17:48-6 AND 6.1

LEGISLATIVE HISTORY CHECKLIST

NJSA 11:48-6 and 17:48-6	. 1		
Laws of 1975 Chap	ter		
Bill No. A1501			
Sponsor(s) Keegan			
Date Introduced April 4, 19	74	-	
Committee: Assembly Institute	tutions, Health &	Welfare; anking	Insurance
SenateInstit	tutions, Health &	Welfare	
Amended during passage	Yes		s during passage
Date of passage: Assembly	May 6, 1974	- denoted b	y asterisks
Senate _	Feb. 27, 1975		
Date of approval June 3, 19	975	_	
Following statements are a	ttached if ava	ilable:	8 =
Sponsor statement	Yes	Xto	로 나
Committee Statement: Asse	mbly Yess	No	<u></u>
Sena	te Yes	îФo	<u>@</u>
Fiscal Note	X a s	No	mc —
Veto message	¥æs.	No	š C
Message on signing	¥æs	No	Not Remove From
Following were printed:			non Y
Reports	¥æs	No	7 5

Cited in sponsor's statement:

"Model New Born Child Bill" prepared by American Academy of Pediatrics, November 1973. (Copy attached).

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No

Also attached:

Hearings

AAP-HIAA statement supporting model bill, Nov. 21, 1973. List of States which had adopted the law as of July, 1975.

JUN 1977 10/4/76 JUN 1977

CHAPTER / 6 4 LAWS OF N. J. 1975

APPROVED 6 - 3 - 25

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ASSEMBLY, No. 1501

STATE OF NEW JERSEY

INTRODUCED APRIL 4, 1974

By Assemblyman KEEGAN

Referred to Committee on Institutions, Health and Welfare

An Act to amend "An act concerning hospital service corporations and regulating the establishment, maintenance and operation of hospital service plans, and supplementing Title 17 of the Revised Statutes by adding thereto a new chapter entitled 'Hospital Service Corporations,' "approved June 14, 1938 (P. L. 1938, c. 366), and P. L. 1964, c. 104.

- 1 Be it enacted by the Senate and General Assembly of the State
- 2 of New Jersey:
- 1 1. Section 6 of P. L. 1938, c. 366 (C. 17:48-6) is amended to read
- 2 as follows:
- 3 6. Every individual contract made by a corporation subject to
- 4 the provisions of this chapter to furnish services to a subscriber
- 5 shall provide for the furnishing of services for a period of 12
- 6 months, and no contract shall be made providing for the inception
- 7 of such services at a date later than 1 year after the actual date of
- 8 the making of such contract. Any such contract may provide that
- 9 it shall be automatically renewed from year to year unless there
- 10 shall have been at least 30 days prior written notice of termination
- 11 by either the subscriber or the corporation. In the absence of fraud
- 12 or material misrepresentation in the application for a contract
- 13 or for reinstatement, no contract with an individual subscriber shall
- 14 be terminated by the corporation unless all contracts of the same
- 15 type, in the same group or covering the same classification of per-
- 16 sons are terminated under the same conditions.
- 17 No contract between any such corporation and a subscriber shall
- 18 entitle more than one person to services, except that a contract
- 19 issued as a family contract may provide that services will be fur-EXPLANATION—Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

20 nished to a husband and wife, or husband, wife and their dependent 21 child or children, or the subscriber and his (or her) dependent child 22 or children. Adult dependent(s) of a subscriber may also be in-23 cluded for coverage under the contract of such subscriber.

24 Family type contracts shall provide that the services applicable for children shall be payable with respect to a newly-born child of 25 the subscriber, or his or her spouse from the moment of birth. 2627 The services for newly-born children shall consist of coverage of 28 injury or sickness including the necessary care and treatment of 29 medically diagnosed congenital defects and abnormalities. If a subscription payment is required to provide services for a child, 30 31 the contract may require that notification of birth of a newly-born 32 child and the required payment must be furnished to the service 33 corporation within 31 days after the date of birth in order to have the coverage continue beyond such 31-day period. 34

*Nonfamily type contracts *which provide for services to the 34B subscriber but not to family members or dependents of that sub-34c scriber,* shall also provide services to newly-born children of the 34D subscriber which shall commence with the *[date]* *moment* 34E of birth of each child and shall consist of coverage of injury or 34F sickness including the necessary care and treatment of medically 34G diagnosed congenital defects and abnormalities, provided that 34H application *[is]* *therefor and payment of the required sub-34I scription amount are* made to *[convert]* *include in* said 34J contract *[to a family contract]* *the coverage described in the 34K preceding paragraph of this section* within *[30]* *31* days from 34L the date of birth of a newborn child.*

