

ASSEMBLY, No. 2795

STATE OF NEW JERSEY

220th LEGISLATURE

INTRODUCED FEBRUARY 28, 2022

Sponsored by:

Assemblyman HERB CONAWAY, JR.

District 7 (Burlington)

Assemblyman DANIEL R. BENSON

District 14 (Mercer and Middlesex)

Assemblyman JOE DANIELSEN

District 17 (Middlesex and Somerset)

Co-Sponsored by:

Assemblymen Mukherji, Simonsen and McClellan

SYNOPSIS

Expands requirements for health insurance carriers concerning prostate cancer screening and requires coverage be provided without cost sharing.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 6/16/2022)

1 AN ACT concerning health insurance coverage for prostate cancer
2 screening and amending P.L.1996, c.125 and supplementing
3 various parts of the statutory law.

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

7
8 1. Section 1 of P.L.1996, c.125 (C.17:48E-35.13) is amended
9 to read as follows:.

10 1. a. No health service corporation contract providing hospital
11 or medical expense benefits **for groups with greater than 49**
12 **persons** shall be delivered, issued, executed or renewed in this
13 State, or approved for issuance or renewal in this State by the
14 Commissioner of Insurance on or after the effective date of **this**
15 **act** P.L.1996, c.125 (C.17:48E-35.13 et al.), unless the contract
16 provides benefits to any named subscriber or other person covered
17 thereunder for expenses incurred in conducting an annual
18 **medically recognized diagnostic examination including, but not**
19 **limited to, a digital rectal examination and a prostate-specific**
20 **antigen test for men age 50 and over who are asymptomatic and for**
21 **men age 40 and over with a family history of prostate cancer or**
22 **other prostate cancer risk factors** prostate cancer screening.

23 The benefits shall be provided to the same extent as for any other
24 medical condition under the contract except that no deductible,
25 coinsurance, copayment, or any other cost-sharing requirement on
26 the benefits shall be imposed.

27 This section shall apply to all health service corporation
28 contracts in which the health service corporation has reserved the
29 right to change the premium.

30 b. As used in this section:

31 “Prostate cancer screening” means medically viable methods for
32 the detection and diagnosis of prostate cancer, which includes a
33 digital rectal exam and the prostate-specific antigen test and
34 associated laboratory work. “Prostate cancer screening” shall also
35 include subsequent follow up testing as direct by a health care
36 provider, including, but not limited to:

37 (1) urinary analysis;

38 (2) serum biomarkers;

39 (3) medical imaging, including, but not limited to, magnetic
40 resonance imaging.

41 (cf: P.L.1996, c.125, s.1)

42
43 2. Section 2 of P.L.1996, c.125 (C.17:48-6p) 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. a. No hospital service corporation contract providing hospital
2 or medical expense benefits **【for groups with greater than 49**
3 **persons】** shall be delivered, issued, executed or renewed in this
4 State, or approved for issuance or renewal in this State by the
5 Commissioner of Insurance on or after the effective date of **【this**
6 **act】** P.L.1996, c.125 (C.17:48E-35.13 et al.), unless the contract
7 provides benefits to any named subscriber or other person covered
8 thereunder for expenses incurred in conducting an annual
9 **【medically recognized diagnostic examination including, but not**
10 **limited to, a digital rectal examination and a prostate-specific**
11 **antigen test for men age 50 and over who are asymptomatic and for**
12 **men age 40 and over with a family history of prostate cancer or**
13 **other prostate cancer risk factors】** prostate cancer screening.

14 The benefits shall be provided to the same extent as for any other
15 medical condition under the contract except that no deductible,
16 coinsurance, copayment, or any other cost-sharing requirement on
17 the benefits shall be imposed.

18 This section shall apply to all hospital service corporation
19 contracts in which the hospital service corporation has reserved the
20 right to change the premium.

21 b. As used in this section:

22 “Prostate cancer screening” means medically viable methods for
23 the detection and diagnosis of prostate cancer, which includes a
24 digital rectal exam and the prostate-specific antigen test and
25 associated laboratory work. “Prostate cancer screening” shall also
26 include subsequent follow up testing as direct by a health care
27 provider, including, but not limited to:

28 (1) urinary analysis;

29 (2) serum biomarkers;

30 (3) medical imaging, including, but not limited to, magnetic
31 resonance imaging.

