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**REPORTS:**

No

**HEARINGS:**

No

**NEWSPAPER ARTICLES:**

Yes

"McGreevey signs mammogram bill into law," 7-8-2004 Courier News, p.A3

"Mammogram insurance bill signed into law," 7-8-2004 The Press, p.C10

"Mammograms for under-40 women covered," 7-8-2004 Star-Ledger, p.39

"Mammogram bill signed," 7-8-2004 Courier-Post, p. 5A

"New law requires insurers to cover mammogram costs," 7-8-2004 Asbury park Press, pB4

"Insurers must pay for at-risk mammograms," 7-8-2004 Philadelphia Inquirer, p.B4

"Insurers must cover more mammograms," 7-8-2004 Home News Tribune, p.A3

§7 - C.17B:27A-7.10  
§8 -  
C.17B:27A-19.13  
§9 - C.52:14-17.29i  
§10 - Note to §§1-9

P.L. 2004, CHAPTER 86, *approved July 7, 2004*  
Assembly, No. 2261 (*First Reprint*)

1 AN ACT concerning health benefits coverage for <sup>1</sup>[mammograms]  
2 mammography and treatment of breast cancer<sup>1</sup>, amending  
3 P.L.1991, c.279, and supplementing P.L.1992, c.161 (C.17B:27A-2  
4 et seq.), P.L.1992, c.162 (C.17B:27A-17 et seq.) and P.L.1961,  
5 c.49 (C.52:14-17.25 et seq.).  
6

7 **BE IT ENACTED** by the Senate and General Assembly of the State  
8 of New Jersey:  
9

10 1. Section 1 of P.L.1991, c.279 (C.17:48-6g) is amended to read  
11 as follows:

12 1. <sup>1</sup>[a.]<sup>1</sup> No group or individual hospital service corporation  
13 contract providing hospital or medical expense benefits shall be  
14 delivered, issued, executed or renewed in this State<sup>1</sup>[,]<sup>1</sup> or approved  
15 for issuance or renewal in this State by the Commissioner of Banking  
16 and Insurance<sup>1</sup>,<sup>1</sup> on or after the effective date of this act, unless the  
17 contract provides benefits to any subscriber or other person covered  
18 thereunder for expenses incurred in conducting: <sup>1</sup>[an annual  
19 mammogram examination for women under 40 years of age with a  
20 family history of breast cancer or other breast cancer risk factors,  
21 beginning at that age deemed medically necessary by the woman's  
22 physician;]<sup>1</sup> one baseline mammogram examination for women who  
23 are at least 35 but less than 40 years of age; <sup>1</sup>[and one] a<sup>1</sup>  
24 mammogram examination every year for women age 40 and over<sup>1</sup>;  
25 and, in the case of a woman who is under 40 years of age and has a  
26 family history of breast cancer or other breast cancer risk factors, a  
27 mammogram examination at such age and intervals as deemed  
28 medically necessary by the woman's health care provider<sup>1</sup>.

29 <sup>1</sup>[b.]<sup>1</sup> These benefits shall be provided to the same extent as for  
30 any other sickness under the contract.

31 <sup>1</sup>[c.]<sup>1</sup> The provisions of this section shall apply to all <sup>1</sup>[hospital  
32 service corporation]<sup>1</sup> contracts in which the hospital service  
33 corporation has reserved the right to change the premium.

34 (cf: P.L.1999, c.341, s.1)  
35

36 2. Section 2 of P.L.1991, c.279 (C.17:48A-7f) is amended to read

**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.**

**Matter enclosed in superscript numerals has been adopted as follows:**

<sup>1</sup> Senate SHH committee amendments adopted June 7, 2004.

1 as follows:

2 2. <sup>1</sup>[a.]<sup>1</sup> No group or individual medical service corporation  
3 contract providing hospital or medical expense benefits shall be  
4 delivered, issued, executed or renewed in this State<sup>1</sup>[,<sup>1</sup>] or approved  
5 for issuance or renewal in this State by the Commissioner of Banking  
6 and Insurance<sup>1</sup>,<sup>1</sup> on or after the effective date of this act, unless the  
7 contract provides benefits to any subscriber or other person covered  
8 thereunder for expenses incurred in conducting: <sup>1</sup>[an annual  
9 mammogram examination for women under 40 years of age with a  
10 family history of breast cancer or other breast cancer risk factors,  
11 beginning at that age deemed medically necessary by the woman's  
12 physician;]<sup>1</sup> one baseline mammogram examination for women who  
13 are at least 35 but less than 40 years of age; <sup>1</sup>[and one] a<sup>1</sup>  
14 mammogram examination every year for women age 40 and over<sup>1</sup>;  
15 and, in the case of a woman who is under 40 years of age and has a  
16 family history of breast cancer or other breast cancer risk factors, a  
17 mammogram examination at such age and intervals as deemed  
18 medically necessary by the woman's health care provider<sup>1</sup>.

19 <sup>1</sup>[b.]<sup>1</sup> These benefits shall be provided to the same extent as for  
20 any other sickness under the contract.

21 <sup>1</sup>[c.]<sup>1</sup> The provisions of this section shall apply to all <sup>1</sup>[medical  
22 service corporation]<sup>1</sup> contracts in which the medical service  
23 corporation has reserved the right to change the premium.

24 (cf: P.L.1999, c.341, s.2)

25

26 3. Section 3 of P.L.1991, c.279 (C.17:48E-35.4) is amended to  
27 read as follows:

28 3. <sup>1</sup>[a.]<sup>1</sup> No group or individual health service corporation  
29 contract providing hospital or medical expense benefits shall be  
30 delivered, issued, executed or renewed in this State<sup>1</sup>[,<sup>1</sup>] or approved  
31 for issuance or renewal in this State by the Commissioner of Banking  
32 and Insurance<sup>1</sup>,<sup>1</sup> on or after the effective date of this act, unless the  
33 contract provides benefits to any subscriber or other person covered  
34 thereunder for expenses incurred in conducting: <sup>1</sup>[an annual  
35 mammogram examination for women under 40 years of age with a  
36 family history of breast cancer or other breast cancer risk factors,  
37 beginning at that age deemed medically necessary by the woman's  
38 physician;]<sup>1</sup> one baseline mammogram examination for women who  
39 are at least 35 but less than 40 years of age; <sup>1</sup>[and one] a<sup>1</sup>  
40 mammogram examination every year for women age 40 and over<sup>1</sup>;  
41 and, in the case of a woman who is under 40 years of age and has a  
42 family history of breast cancer or other breast cancer risk factors, a  
43 mammogram examination at such age and intervals as deemed  
44 medically necessary by the woman's health care provider<sup>1</sup>.

45 <sup>1</sup>[b.]<sup>1</sup> These benefits shall be provided to the same extent as for

1 any other sickness under the contract.

2 <sup>1</sup>[c.]<sup>1</sup> The provisions of this section shall apply to all <sup>1</sup>[health  
3 service corporation]<sup>1</sup> contracts in which the health service corporation  
4 has reserved the right to change the premium.

5 (cf: P.L.1999, c.341, s.3)

6

7 4. Section 4 of P.L.1991, c.279 (C.17B:26-2.1e) is amended to  
8 read as follows:

9 4. <sup>1</sup>[a.]<sup>1</sup> No individual health insurance policy providing hospital  
10 or medical expense benefits shall be delivered, issued, executed or  
11 renewed in this State<sup>1</sup>[,]<sup>1</sup> or approved for issuance or renewal in this  
12 State by the Commissioner of Banking and Insurance<sup>1</sup>,<sup>1</sup> on or after the  
13 effective date of this act, unless the policy provides benefits to any  
14 named insured or other person covered thereunder for expenses  
15 incurred in conducting: <sup>1</sup>[an annual mammogram examination for  
16 women under 40 years of age with a family history of breast cancer or  
17 other breast cancer risk factors, beginning at that age deemed  
18 medically necessary by the woman's physician;]<sup>1</sup> one baseline  
19 mammogram examination for women who are at least 35 but less than  
20 40 years of age; <sup>1</sup>[and one] <sup>1</sup>a<sup>1</sup> mammogram examination every year  
21 for women age 40 and over<sup>1</sup>; and, in the case of a woman who is  
22 under 40 years of age and has a family history of breast cancer or  
23 other breast cancer risk factors, a mammogram examination at such  
24 age and intervals as deemed medically necessary by the woman's health  
25 care provider<sup>1</sup>.