35 A contract under which coverage of a dependent of a subscriber terminates at a specified age shall, with respect to an unmarried 36 child, covered by the contract prior to attainment of age 19, who is 37 incapable of self-sustaining employment by reason of mental re-38 tardation or physical handicap and who became so incapable prior 39 to attainment of age 19 and who is chiefly dependent upon such **4**0 subscriber for support and maintenance, not so terminate while the 41 contract remains in force and the dependent remains in such con-42dition, if the subscriber has within 31 days of such dependent's 43 attainment of the termination age submitted proof of such depen-44 dent's incapacity as described herein. The foregoing provisions of 45 **46** this paragraph shall not apply retrospectively or prospectively to require a hospital service corporation to insure as a covered de-47 48 pendent any mentally retarded or physically handicapped child of 49 the applicant where the contract is underwritten on evidence of insurability based on health factors required to be set forth in the 50

application. In such cases any contract heretofore or hereafter 52issued may specifically exclude such mentally retarded or physically

53 handicapped child from coverage.

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54 Every individual contract entered into by any such corporation with any subscriber thereto shall be in writing and a certificate 55 56 stating the terms and conditions thereof shall be furnished to the subscriber to be kept by him. No such certificate form shall be 57 made, issued or delivered in this State unless it contains the **5**8 **5**9 following provisions:

- 60 (a) A statement of the contract rate, or amount payable to the corporation by or on behalf of the subscriber for the original 62quarter-annual period of coverage and of the time or times at which, and the manner in which, such amount is to be paid; and a pro-63 vision requiring 30 days written notice to the subscriber before 64 any change in the contract, including a change in the amount of subscription rate, shall take effect; 66
- (b) A statement of the nature of the services to be furnished and 67 the period during which they will be furnished; and if there are any 68 services to be excepted, a detailed statement of such exceptions 69 printed as hereinafter specified; 70
- (c) A statement of the terms and conditions, if any, upon which 71 72the contract may be amended on approval of the commissioner or 73 canceled or otherwise terminated at the option of either party. Any notice to the subscriber shall be effective if sent by mail to the sub-74 scriber's address as shown at the time on the plan's records, except 75 that, in the case of persons for whom payment of the contract is 76 made through a remitting agent, any such notice to the subscriber 77 shall also be effective if a personalized notice is sent to the remitting 78 agent for delivery to the subscriber, in which case it shall be the 79 80 responsibility of the remitting agent to make such delivery. The 81 notice to the subscriber as herein required shall be sent at least 30 days before the amendment, cancellation or termination of 82the contract takes effect. Any rider or endorsement accompanying 83 such notice, and amending the rates or other provisions of the con-84 85 tract, shall be deemed to be a part of the contract as of the effective 86 date of such rider or endorsement;
- (d) A statement that the contract includes the endorsements 87 thereon and attached papers, if any, and contains the entire con-88 89 tract for services;
- 90 (e) A statement that no statement by the subscriber in his appli-91 cation for a contract shall avoid the contract or be used in any legal 92 proceeding thereunder, unless such application or an exact copy

- 93 thereof is included in or attached to such contract, and that no agent
- 94 or representative of such corporation, other than an officer or
- 95 officers designated therein, is authorized to change the contract or
- 96 waive any of its provisions;
- 97 (f) A statement that if the subscriber defaults in making any
- 98 payment under the contract, the subsequent acceptance of a pay-
- 99 ment by the corporation or by one of its duly authorized agents shall
- 100 reinstate the contract, but with respect to sickness and injury may
- 101 cover such sickness as may be first manifested more than 10 days
- 102 after the date of such acceptance;
- 103 (g) A statement of the period of grace which will be allowed the
- 104 subscriber for making any payment due under the contract. Such
- 105 period shall be not less than 10 days.
- 105A In every such contract made, issued or delivered in this State:
- 106 (a) All printed portions shall be plainly printed in type of which
- 107 the face is not smaller than 10 point;
- 108 (b) There shall be a brief description of the contract on its first
- 109 page and on its filing back in type of which the face is not smaller
- 110 than 14 point;
- 111 (c) The exceptions of the contract shall appear with the same
- 112 prominence as the benefits to which they apply; and
- 113 (d) If the contract contains any provision purporting to make
- 114 any portion of the articles, constitution or bylaws of the corpora-
- 115 tion a part of the contract, such portion shall be set forth in full.
 - 2. Section 2 of P. L. 1964, c. 104 (C. 17:48-6.1) is amended to
- 2 read as follows:
- 3 2. A hospital service corporation may issue to a policyholder a
- 4 group contract, covering at least 10 employees or members at the
- 5 date of issue, if it conforms to the following description:
- 6 (a) A contract issued to an employer or to the trustees of a fund
- 7 established by one or more employers, or issued to a labor union,
- 8 or issued to an association formed for purposes other than obtain-
- 9 ing such contract, or issued to the trustees of a fund established
- 10 by one or more labor unions, or by one or more employers and one
- 11 or more labor unions, covering employees and members of associa-
- 12 tions or labor unions.
- 13 (b) A contract issued to cover any other group which the Com-
- 14 missioner of [Banking and] Insurance determines may be covered
- 15 in accordance with sound underwriting principles.
- 16 Benefits may be provided for one or more members of the
- 17 families or one or more dependents of persons who may be covered
- 18 under a group contract referred to in (a) or (b) above.