32 (cf: P.L.1996, c.125, s.2)

33
34 3. Section 3 of P.L.1996, c.125 (C.17:48A-7n) is amended to
35 read as follows:

36 3. a. No medical service corporation contract providing hospital
37 or medical expense benefits **【for groups with greater than 49**
38 **persons】** shall be delivered, issued, executed or renewed in this
39 State, or approved for issuance or renewal in this State by the
40 Commissioner of Insurance on or after the effective date of **【this**
41 **act】** P.L.1996, c.125 (C.17:48E-35.13 et al.), unless the contract
42 provides benefits to any named subscriber or other person covered
43 thereunder for expenses incurred in conducting an annual
44 **【medically recognized diagnostic examination including, but not**
45 **limited to, a digital rectal examination and a prostate-specific**
46 **anitgen test for men age 50 and over who are asymptomatic and for**

1 men age 40 and over with a family history of prostate cancer or
2 other prostate cancer risk factors **】** prostate cancer screening.

3 The benefits shall be provided to the same extent as for any other
4 medical condition under the contract except that no deductible,
5 coinsurance, copayment, or any other cost-sharing requirement on
6 the benefits shall be imposed.

7 This section shall apply to all medical service corporation
8 contracts in which the medical service corporation has reserved the
9 right to change the premium.

10 b. As used in this section:

11 “Prostate cancer screening” means medically viable methods for
12 the detection and diagnosis of prostate cancer, which includes a
13 digital rectal exam and the prostate-specific antigen test and
14 associated laboratory work. “Prostate cancer screening” shall also
15 include subsequent follow up testing as direct by a health care
16 provider, including, but not limited to:

17 (1) urinary analysis;

18 (2) serum biomarkers;

19 (3) medical imaging, including, but not limited to, magnetic
20 resonance imaging.

21 (cf: P.L.1996, c.125, s.3)

22

23 4. Section 4 of P.L.1996, c.125 (C.17B:27-46.1o) is amended
24 to read as follows:

25 4. a. No group health insurance policy providing hospital or
26 medical expense benefits **【**for groups with greater than 49 persons**】**
27 shall be delivered, issued, executed or renewed in this State, or
28 approved for issuance or renewal in this State by the Commissioner
29 of Insurance on or after the effective date of **【**this act**】**
30 P.L.1996, c.125 (C.17:48E-35.13 et al.), unless the policy provides
31 benefits to any named insured or other person covered thereunder
32 for expenses incurred in conducting an annual **【**medically
33 recognized diagnostic examination including, but not limited to, a
34 digital rectal examination and a prostate-specific antigen test for
35 men age 50 and over who are asymptomatic and for men age 40 and
36 over with a family history of prostate cancer or other prostate
37 cancer risk factors**】** prostate cancer screening.

38 The benefits shall be provided to the same extent as for any other
39 medical condition under the policy except that no deductible,
40 coinsurance, copayment, or any other cost-sharing requirement on
41 the benefits shall be imposed.

42 This section shall apply to all group health insurance policies in
43 which the health insurer has reserved the right to change the
44 premium.

45 b. As used in this section:

46 “Prostate cancer screening” means medically viable methods for
47 the detection and diagnosis of prostate cancer, which includes a

1 digital rectal exam and the prostate-specific antigen test and
2 associated laboratory work. “Prostate cancer screening” shall also
3 include subsequent follow up testing as directed by a health care
4 provider, including, but not limited to:

5 (1) urinary analysis;

6 (2) serum biomarkers;

7 (3) medical imaging, including, but not limited to, magnetic
8 resonance imaging.