26 <sup>1</sup>[b.]<sup>1</sup> These benefits shall be provided to the same extent as for  
27 any other sickness under the policy.

28 <sup>1</sup>[c.]<sup>1</sup> The provisions of this section shall apply to all policies in  
29 which the insurer has reserved the right to change the premium.

30 (cf: P.L.1999, c.341, s.4)

31

32 5. Section 5 of P.L.1991, c.279 (C.17B:27-46.1f) is amended to  
33 read as follows:

34 5. <sup>1</sup>[a.]<sup>1</sup> No group health insurance policy providing hospital or  
35 medical expense benefits shall be delivered, issued, executed or  
36 renewed in this State<sup>1</sup>[,]<sup>1</sup> or approved for issuance or renewal in this  
37 State by the Commissioner of Banking and Insurance<sup>1</sup>,<sup>1</sup> on or after the  
38 effective date of this act, unless the policy provides benefits to any  
39 named insured or other person covered thereunder for expenses  
40 incurred in conducting: <sup>1</sup>[an annual mammogram examination for  
41 women under 40 years of age with a family history of breast cancer or  
42 other breast cancer risk factors, beginning at that age deemed  
43 medically necessary by the woman's physician;]<sup>1</sup> one baseline  
44 mammogram examination for women who are at least 35 but less than  
45 40 years of age; <sup>1</sup>[and one] <sup>1</sup>a<sup>1</sup> mammogram examination every year

1 for women age 40 and over<sup>1</sup>; and, in the case of a woman who is  
2 under 40 years of age and has a family history of breast cancer or  
3 other breast cancer risk factors, a mammogram examination at such  
4 age and intervals as deemed medically necessary by the woman's health  
5 care provider<sup>1</sup>.

6 <sup>1</sup>[b.]<sup>1</sup> These benefits shall be provided to the same extent as for  
7 any other sickness under the policy.

8 <sup>1</sup>[c.]<sup>1</sup> The provisions of this section shall apply to all policies in  
9 which the insurer has reserved the right to change the premium.

10 (cf: P.L.1999, c.341, s.5)

11  
12 6. Section 6 of P.L.1991, c.279 (C.26:2J-4.4) is amended to read  
13 as follows:

14 6. <sup>1</sup>[a.]<sup>1</sup> Notwithstanding any provision of law to the contrary, a  
15 certificate of authority to establish and operate a health maintenance  
16 organization in this State shall not be issued or continued by the  
17 Commissioner of Health and Senior Services on or after the effective  
18 date of this act unless the health maintenance organization provides  
19 health care services to any enrollee for the conduct of: <sup>1</sup>[an annual  
20 mammogram examination for women under 40 years of age with a  
21 family history of breast cancer or other breast cancer risk factors,  
22 beginning at that age deemed medically necessary by the woman's  
23 physician;]<sup>1</sup> one baseline mammogram examination for women who  
24 are at least 35 but less than 40 years of age; <sup>1</sup>[and one] <sup>1</sup>a<sup>1</sup>  
25 mammogram examination every year for women age 40 and over<sup>1</sup>;  
26 and, in the case of a woman who is under 40 years of age and has a  
27 family history of breast cancer or other breast cancer risk factors, a  
28 mammogram examination at such age and intervals as deemed  
29 medically necessary by the woman's health care provider<sup>1</sup>.

30 <sup>1</sup>[b.]<sup>1</sup> These health care services shall be provided to the same  
31 extent as for any other sickness under the enrollee agreement.

32 <sup>1</sup>[c.]<sup>1</sup> The provisions of this section shall apply to all enrollee  
33 agreements in which the health maintenance organization has reserved  
34 the right to change the schedule of charges.

35 (cf: P.L.1999, c.341, s.6)

36  
37 7. (New section) <sup>1</sup>[a.]<sup>1</sup> Every individual health benefits plan that  
38 is delivered, issued, executed or renewed in this State pursuant to  
39 P.L.1992, c.161 (C.17B:27A-2 et seq.) or approved for issuance or  
40 renewal in this State, on or after the effective date of this act, shall  
41 provide benefits to any woman covered thereunder for expenses  
42 incurred in conducting: <sup>1</sup>[an annual mammogram examination for  
43 women under 40 years of age with a family history of breast cancer or  
44 other breast cancer risk factors, beginning at that age deemed  
45 medically necessary by the woman's physician;]<sup>1</sup> one baseline

1 mammogram examination for women who are at least 35 but less than  
2 40 years of age; <sup>1</sup>[and one] a<sup>1</sup> mammogram examination every year  
3 for women age 40 and over<sup>1</sup>; and, in the case of a woman who is  
4 under 40 years of age and has a family history of breast cancer or  
5 other breast cancer risk factors, a mammogram examination at such  
6 age and intervals as deemed medically necessary by the woman's health  
7 care provider<sup>1</sup>.

8 <sup>1</sup>[b.]<sup>1</sup> The benefits shall be provided to the same extent as for any  
9 other medical condition under the health benefits plan.

10 <sup>1</sup>[c.]<sup>1</sup> The provisions of this section shall apply to all health  
11 benefit plans in which the carrier has reserved the right to change the  
12 premium.

13  
14 8. (New section)<sup>1</sup>[a.]<sup>1</sup> Every small employer health benefits plan  
15 that is delivered, issued, executed or renewed in this State pursuant to  
16 P.L.1992, c.162 (C.17B:27A-17 et seq.) or approved for issuance or  
17 renewal in this State, on or after the effective date of this act, shall  
18 provide benefits to any woman covered thereunder for expenses  
19 incurred in conducting: <sup>1</sup>[an annual mammogram examination for  
20 women under 40 years of age with a family history of breast cancer or  
21 other breast cancer risk factors, beginning at that age deemed  
22 medically necessary by the woman's physician;]<sup>1</sup> one baseline  
23 mammogram examination for women who are at least 35 but less than  
24 40 years of age; <sup>1</sup>[and one] a<sup>1</sup> mammogram examination every year  
25 for women age 40 and over<sup>1</sup>; and, in the case of a woman who is  
26 under 40 years of age and has a family history of breast cancer or  
27 other breast cancer risk factors, a mammogram examination at such  
28 age and intervals as deemed medically necessary by the woman's health  
29 care provider<sup>1</sup>.

30 <sup>1</sup>[b.]<sup>1</sup> The benefits shall be provided to the same extent as for any  
31 other medical condition under the health benefits plan.

32 <sup>1</sup>[c.]<sup>1</sup> The provisions of this section shall apply to all health  
33 benefit plans in which the carrier has reserved the right to change the  
34 premium.

35  
36 9. (New section) <sup>1</sup>[a.]<sup>1</sup> The State Health Benefits Commission  
37 shall provide benefits to each person covered under the State Health  
38 Benefits Program for expenses incurred in conducting: <sup>1</sup>[an annual  
39 mammogram examination for women under 40 years of age with a  
40 family history of breast cancer or other breast cancer risk factors,  
41 beginning at that age deemed medically necessary by the woman's  
42 physician;]<sup>1</sup> one baseline mammogram examination for women who  
43 are at least 35 but less than 40 years of age; <sup>1</sup>[and one] a<sup>1</sup>  
44 mammogram examination every year for women age 40 and over<sup>1</sup>;  
45 and, in the case of a woman who is under 40 years of age and has a

1 family history of breast cancer or other breast cancer risk factors, a  
2 mammogram examination at such age and intervals as deemed  
3 medically necessary by the woman's health care provider<sup>1</sup>.

4 <sup>1</sup>[b.]<sup>1</sup> The benefits shall be provided to the same extent as for any  
5 other medical condition under the contract.

6

7 10. This act shall take effect on the 90th day after enactment and  
8 shall apply to all contracts and policies that are delivered, issued,  
9 executed or renewed or approved for issuance or renewal in this State  
10 on or after the effective date.

11

12

13

14

15 \_\_\_\_\_  
16 Requires insurers and SHBP to cover mammograms for women under  
40 under certain circumstances.



