

17B:27-46.1a

LEGISLATIVE HISTORY CHECKLIST

NJSA: 17:B-27-46.1a (Mastectomy—expenses must be lowered in health insurance other policies)

LAWS OF: 1983 CHAPTER: 52

Bill No.: A524

Sponsor(s): Herman

Date Introduced: Pre-filed

Committee: Assembly: Banking and Insurance

Senate: Institutions, Health and Welfare

Amended during passage /// No Substituted for S871 (not attached since identical to A524) Amendments during passage denoted by asterisks.

Date of Passage: Assembly: June 21, 1982

Senate: Dec. 20, 1982

Date of Approval: Feb. 2, 1983

Following statements are attached if available:

Sponsor statement:		Yes	// (Below)
Committee statement:	Assembly	Yes	//
	Senate	Yes	//
Fiscal Note:		///	No
Veto Message		///	No
Message on Signing:		///	No Yes
Following were printed:			
Reports:		///	No
Hearings:		///	No

Sponsor's statement:

This bill mandates complete coverage of reconstructive breast surgery by commercial insurers writing group health insurance contracts. This includes the costs of prostheses and outpatient chemotherapy following surgical procedures in connection with breast cancer treatment.

[OFFICIAL COPY REPRINT]

ASSEMBLY, No. 524

STATE OF NEW JERSEY

PRE-FILED FOR INTRODUCTION IN THE 1982 SESSION

By Assemblyman HERMAN

AN Act providing for the inclusion in group health insurance ***[con-**
tracts]* **policies** of benefits for expenses incurred in connec-
tion with a mastectomy, and supplementing chapter 27 of Title
17B of the New Jersey Statutes.

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

1 1. Every group health insurance ***[contract]*** **policy** provid-
2 ing hospital or medical expense benefits delivered, issued, executed
3 or renewed in this State, or approved for issuance or renewal in
4 this State by the Commissioner of Insurance **on or** after the
5 effective date of this act, shall provide benefits for reconstructive
6 breast surgery, including but not limited to: the costs of prostheses
7 and **under any policy providing outpatient x-ray or radiation*
8 *therapy, the costs of** outpatient chemotherapy following surgical
9 procedures in connection with the treatment of breast cancer **shall*
10 *be included as a part of the outpatient x-ray or radiation therapy*
11 *coverage. The provisions of this section shall apply to all policies*
12 *in which the insurer has reserved the right to change the premium**.
13 Such benefits shall be provided to the same extent as for any other
14 sickness under the ***[contract]*** **policy**.

1 2. The Commissioner of Insurance may promulgate such regu-
2 lations as he deems necessary to effectuate the purposes of this act.

1 ***[3.** This act shall apply to all policies or contracts in which the
2 insurer has reserved the right to change the premium.]*

1 ***[4.]*** **3.** This act shall take effect on the ninetieth day fol-
2 lowing enactment.

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 printed in italics *thus* is new matter.

Matter enclosed in asterisks or stars has been adopted as follows:

*—Assembly committee amendments adopted June 14, 1982.

ASSEMBLY, No. 524

STATE OF NEW JERSEY

PRE-FILED FOR INTRODUCTION IN THE 1982 SESSION

By Assemblyman HERMAN

AN ACT providing for the inclusion in group health insurance contracts of benefits for expenses incurred in connection with a mastectomy, and supplementing chapter 27 of Title 17B of the New Jersey Statutes.

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

1 1. Every group health insurance contract providing hospital or
2 medical expense benefits delivered, issued, executed or renewed
3 in this State, or approved for issuance or renewal in this State
4 by the Commissioner of Insurance after the effective date of this
5 act, shall provide benefits for reconstructive breast surgery, includ-
6 ing but not limited to: the costs of prostheses and outpatient
7 chemotherapy following surgical procedures in connection with
8 the treatment of breast cancer. Such benefits shall be provided to
9 the same extent as for any other sickness under the contract.

1 2. The Commissioner of Insurance may promulgate such regu-
2 lations as he deems necessary to effectuate the purposes of this act.

1 3. This act shall apply to all policies or contracts in which the
2 insurer has reserved the right to change the premium.

1 4. This act shall take effect on the ninetieth day following enact-
2 ment.

STATEMENT

This bill mandates complete coverage of reconstructive breast surgery by commercial insurers writing group health insurance contracts. This includes the costs of prostheses and outpatient chemotherapy following surgical procedures in connection with breast cancer treatment.

ASSEMBLY BANKING AND INSURANCE COMMITTEE

STATEMENT TO

ASSEMBLY, No. 524

with Assembly committee amendments

STATE OF NEW JERSEY

DATED: JUNE 14, 1982

Assembly Bill No. 524 requires every group health insurance contract providing hospital or medical expense benefits pursuant to chapter 27 of Title 17B of the New Jersey Statutes, to provide benefits for reconstructive breast surgery.

Section 1 of the bill defines the service benefits reimbursable under reconstructive breast surgery coverage, which benefits include prostheses and outpatient chemotherapy following surgery for treatment of breast cancer.

The provisions of the bill shall take effect on the ninetieth day following enactment, and benefit coverage shall apply to group health insurance contract delivered, issued, executed, renewed, or approved for issuance or renewal after that date, under which insurer reserves the right to change the contract premium.

Assembly committee amendments are primarily of a technical nature.

SENATE INSTITUTIONS, HEALTH AND WELFARE
COMMITTEE

STATEMENT TO
ASSEMBLY, No. 524

[OFFICIAL COPY REPRINT]

STATE OF NEW JERSEY

DATED: NOVEMBER 23, 1982

This bill requires that all commercial group health insurance policies which provide hospital or medical expense benefits, also provide benefits for reconstructive breast surgery.

The bill provides that service benefits reimbursable under reconstructive breast surgery shall include prostheses and, if out-of-hospital or outpatient x-ray or radiation coverage is provided, out-of-hospital or outpatient chemotherapy following surgery for treatment of breast cancer. The requirements of this bill shall apply to all contracts in which the insurer has reserved the right to change the premium.

OFFICE OF THE GOVERNOR

RELEASE: IMMEDIATE

CONTACT: PAUL WOLCOTT

WEDNESDAY, FEBRUARY 2, 1983

Governor Thomas H. Kean has signed a package of four bills which mandate that health insurance plans provide complete coverage for reconstructive breast surgery, including the costs of prostheses and out-patient chemotherapy following surgical procedures in connection with breast cancer treatment.

The four bills (A-522, A-523, A-524 and A-525) are all sponsored by Assemblyman Martin A. Herman, (D-Salem). The bills mandate the new coverage to Blue Cross, Blue Shield, and commercial insurers both group and individual health insurance contracts.

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