9 (cf: P.L.1996, c.125, s.4)

10
11 5. Section 5 of P.L.1996, c.125 (C.26:2J-4.13) is amended to
12 read as follows:

13 5. a. A certificate of authority to establish and operate a health
14 maintenance organization in this State shall not be issued or
15 continued by the Commissioner of Health on or after the effective
16 date of **【this act】** P.L.1996, c.125 (C.17:48E-35.13 et al.) unless the
17 health maintenance organization provides health care services to
18 any enrollee which include an annual **【medically recognized**
19 **diagnostic examination including, but not limited to, a digital rectal**
20 **examination and a prostate-specific antigen test for men age 50 and**
21 **over who are asymptomatic and for men age 40 and over with a**
22 **family history of prostate cancer or other prostate cancer risk**
23 **factors】 prostate cancer screening.**

24 The health care services shall be provided to the same extent as
25 for any other medical condition under the contract except that no
26 deductible, coinsurance, copayment, or any other cost-sharing
27 requirement on the services shall be imposed.

28 The provisions of this section shall apply to all contracts for
29 health care services by health maintenance organizations under
30 which the right to change the schedule of charges for enrollee
31 coverage is reserved.

32 b. As used in this section:

33 “Prostate cancer screening” means medically viable methods for
34 the detection and diagnosis of prostate cancer, which includes a
35 digital rectal exam and the prostate-specific antigen test and
36 associated laboratory work. “Prostate cancer screening” shall also
37 include subsequent follow up testing as directed by a health care
38 provider, including, but not limited to:

39 (1) urinary analysis;

40 (2) serum biomarkers;

41 (3) medical imaging, including, but not limited to, magnetic
42 resonance imaging.

43 (cf: P.L.1996, c.125, s.5)

44
45 6. (New section)a. (1) Every individual health insurance
46 policy that provides hospital or medical expense benefits and is
47 delivered, issued, executed or renewed in this State pursuant to
48 chapter 26 of Title 17B of the New Jersey Statutes, or approved for

1 issuance or renewal in this State by the Commissioner of Banking
2 and Insurance, on or after the effective date of this act shall provide
3 coverage for an annual prostate cancer screening.

4 The benefits shall be provided to the same extent as for any other
5 medical condition under the contract except that no deductible,
6 coinsurance, copayment, or any other cost-sharing requirement on
7 the services shall be imposed.

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

10 b. As used in this section:

11 “Prostate cancer screening” means medically viable methods for
12 the detection and diagnosis of prostate cancer, which includes a
13 digital rectal exam and the prostate-specific antigen test and
14 associated laboratory work. “Prostate cancer screening” shall also
15 include subsequent follow up testing as direct by a health care
16 provider, including, but not limited to:

- 17 (1) urinary analysis;
- 18 (2) serum biomarkers;
- 19 (3) medical imaging, including, but not limited to, magnetic
20 resonance imaging.

21
22 7. (New section) a. (1) Every individual health benefits plan
23 that provides hospital or medical expense benefits and is delivered,
24 issued, executed or renewed in this State pursuant to P.L.1992,
25 c.161 (C.17B:27A-2 et seq.) or approved for issuance or renewal in
26 this State on or after the effective date of this act shall provide
27 benefits for an annual prostate cancer screening.

28 The benefits shall be provided to the same extent as for any other
29 medical condition under the contract except that no deductible,
30 coinsurance, copayment, or any other cost-sharing requirement on
31 the services shall be imposed.

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

35 b. As used in this section:

36 “Prostate cancer screening” means medically viable methods for
37 the detection and diagnosis of prostate cancer, which includes a
38 digital rectal exam and the prostate-specific antigen test and
39 associated laboratory work. “Prostate cancer screening” shall also
40 include subsequent follow up testing as direct by a health care
41 provider, including, but not limited to:

- 42 (1) urinary analysis;
- 43 (2) serum biomarkers;
- 44 (3) medical imaging, including, but not limited to, magnetic
45 resonance imaging.

46
47 8. (New section) a. Every small employer health benefits plan
48 that provides hospital or medical expense benefits and is delivered,

1 issued, executed or renewed in this State pursuant to P.L.1992,
2 c.162 (C.17B:27A-17 et seq.) or approved for issuance or renewal
3 in this State on or after the effective date of this act shall provide
4 benefits for an annual prostate cancer screening.