# ASSEMBLY, No. 2261

## STATE OF NEW JERSEY 211th LEGISLATURE

INTRODUCED FEBRUARY 9, 2004

**Sponsored by:**

**Assemblywoman JOAN VOSS**

**District 38 (Bergen)**

**Assemblywoman LINDA R. GREENSTEIN**

**District 14 (Mercer and Middlesex)**

**Assemblywoman LORETTA WEINBERG**

**District 37 (Bergen)**

**Assemblyman JOSEPH J. ROBERTS, JR.**

**District 5 (Camden and Gloucester)**

**Assemblyman NEIL M. COHEN**

**District 20 (Union)**

**Co-Sponsored by:**

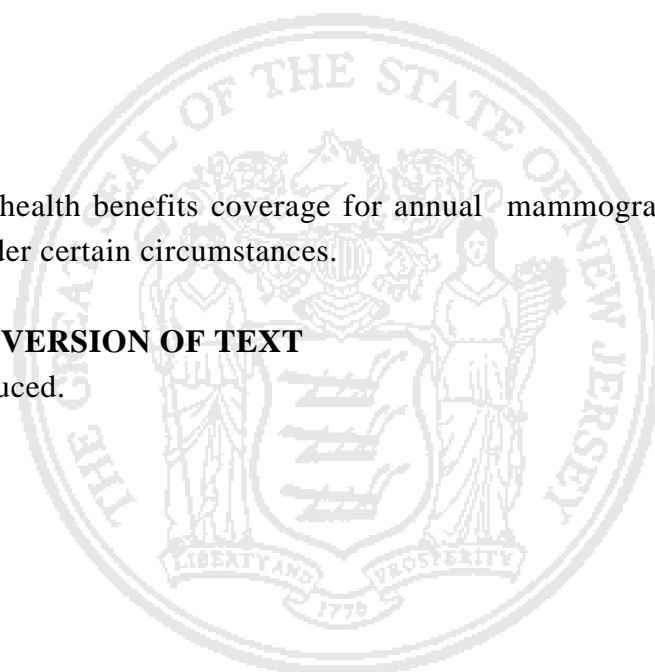
**Assemblymen Steele, Eagler, Van Drew, Gordon, Assemblywoman Previte,  
Assemblymen Connors, Hackett, S.Kean, McKeon and Rumpf**

**SYNOPSIS**

Requires health benefits coverage for annual mammograms for women under 40 under certain circumstances.

**CURRENT VERSION OF TEXT**

As introduced.



**(Sponsorship Updated As Of: 3/12/2004)**

1 AN ACT concerning health benefits coverage for mammograms,  
2 amending P.L.1991, c.279, and supplementing P.L.1992, c.161  
3 (C.17B:27A-2 et seq.), P.L.1992, c.162 (C.17B:27A-17 et seq.)  
4 and P.L.1961, c.49 (C.52:14-17.25 et seq.).  
5

6 **BE IT ENACTED** by the Senate and General Assembly of the State  
7 of New Jersey:  
8

9 1. Section 1 of P.L.1991, c.279 (C.17:48-6g) is amended to read  
10 as follows:

11 1. a. No group or individual hospital service corporation contract  
12 providing hospital or medical expense benefits shall be delivered,  
13 issued, executed or renewed in this State, or approved for issuance or  
14 renewal in this State by the Commissioner of Banking and Insurance  
15 on or after the effective date of this act, unless the contract provides  
16 benefits to any subscriber or other person covered thereunder for  
17 expenses incurred in conducting: an annual mammogram examination  
18 for women under 40 years of age with a family history of breast cancer  
19 or other breast cancer risk factors, beginning at that age deemed  
20 medically necessary by the woman's physician; one baseline  
21 mammogram examination for women who are at least 35 but less than  
22 40 years of age; and one mammogram examination every year for  
23 women age 40 and over.

24 b. These benefits shall be provided to the same extent as for any  
25 other sickness under the contract.

26 c. The provisions of this section shall apply to all hospital service  
27 corporation contracts in which the hospital service corporation has  
28 reserved the right to change the premium.

29 (cf: P.L.1999, c.341, s.1)  
30

31 2. Section 2 of P.L.1991, c.279 (C.17:48A-7f) is amended to read  
32 as follows:

33 2. a. No group or individual medical service corporation contract  
34 providing hospital or medical expense benefits shall be delivered,  
35 issued, executed or renewed in this State, or approved for issuance or  
36 renewal in this State by the Commissioner of Banking and Insurance  
37 on or after the effective date of this act, unless the contract provides  
38 benefits to any subscriber or other person covered thereunder for  
39 expenses incurred in conducting: an annual mammogram examination  
40 for women under 40 years of age with a family history of breast cancer  
41 or other breast cancer risk factors, beginning at that age deemed  
42 medically necessary by the woman's physician; one baseline  
43 mammogram examination for women who are at least 35 but less than

**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 40 years of age; and one mammogram examination every year for  
2 women age 40 and over.

3 b. These benefits shall be provided to the same extent as for any  
4 other sickness under the contract.

5 c. The provisions of this section shall apply to all medical service  
6 corporation contracts in which the medical service corporation has  
7 reserved the right to change the premium.

8 (cf: P.L.1999, c.341, s.1)

9

10 3. Section 3 of P.L.1991, c.279 (C.17:48E-35.4) is amended to  
11 read as follows:

12 3. a. No group or individual health service corporation contract  
13 providing hospital or medical expense benefits shall be delivered,  
14 issued, executed or renewed in this State, or approved for issuance or  
15 renewal in this State by the Commissioner of Banking and Insurance  
16 on or after the effective date of this act, unless the contract provides  
17 benefits to any subscriber or other person covered thereunder for  
18 expenses incurred in conducting: an annual mammogram examination  
19 for women under 40 years of age with a family history of breast cancer  
20 or other breast cancer risk factors, beginning at that age deemed  
21 medically necessary by the woman's physician; one baseline  
22 mammogram examination for women who are at least 35 but less than  
23 40 years of age; and one mammogram examination every year for  
24 women age 40 and over.

25 b. These benefits shall be provided to the same extent as for any  
26 other sickness under the contract.

27 c. The provisions of this section shall apply to all health service  
28 corporation contracts in which the health service corporation has  
29 reserved the right to change the premium.

30 (cf: P.L.1999, c.341, s.3)

31

32 4. Section 4 of P.L.1991, c.279 (C.17B:26-2.1e) is amended to  
33 read as follows:

34 4. a. No individual health insurance policy providing hospital or  
35 medical expense benefits shall be delivered, issued, executed or  
36 renewed in this State, or approved for issuance or renewal in this State  
37 by the Commissioner of Banking and Insurance on or after the  
38 effective date of this act, unless the policy provides benefits to any  
39 named insured or other person covered thereunder for expenses  
40 incurred in conducting: an annual mammogram examination for  
41 women under 40 years of age with a family history of breast cancer or  
42 other breast cancer risk factors, beginning at that age deemed  
43 medically necessary by the woman's physician; one baseline  
44 mammogram examination for women who are at least 35 but less than  
45 40 years of age; and one mammogram examination every year for  
46 women age 40 and over.

1       **b.** These benefits shall be provided to the same extent as for any  
2 other sickness under the policy.

3       **c.** The provisions of this section shall apply to all policies in which  
4 the insurer has reserved the right to change the premium.

5 (cf: P.L.1999, c.341, s.4)

6

7       5. Section 5 of P.L.1991, c.279 (C.17B:27-46.1f) is amended to  
8 read as follows:

9       5. **a.** No group health insurance policy providing hospital or  
10 medical expense benefits shall be delivered, issued, executed or  
11 renewed in this State, or approved for issuance or renewal in this State  
12 by the Commissioner of Banking and Insurance on or after the  
13 effective date of this act, unless the policy provides benefits to any  
14 named insured or other person covered thereunder for expenses  
15 incurred in conducting: an annual mammogram examination for  
16 women under 40 years of age with a family history of breast cancer or  
17 other breast cancer risk factors, beginning at that age deemed  
18 medically necessary by the woman's physician; one baseline  
19 mammogram examination for women who are at least 35 but less than  
20 40 years of age; and one mammogram examination every year for  
21 women age 40 and over.

22       **b.** These benefits shall be provided to the same extent as for any  
23 other sickness under the policy.

24       **c.** The provisions of this section shall apply to all policies in which  
25 the insurer has reserved the right to change the premium.

26 (cf: P.L.1999, c.341, s.5)

27

28       6. Section 6 of P.L.1991, c.279 (C.26:2J-4.4) is amended to read  
29 as follows:

30       6. **a.** Notwithstanding any provision of law to the contrary, a  
31 certificate of authority to establish and operate a health maintenance  
32 organization in this State shall not be issued or continued by the  
33 Commissioner of Health and Senior Services on or after the effective  
34 date of this act unless the health maintenance organization provides  
35 health care services to any enrollee for the conduct of: an annual  
36 mammogram examination for women under 40 years of age with a  
37 family history of breast cancer or other breast cancer risk factors,  
38 beginning at that age deemed medically necessary by the woman's  
39 physician; one baseline mammogram examination for women who are  
40 at least 35 but less than 40 years of age; and one mammogram  
41 examination every year for women age 40 and over.

