.

28 As used in this section, "high risk for colorectal cancer" means a
29 person has:

30 a. a family history of: familial adenomatous polyposis;
31 hereditary nonpolyposis colon cancer; or breast, ovarian,
32 endometrial or colon cancer or polyps;

33 b. chronic inflammatory bowel disease; or

34 c. a background, ethnicity or lifestyle that the physician
35 believes puts the person at elevated risk for colorectal cancer.

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

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

41 (cf: P.L.2001, c.295, s.5)

42

43 6. Section 8 of P.L.2001, c.295 (C.26:2J-4.24) is amended to
44 read as follows:

45 8. Every enrollee agreement that provides hospital or medical
46 expense benefits and is delivered, issued, executed, or renewed in
47 this State pursuant to P.L.1973, c.337 (C.26:2J-1 et seq.), or
48 approved for issuance or renewal in this State by the Commissioner
49 of Banking and Insurance on or after the effective date of this act,

1 shall provide health care services to any enrollee or other person
2 covered thereunder for expenses incurred in conducting colorectal
3 cancer screening at regular intervals for persons age [50] 45 and
4 over and for persons of any age who are considered to be at high
5 risk for colorectal cancer. The methods of screening for which
6 benefits shall be provided shall include: a screening fecal occult
7 blood test, flexible sigmoidoscopy, colonoscopy, barium enema, or
8 any combination thereof; or the most reliable, medically recognized
9 screening test available. The method and frequency of screening to
10 be utilized shall be in accordance with the most recent published
11 guidelines of the American Cancer Society and as determined
12 medically necessary by the covered person's physician, in
13 consultation with the covered person.

14 As used in this section, "high risk for colorectal cancer" means a
15 person has:

- 16 a. a family history of: familial adenomatous polyposis;
17 hereditary non-polyposis colon cancer; or breast, ovarian,
18 endometrial or colon cancer or polyps;
- 19 b. chronic inflammatory bowel disease; or
- 20 c. a background, ethnicity or lifestyle that the physician
21 believes puts the person at elevated risk for colorectal cancer.

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

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

27 (cf: P.L.2012, c.17, s.273)

28

29 7. Section 6 of P.L.2001, c.295 (C.17B:27A-7.7) is amended to
30 read as follows:

31 6. Every individual health benefits plan that provides hospital
32 or medical expense benefits and is delivered, issued, executed or
33 renewed in this State pursuant to P.L.1992, c.161 (C.17B:27A-2 et
34 seq.), or approved for issuance or renewal in this State on or after
35 the effective date of this act, shall provide benefits to any person
36 covered thereunder for expenses incurred in conducting colorectal
37 cancer screening at regular intervals for persons age [50] 45 and
38 over and for persons of any age who are considered to be at high
39 risk for colorectal cancer. The methods of screening for which
40 benefits shall be provided shall include: a screening fecal occult
41 blood test, flexible sigmoidoscopy, colonoscopy, barium enema, or
42 any combination thereof; or the most reliable, medically recognized
43 screening test available. The method and frequency of screening to
44 be utilized shall be in accordance with the most recent published
45 guidelines of the American Cancer Society and as determined
46 medically necessary by the covered person's physician, in
47 consultation with the covered person.

48 As used in this section, "high risk for colorectal cancer" means a
49 person has:

1 a. a family history of: familial adenomatous polyposis;
2 hereditary non-polyposis colon cancer; or breast, ovarian,
3 endometrial or colon cancer or polyps;

4 b. chronic inflammatory bowel disease; or

5 c. a background, ethnicity or lifestyle that the physician
6 believes puts the person at elevated risk for colorectal cancer.

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

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

12 (cf: P.L.2001, c.295, s.6)

13
14 8. Section 7 of P.L.2001, c.295 (C.17B:27A-19.9) is amended
15 to read as follows:

16 7. Every small employer health benefits plan that provides
17 hospital or medical expense benefits and is delivered, issued,
18 executed or renewed in this State pursuant to P.L.1992, c.162
19 (C.17B:27A-17 et seq.), or approved for issuance or renewal in this
20 State on or after the effective date of this act, shall provide benefits
21 to any person covered thereunder for expenses incurred in
22 conducting colorectal cancer screening at regular intervals for
23 persons age [50] 45 and over and for persons of any age who are
24 considered to be at high risk for colorectal cancer. The methods of
25 screening for which benefits shall be provided shall include: a
26 screening fecal occult blood test, flexible sigmoidoscopy,
27 colonoscopy, barium enema, or any combination thereof; or the
28 most reliable, medically recognized screening test available. The
29 method and frequency of screening to be utilized shall be in
30 accordance with the most recent published guidelines of the
31 American Cancer Society and as determined medically necessary by
32 the covered person's physician, in consultation with the covered
33 person.

34 As used in this section, "high risk for colorectal cancer" means a
35 person has:

36 a. a family history of: familial adenomatous polyposis;
37 hereditary non-polyposis colon cancer; or breast, ovarian,
38 endometrial or colon cancer or polyps;

39 b. chronic inflammatory bowel disease; or

40 c. a background, ethnicity or lifestyle that the physician
41 believes puts the person at elevated risk for colorectal cancer.

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

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

47 (cf: P.L.2001, c.295, s.7)

1 9. (New Section) Every State Health Benefits plan that
2 provides hospital or medical expense benefits and is delivered,
3 issued, executed or renewed in this State pursuant to P.L.1961, c.49
4 (C.52:14-17.25 et seq.), or approved for issuance or renewal in this
5 State on or after the effective date of this act, shall provide benefits
6 to any person covered thereunder for expenses incurred in
7 conducting colorectal cancer screening at regular intervals for
8 persons age 45 and over and for persons of any age who are
9 considered to be at high risk for colorectal cancer. The methods of
10 screening for which benefits shall be provided shall include: a
11 screening fecal occult blood test, flexible sigmoidoscopy,
12 colonoscopy, barium enema, or any combination thereof; or the
13 most reliable, medically recognized screening test available. The
14 method and frequency of screening to be utilized shall be in
15 accordance with the most recent published guidelines of the
16 American Cancer Society and as determined medically necessary by
17 the covered person's physician, in consultation with the covered
18 person.

19 As used in this section, "high risk for colorectal cancer" means a
20 person has:

- 21 a. a family history of: familial adenomatous polyposis;
22 hereditary non-polyposis colon cancer; or breast, ovarian,
23 endometrial or colon cancer or polyps;
24 b. chronic inflammatory bowel disease; or
25 c. a background, ethnicity or lifestyle that the physician
26 believes puts the person at elevated risk for colorectal cancer.

27 The benefits shall be provided to the same extent as for any other
28 medical condition under the State Health Benefits plan.

29

30 10. This act shall take effect immediately.

31

32

33

STATEMENT

34

35 This bill reduces the age in which health benefit plans are
36 required to cover regular colorectal cancer screenings from 50 to
37 45.

38 Presently, health benefit plans are only required to cover a
39 colorectal cancer screening at regular intervals for a person who is
40 aged 50 and over, or for a person of any age who is considered to be
41 at high risk for colorectal cancer.

42 Under this bill, the age in which a regular colorectal cancer
43 screening will be covered by health benefit plans is lowered from
44 age 50 to age 45. Additionally, State Health Benefit Plans will now
45 cover colorectal cancer screenings.