5 The benefits shall be provided to the same extent as for any other
6 medical condition under the contract except that no deductible,
7 coinsurance, copayment, or any other cost-sharing requirement on
8 the services shall be imposed.

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

12 b. As used in this section:

13 “Prostate cancer screening” means medically viable methods for
14 the detection and diagnosis of prostate cancer, which includes a
15 digital rectal exam and the prostate-specific antigen test and
16 associated laboratory work. “Prostate cancer screening” shall also
17 include subsequent follow up testing as direct by a physician,
18 including, but not limited to:

19 (1) urinary analysis;

20 (2) serum biomarkers;

21 (3) medical imaging, including, but not limited to, magnetic
22 resonance imaging.
23

24 9. (New section) a. The State Health Benefits Commission
25 shall ensure that every contract purchased by the commission on or
26 after the effective date of this act that provides hospital or medical
27 expense benefits shall provide coverage for an annual prostate
28 cancer screening.

29 The benefits shall be provided to the same extent as for any other
30 medical condition under the contract except that no deductible,
31 coinsurance, copayment, or any other cost-sharing requirement on
32 the services shall be imposed.

33 b. As used in this section:

34 “Prostate cancer screening” means medically viable methods for
35 the detection and diagnosis of prostate cancer, which includes a
36 digital rectal exam and the prostate-specific antigen test and
37 associated laboratory work. “Prostate cancer screening” shall also
38 include subsequent follow up testing as direct by a health care
39 provider, including, but not limited to:

40 (1) urinary analysis;

41 (2) serum biomarkers;

42 (3) medical imaging, including, but not limited to, magnetic
43 resonance imaging.
44

45 10. (New section) a. The School Employees’ Health Benefits
46 Commission shall ensure that every contract purchased by the
47 commission on or after the effective date of this act that provides

1 hospital or medical expense benefits shall provide coverage for an
2 annual prostate cancer screening.

3 The benefits shall be provided to the same extent as for any other
4 medical condition under the contract except that no deductible,
5 coinsurance, copayment, or any other cost-sharing requirement on
6 the services shall be imposed.

7 b. As used in this section:

8 “Prostate cancer screening” means medically viable methods for
9 the detection and diagnosis of prostate cancer, which includes a
10 digital rectal exam and the prostate-specific antigen test and
11 associated laboratory work. “Prostate cancer screening” shall also
12 include subsequent follow up testing as direct by a health care
13 provider, including, but not limited to:

14 (1) urinary analysis;

15 (2) serum biomarkers;

16 (3) medical imaging, including, but not limited to, magnetic
17 resonance imaging.

18

19 11. This act shall take effect on the 90th day next following the
20 date of enactment and shall apply to all contracts and policies
21 delivered, issued, executed, or renewed on or after that date.

22

23

24 STATEMENT

25

26 This bill requires health, hospital, and medical service
27 corporations, health maintenance organizations, and commercial
28 group health insurers to provide coverage for an annual prostate
29 cancer screening without cost sharing. Under current law, these
30 health insurance carriers are required only to provide coverage for
31 an annual medically recognized diagnostic examination including,
32 but not limited to, a digital rectal examination and a prostate-
33 specific antigen test for men age 50 and over who are asymptomatic
34 and for men age 40 and over with a family history of prostate
35 cancer or other prostate cancer risk factors. The bill expands the
36 definition of “prostate cancer screening” to mean medically viable
37 methods for the detection and diagnosis of prostate cancer, which
38 includes a digital rectal exam and the prostate-specific antigen test
39 and associated laboratory work. “Prostate cancer screening” shall
40 also include subsequent follow up testing as direct by a physician,
41 including, but not limited to:

42 (1) urinary analysis;

43 (2) serum biomarkers;

44 (3) medical imaging, including, but not limited to, magnetic
45 resonance imaging.

46 The bill also extends the prostate cancer screening requirements
47 to commercial individual health insurers, health benefits plans
48 issued pursuant to the New Jersey Individual Health Coverage and

A2795 CONAWAY, BENSON

9

1 Small Employer Health Benefits Programs, the State Health
2 Benefits Program, and the School Employees' Health Benefits
3 Program, which are not required to provide this coverage under
4 current law.