19 Family type contracts shall provide that the services applicable 20 for children shall be payable with respect to a newly-born child 21 of the subscriber, or his or her spouse from the moment of birth. 22 The services for newly-born children shall consist of coverage of injury or sickness including the necessary care and treatment of 23medically diagnosed congenital defects and abnormalities. If a 24subscription payment is required to provide services for a child, 25 26 the contract may require that notification of birth of a newly-born 27 child and the required payment must be furnished to the service 28 corporation within 31 days after the date of birth in order to have 29 the coverage continue beyond such 31-day period.

*[*Nonfamily type contracts, except such group]* *Group con29B tracts which provide for services to the subscriber but not to family
29c members or dependents of that subscriber, other than* contracts
29D *[as]* *which* provide no dependent coverage whatsoever *for
29E the subscriber's class*, shall also provide services to newly-born
29E children of the subscriber which shall commence with the *[date]*
29G *moment* of birth of each child and shall consist of coverage of
29H injury or sickness including the necessary care and treatment of
29I medically diagnosed congenital defects and abnormalities, pro29I vided that application *[is]* *therefor and payment of the required
29K subscription amount are* made to *[convert]* *include in* said
29L contract *[to a family contract]* *the coverage described in the
29M preceding paragraph of this section* within *[30]* *31* days from
29N the date of birth of a newborn child.*

30 A contract under which coverage of such a dependent terminates 31 at a specified age shall, with respect to an unmarried child, covered 32by the contract prior to attainment of age 19, who is incapable of self-sustaining employment by reason of mental retardation or 33 physical handicap and who became so incapable prior to attainment 34 of age 19 and who is chiefly dependent upon the covered employee 35 or member for support and maintenance, not so terminate while 36 37 the coverage of the employee or member remains in force and the dependent remains in such condition, if the employee or member 38 39 has within 31 days of such dependent's attainment of the termina-40 tion age submitted proof of such dependent's incapacity as de-41 scribed herein. The foregoing provisions of this paragraph shall **4**2 not apply retrospectively or prospectively to require a hospital 43 service corporation to insure as a covered dependent any mentally retarded or physically handicapped child of the applicant where 44 the contract is underwritten on evidence of insurability based on 45 health factors required to be set forth in the application. In such

47 cases any contract heretofore or hereafter issued may specifically 48 exclude such mentally retarded or physically handicapped child 49 from coverage.

50 The contract may provide that the term "employees" shall include as employees of a single employer the employees of one 5152or more subsidiary corporations and the employees, individual pro-53 prietors and partners of affiliated corporations, proprietorships and partnerships if the business of the employer and such corpora-**54** tions, proprietorships or partnerships is under common control 55 through stock ownership, contract or otherwise. The contract may 56 provide that the term "employees" shall include the individual 57 proprietor or partners of an individual proprietorship or a part-58 nership. The contract may provide that the term "employees" **5**9 60 shall include retired employees. A contract issued to trustees may provide that the term "employees" shall include the trustees or 61 their employees, or both, if their duties are principally connected with such trusteeship. A contract issued to the trustees of a fund 63 64 established by the members of an association of employers may provide that the term "employees" shall include the employees of the association. 66

1 3. This act shall take effect 120 days following enactment.

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by the contract prior to attainment of age 19, who is incapable of 32self-sustaining employment by reason of mental retardation or 33 physical handicap and who became so incapable prior to attainment 34 35 of age 19 and who is chiefly dependent upon the covered employee or member for support and maintenance, not so terminate while 36 37 the coverage of the employee or member remains in force and the dependent remains in such condition, if the employee or member 38 has within 31 days of such dependent's attainment of the termina-39 tion age submitted proof of such dependent's incapacity as de-**4**0 scribed herein. The foregoing provisions of this paragraph shall 41 not apply retrospectively or prospectively to require a hospital 42 43 service corporation to insure as a covered dependent any mentally retarded or physically handicapped child of the applicant where 44 the contract is underwritten on evidence of insurability based on 45 health factors required to be set forth in the application. In such 46 47 cases any contract heretofore or hereafter issued may specifically 48 exclude such mentally retarded or physically handicapped child 49 from coverage. 50 The contract may provide that the term "employees" shall include as employees of a single employer the employees of one 5152or more subsidiary corporations and the employees, individual proprietors and partners of affiliated corporations, proprietorships 53 and partnerships if the business of the employer and such corpora-54 tions, proprietorships or partnerships is under common control 55 56 through stock ownership, contract or otherwise. The contract may provide that the term "employees" shall include the individual 57 58 proprietor or partners of an individual proprietorship or a part-59 nership. The contract may provide that the term "employees" 60 shall include retired employees. A contract issued to trustees may provide that the term "employees" shall include the trustees or 61 62their employees, or both, if their duties are principally connected with such trusteeship. A contract issued to the trustees of a fund 63 established by the members of an association of employers may 64 provide that the term "employees" shall include the employees of 65

1 3. This act shall take effect 120 days following enactment.