42       **b.** These health care services shall be provided to the same extent  
43 as for any other sickness under the enrollee agreement.

44       **c.** The provisions of this section shall apply to all enrollee  
45 agreements in which the health maintenance organization has reserved

1 the right to change the schedule of charges.

2 (cf: P.L.1999, c.341, s.6)

3

4 7. (New section) a. Every individual health benefits plan that is  
5 delivered, issued, executed or renewed in this State pursuant to  
6 P.L.1992, c.161 (C.17B:27A-2 et seq.) or approved for issuance or  
7 renewal in this State, on or after the effective date of this act, shall  
8 provide benefits to any woman covered thereunder for expenses  
9 incurred in conducting: an annual mammogram examination for  
10 women under 40 years of age with a family history of breast cancer or  
11 other breast cancer risk factors, beginning at that age deemed  
12 medically necessary by the woman's physician; one baseline  
13 mammogram examination for women who are at least 35 but less than  
14 40 years of age; and one mammogram examination every year for  
15 women age 40 and over.

16 b. The benefits shall be provided to the same extent as for any  
17 other medical condition under the health benefits plan.

18 c. The provisions of this section shall apply to all health benefit  
19 plans in which the carrier has reserved the right to change the  
20 premium.

21

22 8. (New section) a. Every small employer health benefits plan that  
23 is delivered, issued, executed or renewed in this State pursuant to  
24 P.L.1992, c.162 (C.17B:27A-17 et seq.) or approved for issuance or  
25 renewal in this State, on or after the effective date of this act, shall  
26 provide benefits to any woman covered thereunder for expenses  
27 incurred in conducting: an annual mammogram examination for  
28 women under 40 years of age with a family history of breast cancer or  
29 other breast cancer risk factors, beginning at that age deemed  
30 medically necessary by the woman's physician; one baseline  
31 mammogram examination for women who are at least 35 but less than  
32 40 years of age; and one mammogram examination every year for  
33 women age 40 and over.

34 b. The benefits shall be provided to the same extent as for any  
35 other medical condition under the health benefits plan.

36 c. The provisions of this section shall apply to all health benefit  
37 plans in which the carrier has reserved the right to change the  
38 premium.

39

40 9. (New section) a. The State Health Benefits Commission shall  
41 provide benefits to each person covered under the State Health  
42 Benefits Program for expenses incurred in conducting: an annual  
43 mammogram examination for women under 40 years of age with a  
44 family history of breast cancer or other breast cancer risk factors,  
45 beginning at that age deemed medically necessary by the woman's  
46 physician; one baseline mammogram examination for women who are

1 at least 35 but less than 40 years of age; and one mammogram  
2 examination every year for women age 40 and over.

3 b. The benefits shall be provided to the same extent as for any  
4 other medical condition under the contract.

5  
6 10. This act shall take effect on the 90th day after enactment and  
7 shall apply to all contracts and policies that are delivered, issued,  
8 executed or renewed or approved for issuance or renewal in this State  
9 on or after the effective date.

10  
11  
12 STATEMENT

13  
14 This bill requires health insurers, including health, hospital and  
15 medical service corporations; commercial individual and group health  
16 insurers; health maintenance organizations; health benefits plans issued  
17 pursuant to the New Jersey Individual Health Coverage (IHC) and  
18 Small Employer Health Benefits Programs (SEH); and the State Health  
19 Benefits Program (SHBP) to provide health benefits coverage for  
20 expenses incurred in conducting an annual mammogram for women  
21 under 40 years of age with a family history of breast cancer or other  
22 breast cancer risk factors, beginning when the woman's physician  
23 deems the mammogram to be medically necessary.

24 Currently, most insurers are required to provide benefits for  
25 expenses incurred in conducting one baseline mammogram  
26 examination for women who are at least 35 but less than 40 years of  
27 age, and one mammogram examination every year for women age 40  
28 and over. For women with a family history of breast cancer or other  
29 risk factors, however, many physicians recommend that they begin  
30 annual mammograms 10 years prior to the age at which their family  
31 member was first diagnosed; for some women, this means that they  
32 should start having annual mammograms as early as age 25.

33 Statistics indicate that breast cancer is the second leading cause of  
34 cancer-related deaths among women. However, according to the  
35 national Centers for Disease Control and Prevention, if detected early,  
36 the five-year survival rate for localized breast cancer is 97%.

37 Thus, in order to ensure that younger women can avail themselves  
38 of this potentially life-saving test when medically indicated, this bill  
39 extends the annual mammogram requirement to cover women under  
40 the age of 40 who have a family history of breast cancer or other  
41 breast cancer risk factors. The bill also provides that this coverage  
42 shall be available under the IHC, SEH and SHBP, so as to ensure that  
43 women have the benefit of this vital test regardless of the type of  
44 health benefits plan in which they are enrolled.

ASSEMBLY FINANCIAL INSTITUTIONS AND INSURANCE  
COMMITTEE

STATEMENT TO

**ASSEMBLY, No. 2261**

**STATE OF NEW JERSEY**

DATED: FEBRUARY 26, 2004

The Assembly Financial Institutions and Insurance Committee reports favorably Assembly Bill No. 2261.

This bill requires health insurers, including health, hospital and medical service corporations; commercial individual and group health insurers; health maintenance organizations; health benefits plans issued pursuant to the New Jersey Individual Health Coverage (IHC) and Small Employer Health Benefits (SEH) Programs; and the State Health Benefits Program (SHBP) to provide health benefits coverage for expenses incurred in conducting an annual mammogram for women under 40 years of age with a family history of breast cancer or other breast cancer risk factors, beginning when the woman's physician deems the mammogram to be medically necessary.

# ASSEMBLY APPROPRIATIONS COMMITTEE

## STATEMENT TO

### ASSEMBLY, No. 2261

# STATE OF NEW JERSEY

DATED: MARCH 4, 2004

The Assembly Appropriations Committee reports favorably Assembly Bill No. 2261.

Assembly Bill No. 2261 requires health insurers, including health, hospital and medical service corporations; commercial individual and group health insurers; health maintenance organizations; health benefits plans issued pursuant to the New Jersey Individual Health Coverage (IHC) and Small Employer Health Benefits Programs (SEH); and the State Health Benefits Program (SHBP) to provide health benefits coverage for expenses incurred in conducting an annual mammogram for women under 40 years of age with a family history of breast cancer or other breast cancer risk factors, beginning when the woman's physician deems the mammogram to be medically necessary.

Currently, most insurers are required to provide benefits for expenses incurred in conducting one baseline mammogram examination for women who are at least 35 but less than 40 years of age, and one mammogram examination every year for women age 40 and over. For women with a family history of breast cancer or other risk factors, however, many physicians recommend that they begin annual mammograms 10 years prior to the age at which their family member was first diagnosed; for some women, this means that they should start having annual mammograms as early as age 25.

Statistics indicate that breast cancer is the second leading cause of cancer-related deaths among women. However, according to the national Centers for Disease Control and Prevention, if detected early, the five-year survival rate for localized breast cancer is 97%.

Thus, in order to ensure that younger women can avail themselves of this potentially life-saving test when medically indicated, this bill extends the annual mammogram requirement to cover women under the age of 40 who have a family history of breast cancer or other breast cancer risk factors. The bill also provides that this coverage shall be available under the IHC, SEH and SHBP, so as to ensure that women have the benefit of this vital test regardless of the type of health benefits plan in which they are enrolled.

#### FISCAL IMPACT:

The Division of Pensions and Benefits in the Department of the Treasury has estimated the State Health Benefits Program cost of the



bill at \$1.96 million, including \$808,673 in State and \$1,150,031 in local government costs. These costs are based on an estimated 0.2% rise in total health care claims under the bill. Costs to government entities that do not participate in the in the SHBP and to private employer health insurance plans are not included in that estimate.

This cost is for one-half year of coverage, and is based on the assumption of a January 1, 2005 start date due to the bill's delayed effective date. Based on a full year of coverage and an annual health care benefits inflation rate of 10%, the division estimated FY2006 and FY2007 SHBP costs at \$3.9 million and \$4.3 million respectively.

