

17:48A-76

LEGISLATIVE HISTORY CHECKLIST

NJSA: 17:48A-7b (Mastectomy - expenses must be covered in health insurance - Blue Shield)

LAWS OF: 1983 CHAPTER: 51

Bill No.: A523

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 S870 (not attached since identical to A523)

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

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2-2-83

[OFFICIAL COPY REPRINT]

ASSEMBLY, No. 523

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 48A of Title 17 of the Revised Statutes]*** **P. L. 1940, c. 74 (C. 17:48A-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 medical ***[expense]***
3 **service** benefits 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, shall provide benefits for reconstructive breast surgery, includ-
7 ing but not limited to: the costs of prostheses and, under any con-
8 tract providing out-of-hospital x-ray or radiation therapy, **benefits*
9 *for** out-of-hospital chemotherapy following surgical procedures in
10 connection with the treatment of breast cancer **shall be included as*
11 *a part of the out-of-hospital x-ray or radiation therapy benefit.*
12 *The provisions of this section shall apply to all contracts in which*
13 *the medical service corporation has reserved the right to change the*
14 *premium**. Such benefits shall be provided to the same extent as
15 for any other 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 medical**
2 **service corporation has reserved the right to change the premium.]***

1 ***[4.]*** **3.** This act shall take effect on the ninetieth day follow-
2 ing 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. 523

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 48A 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 medical 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 reconstructive
6 breast surgery, including but not limited to: the costs of
7 prostheses and, under any contract providing out-of-hospital x-ray
8 or radiation therapy, out-of-hospital chemotherapy following surgical
9 procedures in connection with the treatment of breast cancer.
10 Such benefits shall be provided to the same extent as for any other
11 sickness under the contract.

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

1 3. This act shall apply to all contracts in which the medical
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 medical service corporations (Blue Shield) 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. 523

with Assembly committee amendments

STATE OF NEW JERSEY

DATED: JUNE 14, 1982

Assembly Bill No. 523 requires every medical service subscription certificate or contract (group or individual), issued by a medical service corporation pursuant to P. L. 1940, c. 74 (C. 17:48A-1 et seq.), to provide benefits for reconstructive breast surgery.

Section 1 of the bill defines the medical services reimbursable under reconstructive breast surgery coverage, which include prostheses and, if out-of-hospital x-ray or radiation coverage is provided, out-of-hospital 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 that date, under which the medical 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. 523

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STATE OF NEW JERSEY



DATED: NOVEMBER 23, 1982

This bill requires that all group and individual medical 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.

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