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the association.

STATEMENT

This bill provides that family type contracts for hospital service shall apply to a newly-born child of the subscriber. It is based on the Model New Born Child Bill, prepared by the American Academy of Pediatrics with the assistance of the Health Insurance Association of America.

SENATE INSTITUTIONS, HEALTH AND WELFARE COMMITTEE

STATEMENT TO

ASSEMBLY, No. 1501

STATE OF NEW JERSEY

DATED: SEPTEMBER 30, 1974

The statement already appended to this bill adequately conveys the committee's understanding of the bill's contents.

MODEL NEWBORN CHILDREN BILL

Prepared by the American Academy of Pediatrics with the assistance of The Health Insurance Association of America November 21, 1973

- 1. All individual and group health insurance policies providing coverage on an
- 2. expense incurred basis and individual and group service or indemnity type
- 3. contracts issued by a nonprofit corporation which provide coverage for a
- 4. family member of the insured or subscriber shall, as to such family
- 5. members' coverage, also provide that the health insurance benefits ap-
- 6. plicable for children shall be payable with respect to a newly born child of the
- 7. insured or subscriber from the moment of birth.
- 8. The coverage for newly born children shall consist of coverage of injury or
- 9. sickness including the necessary care and treatment of medically diagnosed
- 10. congenital defects and birth abnormalities.
- 11. If payment of a specific premium or subscription fee is required to provide
- 12. coverage for a child, the policy or contract may require that notification of
- 13. birth of a newly born child and payment of the required premium or fees
- 14. must be furnished to the insurer or nonprofit service or indemnity corporation
- 15. within 31 days after the date of birth in order to have the coverage continue
- 16. beyond such 31 day period.
- 17. The requirements of this act shall apply to all insurance policies and
- 18. subscriber contracts delivered or issued for delivery in this state more
- 19. than 120 days after the effective date of the act.

AAP-HIAA Statement of Principles Supporting the "Model Newborn Children Bill" dated November 21, 1973

- 1. The provisions of the November 21, 1973 "Model Newborn Children Bill" are not intended to imply, and should not be construed so as to imply, the inclusion of coverages for routine well-baby care services.
- 2. Legislation that would mandate the provision of coverage for routine well-baby care services in all health insurance policies generally would not be in the best interests of the insuring public, since to do so without an appropriate health care program containing Federal or state subsidies would simply cause health insurance to become priced beyond the reach of a large segment of the population.
- 3. Principles 1 and 2 above do not in any way place in question nor reflect any negative position with regard to:
 - A. the social or medical value of routine well-baby care services or any other health maintenance services that are considered good medical practice by any professional medical group, or,
 - B. the propriety of seeking to encourage the voluntary provision of well-baby care coverages through negotiation between the purchasers of insurance and insurance carriers, nor the propriety of encouraging the voluntary inclusion of coverages for well-baby care under group pre-paid practice plans or comprehensive health maintenance organization plans.

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NEWBORN INSURANCE

STATES WITH LEGISLATION PASSED

	DE WITH ENGINEERING	11 11 10	<u> </u>
1.	Alabama	24.	Missouri
2.	Alaska	25.	Montana
3.	Arizona	26.	Nebraska
4:	Arkansas	27.	Nevada
5.	California	28.	New Hampshire
6.	Colorado	29.	New Jersey
7.	Connecticut	3 0.	New Mexico
8.	Delaware	31.	North Carolina
9.	Florida	32.	Ohio
10.	Georgia	33.	Oklahoma
11.	Hawaii	34.	Oregon
12.	Idaho	35.	Pennsylvania
13.	Illinois	36.	South Carolina
14.	Indiana	37.	South Dakota
15.	Iowa	38.	Tennessee
16.	Kansas	39.	Texas
17.	Louisiana	40.	Utah
18.	Maine	41.	Virginia
19.	Maryland	42.	Washington
20.	Massachusetts	43.	West Virginia
21.	Michigan	44.	Wisconsin
22.	Minnesota	45.	Wyoming

23. Mississippi

46. Vermont

STATES PRESENTLY WORKING ON LEGISLATION

- 1. Kentucky
- 2. New York
- 3. Rhode Island*
- 4. North Dakota