**FISCAL NOTE**  
**ASSEMBLY, No. 2261**  
**STATE OF NEW JERSEY**  
**211th LEGISLATURE**

DATED: MARCH 22, 2004

**SUMMARY**

**Synopsis:** Requires health benefits coverage for annual mammograms for women under 40 under certain circumstances.

**Type of Impact:** Expenditure increase: State General Fund and local government funds.

**Agencies Affected:** Department of the Treasury, Division of Pensions and Benefits; local government entities.

**Executive Estimate**

<b>Fiscal Impact</b>	<b>FY 2005</b>	<b>FY 2006</b>	<b>FY 2007</b>
<b>State Cost</b>	\$808,673	\$1,617,345	\$1,779,080
<b>Local Cost</b>	<u>\$1,150,031</u>	<u>\$2,300,062</u>	<u>\$2,530,068</u>
<b>Total Cost</b>	\$1,958,704	\$3,917,407	\$4,309,148

- \* The Office of Legislative Services (OLS) **concurs** with the Executive estimate.
- \* This bill requires that the cost of coverage for annual mammogram for certain women under 40 years of age be reimbursed by the State Health Benefits Program (SHBP) and other health insurance providers.
- \* Health care claims are estimated to increase by two-tenths of one percent and the Executive estimate assumes a 10 percent annual inflationary rise in these mammogram costs.
- \* OLS notes that the costs estimated above are for the SHBP only. Costs to government entities that do not participate in the SHBP and to private employer health insurance plans are not included in this estimate.

**BILL DESCRIPTION**

Assembly Bill No. 2261 of 2004 requires health insurers, including the State Health Benefits Program (SHBP), to provide health benefits coverage for expenses incurred in conducting an annual mammogram for women under 40 years of age with a family history of breast cancer or other breast cancer risk factors. Such health benefits coverage would begin when the woman's physician deems the mammogram to be medically necessary.

Currently, most insurers are required to provide benefits for expenses incurred in conducting

one baseline mammogram examination for women who are at least 35 but less than 40 years of age, and one mammogram examination every year for women age 40 and over. For women with a family history of breast cancer or other risk factors, however, many physicians recommend that they begin annual mammograms 10 years prior to the age at which their family member was first diagnosed; for some women, this means that they should start having annual mammograms as early as age 25.

## **FISCAL ANALYSIS**

### ***EXECUTIVE BRANCH***

The Division of Pensions and Benefits in the Department of the Treasury estimates the total FY 2005 cost of this bill at \$1.96 million, including \$808,673 in State and \$1,150,031 in local costs. This cost is for one-half year of coverage and assumes a January 1, 2005 start date due to the delay in the effective date of this legislation. The division based these cost increases on an estimated 2 tenths of one percent rise in total health care claims due to the implementation of this legislation.

Based on a full year of coverage and an annual health care benefits inflation rate of 10 percent, the division estimates that FY 2006 and FY 2007 costs would rise to \$3.9 million and \$4.3 million, respectively.

### ***OFFICE OF LEGISLATIVE SERVICES***

The Office of Legislative Services concurs with the Executive estimate.

This bill would not be considered a State mandate under the provision of Article VIII, Section II, paragraph 4 of the New Jersey State Constitution (State Mandate/State Pay) because these costs are imposed on both government and non-government entities in the same or substantially similar circumstances.

Section: *State Government*

Analyst: *James F. Vari*  
*Senior Fiscal Analyst*

Approved: *David J. Rosen*  
*Legislative Budget and Finance Officer*

This fiscal note has been prepared pursuant to P.L.1980, c.67.

# SENATE, No. 862

## STATE OF NEW JERSEY 211th LEGISLATURE

INTRODUCED FEBRUARY 9, 2004

**Sponsored by:**

**Senator RICHARD J. CODEY**

**District 27 (Essex)**

**Senator ELLEN KARCHER**

**District 12 (Mercer and Monmouth)**

**Co-Sponsored by:**

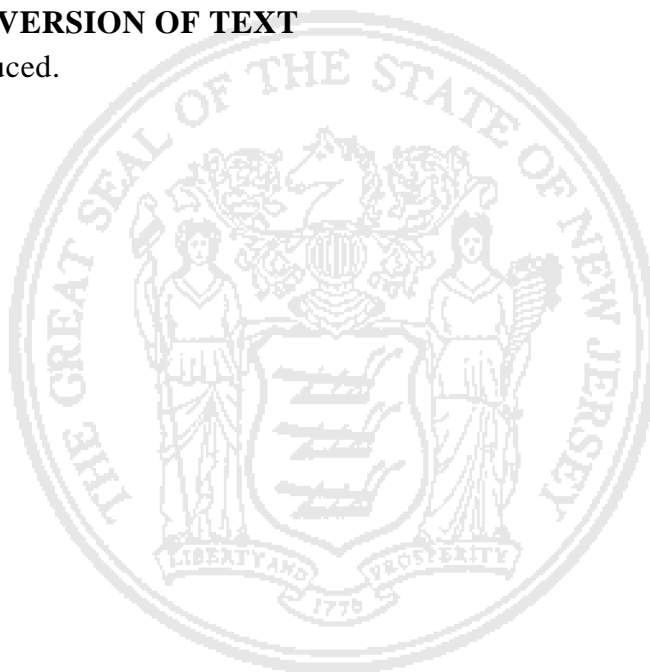
**Senators Vitale, Madden and Coniglio**

**SYNOPSIS**

Requires insurers to cover mammograms for women under 40 under certain circumstances.

**CURRENT VERSION OF TEXT**

As introduced.



**(Sponsorship Updated As Of: 3/9/2004)**

S862 CODEY, KARCHER

2

1 AN ACT concerning coverage for mammography, amending P.L.1991,  
2 c.279 and supplementing P.L.1992, c.161 (C.17B:27A-2 et seq.)  
3 and P.L.1992, c.162 (C.17B:27A-17 et seq.).  
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.1991, c.279 (C.17:48-6g) is amended to read  
9 as follows:

10 1. No group or individual hospital service corporation contract  
11 providing hospital or medical expense benefits shall be delivered,  
12 issued, executed or renewed in this State[,], or approved for issuance  
13 or renewal in this State by the Commissioner of Banking and  
14 Insurance, on or after the effective date of this act, unless the contract  
15 provides benefits to any subscriber or other person covered thereunder  
16 for expenses incurred in conducting one baseline mammogram  
17 examination for women who are at least 35 but less than 40 years of  
18 age[;], and one mammogram examination every year for women age  
19 40 and over; except that in the case of a woman who is under 40 years  
20 of age and has a family history of breast cancer or other breast cancer  
21 risk factors, the contract shall provide benefits for expenses incurred  
22 in conducting a mammogram examination at such age and intervals as  
23 deemed medically necessary by the woman's health care provider.

24 These benefits shall be provided to the same extent as for any other  
25 sickness under the contract.

26 (cf: P.L.1999, c.341, s.1)  
27

28 2. Section 2 of P.L.1991, c.279 (C.17:48A-7f) is amended to read  
29 as follows:

30 2. No group or individual medical service corporation contract  
31 providing hospital or medical expense benefits shall be delivered,  
32 issued, executed or renewed in this State[,], or approved for issuance  
33 or renewal in this State by the Commissioner of Banking and  
34 Insurance, on or after the effective date of this act, unless the contract  
35 provides benefits to any subscriber or other person covered thereunder  
36 for expenses incurred in conducting one baseline mammogram  
37 examination for women who are at least 35 but less than 40 years of  
38 age[;], and one mammogram examination every year for women age  
39 40 and over; except that in the case of a woman who is under 40 years  
40 of age and has a family history of breast cancer or other breast cancer  
41 risk factors, the contract shall provide benefits for expenses incurred  
42 in conducting a mammogram examination at such age and intervals as  
43 deemed medically necessary by the woman's health care provider.

**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       These benefits shall be provided to the same extent as for any other  
2 sickness under the contract.

3 (cf:P.L.1999, c.341, s.2)

4

5       3. Section 3 of P.L.1991, c.279 (C.17:48E-35.4) is amended to  
6 read as follows:

7       3. No group or individual health service corporation contract  
8 providing hospital or medical expense benefits shall be delivered,  
9 issued, executed or renewed in this State[,] or approved for issuance  
10 or renewal in this State by the Commissioner of Banking and  
11 Insurance, on or after the effective date of this act, unless the contract  
12 provides benefits to any subscriber or other person covered thereunder  
13 for expenses incurred in conducting one baseline mammogram  
14 examination for women who are at least 35 but less than 40 years of  
15 age[;], and one mammogram examination every year for women age  
16 40 and over; except that in the case of a woman who is under 40 years  
17 of age and has a family history of breast cancer or other breast cancer  
18 risk factors, the contract shall provide benefits for expenses incurred  
19 in conducting a mammogram examination at such age and intervals as  
20 deemed medically necessary by the woman's health care provider.

