

17:48-6b

LEGISLATIVE HISTORY CHECKLIST

NJSA: 17:48-6b (Mastectomy - expenses must be included in health insurance)

LAWS OF: 1983

CHAPTER: 50

Bill No.: A522

Sponsor(s): Herman

Date Introduced: Pre-filed

Committee: Assembly: Banking and Insurance

Senate: Institutions, Health and Welfare

Amended during passage Yes // Amendments during passage denoted by asterisks. Substituted for A869 (not attached since identical to A522)

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 that hospital service corporations (Blue Cross) provide coverage for reconstructive breast surgery, including the costs of prostheses and outpatient chemotherapy following surgical procedures in connection with breast cancer treatment.

Original Form of Bill

2-2-83

[OFFICIAL COPY REPRINT]

ASSEMBLY, No. 522

STATE OF NEW JERSEY

PRE-FILED FOR INTRODUCTION IN THE 1982 SESSION

By Assemblyman HERMAN

AN ACT providing for the inclusion in group and individual health insurance contracts of benefits for expenses incurred in connection with a mastectomy, and supplementing ***[chapter 48 of Title 17 of the Revised Statutes]*** *P. L. 1938, c. 366 (C. 17:48-1 et seq.)*.

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

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

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

1 ***[3. This act shall apply to all contracts in which the hospital**
2 **service corporation 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. 522

STATE OF NEW JERSEY

PRE-FILED FOR INTRODUCTION IN THE 1982 SESSION

By Assemblyman HERMAN

AN ACT providing for the inclusion in group and individual health insurance contracts of benefits for expenses incurred in connection with a mastectomy, and supplementing chapter 48 of Title 17 of the Revised Statutes.

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

1 1. Every subscription certificate and group and individual health
2 insurance contract providing hospital expense benefits delivered,
3 issued, executed or renewed in this State, or approved for issuance
4 or renewal in this State by the Commissioner of Insurance after
5 the effective date of this act, shall provide benefits for reconstruc-
6 tive breast surgery, including but not limited to: the cost of
7 prostheses and, under any contract providing outpatient x-ray
8 or radiation therapy, outpatient chemotherapy following surgical
9 procedures in connection with the treatment of breast cancer. Such
10 benefits shall be provided to the same extent as for any other sick-
11 ness under the contract.

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

1 3. This act shall apply to all contracts in which the hospital
2 service corporation has reserved the right to change the premium.

1 4. This act shall take effect on the ninetieth day following
2 enactment.

STATEMENT

This bill mandates that hospital service corporations (Blue Cross) provide coverage for reconstructive breast surgery, including 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. 522

with Assembly committee amendments

STATE OF NEW JERSEY

DATED: JUNE 14, 1982

Assembly Bill No. 522 requires every health services subscription certificate or contract (group or individual) issued by a hospital service corporation pursuant to chapter 48 of Title 17 of the Revised Statutes (C. 17:48-1 et seq.), to provide benefits for reconstructive breast surgery.

Section 1 of the bill defines the hospital services reimbursable under reconstructive breast surgery coverage, which include prostheses and, if outpatient x-ray or radiation coverage is provided, outpatient chemotherapy following surgery for treatment of breast cancer.

The provisions of the bill shall take effect on the 90th day following enactment, and benefit coverage shall apply to any subscription certificate or group or individual contract delivered, issued, executed, renewed or approved for issuance or renewal, after the date, under which the hospital service corporation 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. 522

[OFFICIAL COPY REPRINT]

STATE OF NEW JERSEY

DATED: NOVEMBER 23, 1982

This bill requires that all group and individual hospital service benefits contracts 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.

###