21       These benefits shall be provided to the same extent as for any other  
22 sickness under the contract.

23 (cf: P.L.1999, c.341, s.3)

24

25       4. Section 4 of P.L.1991, c.279 (C.17B:26-2.1e) is amended to  
26 read as follows:

27       4. No individual health insurance policy providing hospital or  
28 medical expense benefits shall be delivered, issued, executed or  
29 renewed in this State[,] or approved for issuance or renewal in this  
30 State by the Commissioner of Banking and Insurance, on or after the  
31 effective date of this act, unless the policy provides benefits to any  
32 named insured or other person covered thereunder for expenses  
33 incurred in conducting one baseline mammogram examination for  
34 women who are at least 35 but less than 40 years of age[;], and one  
35 mammogram examination every year for women age 40 and over;  
36 except that in the case of a woman who is under 40 years of age and  
37 has a family history of breast cancer or other breast cancer risk factors,  
38 the policy shall provide benefits for expenses incurred in conducting  
39 a mammogram examination at such age and intervals as deemed  
40 medically necessary by the woman's health care provider.

41       These benefits shall be provided to the same extent as for any other  
42 sickness under the policy.

43 (cf: P.L.1999, c.341, s.4)

44

45       5. Section 5 of P.L.1991, c.279 (C.17B:27-46.1f) is amended to  
46 read as follows:

1       5. No group health insurance policy providing hospital or medical  
2 expense benefits shall be delivered, issued, executed or renewed in this  
3 State[,] or approved for issuance or renewal in this State by the  
4 Commissioner of Banking and Insurance, on or after the effective date  
5 of this act, unless the policy provides benefits to any named insured or  
6 other person covered thereunder for expenses incurred in conducting  
7 one baseline mammogram examination for women who are at least 35  
8 but less than 40 years of age[;], and one mammogram examination  
9 every year for women age 40 and over; except that in the case of a  
10 woman who is under 40 years of age and has a family history of breast  
11 cancer or other breast cancer risk factors, the policy shall provide  
12 benefits for expenses incurred in conducting a mammogram  
13 examination at such age and intervals as deemed medically necessary  
14 by the woman's health care provider.

15       These benefits shall be provided to the same extent as for any other  
16 sickness under the policy.

17 (cf: P.L.1999, c.341, s.5)

18

19       6. Section 6 of P.L.1991, c.279 (C.26:2J-4.4) is amended to read  
20 as follows:

21       6. Notwithstanding any provision of law to the contrary, a  
22 certificate of authority to establish and operate a health maintenance  
23 organization in this State shall not be issued or continued by the  
24 Commissioner of Health and Senior Services on or after the effective  
25 date of this act unless the health maintenance organization provides  
26 health care services to any enrollee for the conduct of one baseline  
27 mammogram examination for women who are at least 35 but less than  
28 40 years of age[;], and one mammogram examination every year for  
29 women age 40 and over; except that in the case of a woman who is  
30 under 40 years of age and has a family history of breast cancer or  
31 other breast cancer risk factors, the contract shall provide health care  
32 services for the conduct of a mammogram examination at such age and  
33 intervals as deemed medically necessary by the woman's health care  
34 provider.

35       These health care services shall be provided to the same extent as  
36 for any other sickness.

37 (cf: P.L.1999, c.341, s.6)

38

39       7. (New section) Every individual health benefits plan that is  
40 delivered, issued, executed or renewed in this State pursuant to  
41 P.L.1992, c.161 (C.17B:27A-2 et seq.) or approved for issuance or  
42 renewal in this State, on or after the effective date of this act, shall  
43 provide benefits to any woman covered thereunder for expenses  
44 incurred in conducting one baseline mammogram examination for  
45 women who are at least 35 but less than 40 years of age, and one  
46 mammogram examination every year for women age 40 and over;

1 except that in the case of a woman who is under 40 years of age and  
2 has a family history of breast cancer or other breast cancer risk factors,  
3 the health benefits plan shall provide benefits for expenses incurred in  
4 conducting a mammogram examination at such age and intervals as  
5 deemed medically necessary by the woman's health care provider.

6 The benefits shall be provided to the same extent as for any other  
7 medical condition under the health benefits plan.

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

10  
11 8. (New section) Every small employer health benefits plan that is  
12 delivered, issued, executed or renewed in this State pursuant to  
13 P.L.1992, c.162 (C.17B:27A-17 et seq.) or approved for issuance or  
14 renewal in this State, on or after the effective date of this act, shall  
15 provide benefits to any woman covered thereunder for expenses  
16 incurred in conducting one baseline mammogram examination for  
17 women who are at least 35 but less than 40 years of age, and one  
18 mammogram examination every year for women age 40 and over;  
19 except that in the case of a woman who is under 40 years of age and  
20 has a family history of breast cancer or other breast cancer risk factors,  
21 the health benefits plan shall provide benefits for expenses incurred in  
22 conducting a mammogram examination at such age and intervals as  
23 deemed medically necessary by the woman's health care provider.

24 The benefits shall be provided to the same extent as for any other  
25 medical condition under the health benefits plan.

26 The provisions of this section shall apply to all health benefit plans  
27 in which the carrier has reserved the right to change the premium.

28  
29 9. This act shall take effect on the 90th day after enactment and  
30 shall apply to all contracts and policies that are delivered, issued,  
31 executed or renewed or approved for issuance or renewal in this State  
32 on or after the effective date.

33  
34  
35 STATEMENT

36  
37 This bill requires that health, hospital and medical service  
38 corporations, individual, small employer and larger group insurers and  
39 health maintenance organizations provide benefits for expenses  
40 incurred in conducting a mammogram in the case of a woman who is  
41 under 40 years of age and has a family history of breast cancer or  
42 other breast cancer risk factors, when the woman's health care  
43 provider deems the mammogram to be medically necessary.

44 Under current law, P.L.1991, c.279, health, hospital and medical  
45 service corporations, individual and group insurers and health  
46 maintenance organizations are required to provide benefits for



1 expenses incurred in conducting one baseline mammogram  
2 examination for women who are at least 35 but less than 40 years of  
3 age; and one mammogram examination every year for women age 40  
4 and over. For women with a family history of breast cancer or other  
5 risk factors, however, many physicians recommend that they begin  
6 annual mammograms 10 years prior to the age at which their family  
7 member was first diagnosed; for some women, this means that they  
8 should start having annual mammograms as early as age 25.

9 In order to ensure that younger women can avail themselves of this  
10 potentially life-saving test when medically indicated, this bill extends  
11 the insurance mammogram requirement to cover women under the age  
12 of 40 who have a family history of breast cancer or other breast cancer  
13 risk factors. The bill also extends the mammogram requirement to the  
14 individual and small employer health programs (which currently are  
15 not subject to the requirement), so as to ensure that women have the  
16 benefit of this vital test regardless of the type of health insurance plan  
17 in which they are enrolled.

# SENATE, No. 1409

## STATE OF NEW JERSEY 211th LEGISLATURE

INTRODUCED MARCH 29, 2004

**Sponsored by:**

**Senator PAUL SARLO**

**District 36 (Bergen, Essex and Passaic)**

**Senator BARBARA BUONO**

**District 18 (Middlesex)**

**Co-Sponsored by:**

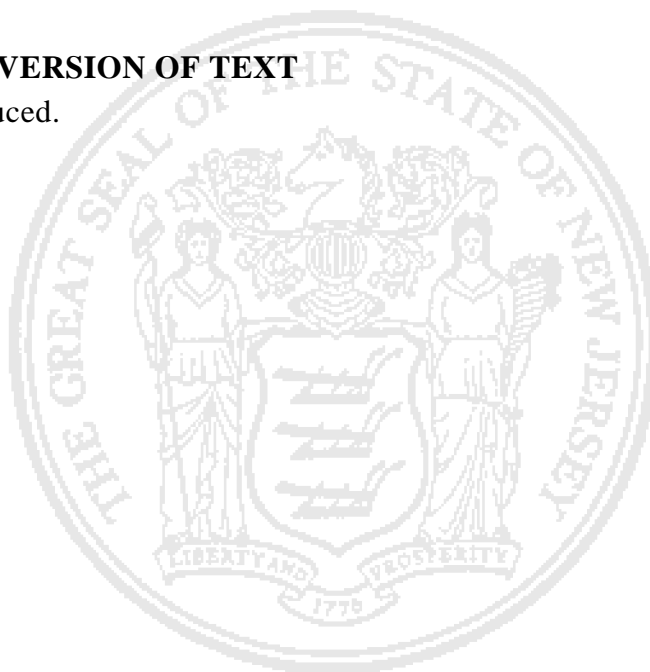
**Senator Coniglio**

**SYNOPSIS**

Requires insurers to cover mammograms for women under 40 under certain circumstances and requires physicians to provide certain treatment information to patients diagnosed with breast cancer.

**CURRENT VERSION OF TEXT**

As introduced.



**(Sponsorship Updated As Of: 3/30/2004)**

1 AN ACT concerning coverage for mammography and treatment of  
2 breast cancer, amending P.L.1991, c.279 and supplementing  
3 P.L.1992, c.161 (C.17B:27A-2 et seq.), P.L.1992, c.162  
4 (C.17B:27A-17 et seq.) and Titles 26 and 45 of the Revised  
5 Statutes.

6

7 **BE IT ENACTED** by the Senate and General Assembly of the State  
8 of New Jersey:

9

10 1. Section 1 of P.L.1991, c.279 (C.17:48-6g) is amended to read  
11 as follows:

12 1. No group or individual hospital service corporation contract  
13 providing hospital or medical expense benefits shall be delivered,  
14 issued, executed or renewed in this State[,] or approved for issuance  
15 or renewal in this State by the Commissioner of Banking and  
16 Insurance, on or after the effective date of this act, unless the contract  
17 provides benefits to any subscriber or other person covered thereunder  
18 for expenses incurred in conducting one baseline mammogram  
19 examination for women who are at least 35 but less than 40 years of  
20 age; [and one] a mammogram examination every year for women age  
21 40 and over; and, in the case of a woman who is under 40 years of age  
22 and has a family history of breast cancer or other breast cancer risk  
23 factors, a mammogram examination at such age and intervals as  
24 deemed medically necessary by the woman's health care provider.

25 These benefits shall be provided to the same extent as for any other  
26 sickness under the contract.

27 The provisions of this section shall apply to all contracts in which  
28 the hospital service corporation has reserved the right to change the  
29 premium.

30 (cf: P.L.1999, c.341, s.1)

31

32 2. Section 2 of P.L.1991, c.279 (C.17:48A-7f) is amended to read  
33 as follows:

34 2. No group or individual medical service corporation contract  
35 providing hospital or medical expense benefits shall be delivered,  
36 issued, executed or renewed in this State[,] or approved for issuance  
37 or renewal in this State by the Commissioner of Banking and  
38 Insurance, on or after the effective date of this act, unless the contract  
39 provides benefits to any subscriber or other person covered thereunder  
40 for expenses incurred in conducting one baseline mammogram  
41 examination for women who are at least 35 but less than 40 years of  
42 age; [and one] a mammogram examination every year for women age  
43 40 and over; and, in the case of a woman who is under 40 years of age

**EXPLANATION** - Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and intended to be omitted in the law.

Matter underlined thus is new matter.

1 and has a family history of breast cancer or other breast cancer risk  
2 factors, a mammogram examination at such age and intervals as  
3 deemed medically necessary by the woman's health care provider.

4 These benefits shall be provided to the same extent as for any other  
5 sickness under the contract.

6 The provisions of this section shall apply to all contracts in which  
7 the medical service corporation has reserved the right to change the  
8 premium.

9 (cf: P.L.1999, c.341, s.2)

10  
11 3. Section 3 of P.L.1991, c.279 (C.17:48E-35.4) is amended to  
12 read as follows:

13 3. No group or individual health service corporation contract  
14 providing hospital or medical expense benefits shall be delivered,  
15 issued, executed or renewed in this State[,] or approved for issuance  
16 or renewal in this State by the Commissioner of Banking and  
17 Insurance, on or after the effective date of this act, unless the contract  
18 provides benefits to any subscriber or other person covered thereunder  
19 for expenses incurred in conducting one baseline mammogram  
20 examination for women who are at least 35 but less than 40 years of  
21 age; [and one] a mammogram examination every year for women age  
22 40 and over; and, in the case of a woman who is under 40 years of age  
23 and has a family history of breast cancer or other breast cancer risk  
24 factors, a mammogram examination at such age and intervals as  
25 deemed medically necessary by the woman's health care provider.

26 These benefits shall be provided to the same extent as for any other  
27 sickness under the contract.

28 The provisions of this section shall apply to all contracts in which  
29 the health service corporation has reserved the right to change the  
30 premium.

31 (cf: P.L.1999, c.341, s.3)

32  
33 4. Section 4 of P.L.1991, c.279 (C.17B:26-2.1e) is amended to  
34 read as follows:

35 4. No individual health insurance policy providing hospital or  
36 medical expense benefits shall be delivered, issued, executed or  
37 renewed in this State[,] or approved for issuance or renewal in this  
38 State by the Commissioner of Banking and Insurance, on or after the  
39 effective date of this act, unless the policy provides benefits to any  
40 named insured or other person covered thereunder for expenses  
41 incurred in conducting one baseline mammogram examination for  
42 women who are at least 35 but less than 40 years of age; [and one] a  
43 mammogram examination every year for women age 40 and over; and,  
44 in the case of a woman who is under 40 years of age and has a family  
45 history of breast cancer or other breast cancer risk factors, a  
46 mammogram examination at such age and intervals as deemed

1 medically necessary by the woman's health care provider.

2 These benefits shall be provided to the same extent as for any other  
3 sickness under the policy.

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

6 (cf: P.L.1999, c.341, s.4)

7

8 5. Section 5 of P.L.1991, c.279 (C.17B:27-46.1f) is amended to  
9 read as follows:

10 5. No group health insurance policy providing hospital or medical  
11 expense benefits shall be delivered, issued, executed or renewed in this  
12 State[, ] or approved for issuance or renewal in this State by the  
13 Commissioner of Banking and Insurance, on or after the effective date  
14 of this act, unless the policy provides benefits to any named insured or  
15 other person covered thereunder for expenses incurred in conducting  
16 one baseline mammogram examination for women who are at least 35  
17 but less than 40 years of age; [and one] a mammogram examination  
18 every year for women age 40 and over; and, in the case of a woman  
19 who is under 40 years of age and has a family history of breast cancer  
20 or other breast cancer risk factors, a mammogram examination at such  
21 age and intervals as deemed medically necessary by the woman's health  
22 care provider.

23 These benefits shall be provided to the same extent as for any other  
24 sickness under the policy.

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

27 (cf: P.L.1999, c.341, s.5)

28

29 6. Section 6 of P.L.1991, c.279 (C.26:2J-4.4) is amended to read  
30 as follows:

31 6. Notwithstanding any provision of law to the contrary, a  
32 certificate of authority to establish and operate a health maintenance  
33 organization in this State shall not be issued or continued by the  
34 Commissioner of Health and Senior Services on or after the effective  
35 date of this act unless the health maintenance organization provides  
36 health care services to any enrollee for the conduct of one baseline  
37 mammogram examination for women who are at least 35 but less than  
38 40 years of age; [and one] a mammogram examination every year for  
39 women age 40 and over; and, in the case of a woman who is under 40  
40 years of age and has a family history of breast cancer or other breast  
41 cancer risk factors, a mammogram examination at such age and  
42 intervals as deemed medically necessary by the woman's health care  
43 provider.

44 These health care services shall be provided to the same extent as  
45 for any other sickness.

46 The provisions of this section shall apply to all contracts in which

1 the health maintenance organization has reserved the right to change  
2 the schedule of charges.

3 (cf: P.L.1999, c.341, s.6)

4

5 7. (New section) Every individual health benefits plan that is  
6 delivered, issued, executed or renewed in this State pursuant to  
7 P.L.1992, c.161 (C.17B:27A-2 et seq.) or approved for issuance or  
8 renewal in this State, on or after the effective date of this act, shall  
9 provide benefits to any woman covered thereunder for expenses  
10 incurred in conducting one baseline mammogram examination for  
11 women who are at least 35 but less than 40 years of age; a  
12 mammogram examination every year for women age 40 and over; and,  
13 in the case of a woman who is under 40 years of age and has a family  
14 history of breast cancer or other breast cancer risk factors, a  
15 mammogram examination at such age and intervals as deemed  
16 medically necessary by the woman's health care provider.

17 The benefits shall be provided to the same extent as for any other  
18 medical condition under the health benefits plan.

19 The provisions of this section shall apply to all health benefit plans  
20 in which the carrier has reserved the right to change the premium.

21

22 8. (New section) Every small employer health benefits plan that is  
23 delivered, issued, executed or renewed in this State pursuant to  
24 P.L.1992, c.162 (C.17B:27A-17 et seq.) or approved for issuance or  
25 renewal in this State, on or after the effective date of this act, shall  
26 provide benefits to any woman covered thereunder for expenses  
27 incurred in conducting one baseline mammogram examination for  
28 women who are at least 35 but less than 40 years of age; a  
29 mammogram examination every year for women age 40 and over; and,  
30 in the case of a woman who is under 40 years of age and has a family  
31 history of breast cancer or other breast cancer risk factors, a  
32 mammogram examination at such age and intervals as deemed  
33 medically necessary by the woman's health care provider.

34 The benefits shall be provided to the same extent as for any other  
35 medical condition under the health benefits plan.

36 The provisions of this section shall apply to all health benefit plans  
37 in which the carrier has reserved the right to change the premium.

38

39 9. (New section) a. The Commissioner of Health and Senior  
40 Services, in consultation with The Cancer Institute of New Jersey,  
41 shall prepare and make available to physicians in the State an  
42 informational booklet in English and Spanish, which is written in  
43 language that is easily understandable by the patient, that includes, but  
44 is not limited to, breast cancer treatment options, including surgical,  
45 radiological or chemotherapeutic treatments, and the advantages,  
46 disadvantages, risks and procedures associated with each type of

1 treatment.

2 b. The commissioner shall update the informational booklet as  
3 necessary to reflect advances in research and treatment.

4

5 10. (New section) a. A physician licensed in this State who is  
6 treating an individual for breast cancer shall provide that individual  
7 with a copy of the informational booklet concerning breast cancer  
8 treatment options prepared by the Commissioner of Health and Senior  
9 Services pursuant to section 9 of P.L. , c. (C. ) (pending before  
10 the Legislature as this bill).

11 b. The physician shall note on the patient's medical record the date  
12 upon which the pamphlet is provided to the patient.

13

14 11. This act shall take effect on the 90th day after enactment and  
15 shall apply to all contracts and policies that are delivered, issued,  
16 executed or renewed or approved for issuance or renewal in this State  
17 on or after the effective date.

18

19

20

#### STATEMENT

21

22 This bill requires that health, hospital and medical service  
23 corporations, individual, small employer and larger group insurers and  
24 health maintenance organizations provide benefits for expenses  
25 incurred in conducting a mammogram in the case of a woman who is  
26 under 40 years of age and has a family history of breast cancer or  
27 other breast cancer risk factors, when the woman's health care  
28 provider deems the mammogram to be medically necessary. The bill  
29 also extends the mammogram requirement to the individual and small  
30 employer health programs (which currently are not subject to the  
31 requirement), so as to ensure that women have the benefit of this vital  
32 test regardless of the type of health insurance plan in which they are  
33 enrolled.

34 Under current law, P.L.1991, c.279, health, hospital and medical  
35 service corporations, individual and group insurers and health  
36 maintenance organizations are required to provide benefits for  
37 expenses incurred in conducting one baseline mammogram  
38 examination for women who are at least 35 but less than 40 years of  
39 age and one mammogram examination every year for women age 40  
40 and over. For women with a family history of breast cancer or other  
41 risk factors, however, many physicians recommend that they begin  
42 annual mammograms 10 years prior to the age at which their family  
43 member was first diagnosed; for some women, this means that they  
44 should start having annual mammograms as early as age 25.

45 The bill also requires the Commissioner of Health and Senior  
46 Services, in consultation with The Cancer Institute of New Jersey, to

1 prepare and make available to physicians in the State an informational  
2 booklet in English and Spanish, that includes, but is not limited to,  
3 breast cancer treatment options, including surgical, radiological or  
4 chemotherapeutic treatments, and the advantages, disadvantages, risks  
5 and procedures associated with each type of treatment. The  
6 commissioner is directed to update the informational booklet as  
7 necessary to reflect advances in research and treatment.

8 The bill also provides that a physician who is treating an individual  
9 for breast cancer shall provide that individual with a copy of the  
10 informational booklet concerning breast cancer treatment options,  
11 prepared by the commissioner, and shall note on the patient's medical  
12 record the date upon which the pamphlet is provided to the patient.



**SENATE, No. 1530**

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**STATE OF NEW JERSEY**  
**211th LEGISLATURE**

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INTRODUCED APRIL 29, 2004

**Sponsored by:**

**Senator FRED MADDEN**

**District 4 (Camden and Gloucester)**

**Senator STEPHEN M. SWEENEY**

**District 3 (Salem, Cumberland and Gloucester)**

**SYNOPSIS**

Requires health benefits coverage for annual mammograms for women under 40 under certain circumstances.

**CURRENT VERSION OF TEXT**

As introduced.



**(Sponsorship Updated As Of: 6/15/2004)**

1 AN ACT concerning health benefits coverage for mammograms,  
2 amending P.L.1991, c.279, and supplementing P.L.1992, c.161  
3 (C.17B:27A-2 et seq.), P.L.1992, c.162 (C.17B:27A-17 et seq.)  
4 and P.L.1961, c.49 (C.52:14-17.25 et seq.).  
5

6 **BE IT ENACTED** by the Senate and General Assembly of the State  
7 of New Jersey:  
8

9 1. Section 1 of P.L.1991, c.279 (C.17:48-6g) is amended to read  
10 as follows:

11 1. a. No group or individual hospital service corporation contract  
12 providing hospital or medical expense benefits shall be delivered,  
13 issued, executed or renewed in this State, or approved for issuance or  
14 renewal in this State by the Commissioner of Banking and Insurance  
15 on or after the effective date of this act, unless the contract provides  
16 benefits to any subscriber or other person covered thereunder for  
17 expenses incurred in conducting: an annual mammogram examination  
18 for women under 40 years of age with a family history of breast cancer  
19 or other breast cancer risk factors, beginning at that age deemed  
20 medically necessary by the woman's physician; one baseline  
21 mammogram examination for women who are at least 35 but less than  
22 40 years of age; and one mammogram examination every year for  
23 women age 40 and over.

24 b. These benefits shall be provided to the same extent as for any  
25 other sickness under the contract.

26 c. The provisions of this section shall apply to all hospital service  
27 corporation contracts in which the hospital service corporation has  
28 reserved the right to change the premium.

29 (cf: P.L.1999, c.341, s.1)  
30

31 2. Section 2 of P.L.1991, c.279 (C.17:48A-7f) is amended to read  
32 as follows:

33 2. a. No group or individual medical service corporation contract  
34 providing hospital or medical expense benefits shall be delivered,  
35 issued, executed or renewed in this State, or approved for issuance or  
36 renewal in this State by the Commissioner of Banking and Insurance  
37 on or after the effective date of this act, unless the contract provides  
38 benefits to any subscriber or other person covered thereunder for  
39 expenses incurred in conducting: an annual mammogram examination  
40 for women under 40 years of age with a family history of breast cancer  
41 or other breast cancer risk factors, beginning at that age deemed  
42 medically necessary by the woman's physician; one baseline  
43 mammogram examination for women who are at least 35 but less than

**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 40 years of age; and one mammogram examination every year for  
2 women age 40 and over.

3 b. These benefits shall be provided to the same extent as for any  
4 other sickness under the contract.

5 c. The provisions of this section shall apply to all medical service  
6 corporation contracts in which the medical service corporation has  
7 reserved the right to change the premium.

8 (cf: P.L.1999, c.341, s.1)

9

10 3. Section 3 of P.L.1991, c.279 (C.17:48E-35.4) is amended to  
11 read as follows:

12 3. a. No group or individual health service corporation contract  
13 providing hospital or medical expense benefits shall be delivered,  
14 issued, executed or renewed in this State, or approved for issuance or  
15 renewal in this State by the Commissioner of Banking and Insurance  
16 on or after the effective date of this act, unless the contract provides  
17 benefits to any subscriber or other person covered thereunder for  
18 expenses incurred in conducting: an annual mammogram examination  
19 for women under 40 years of age with a family history of breast cancer  
20 or other breast cancer risk factors, beginning at that age deemed  
21 medically necessary by the woman's physician; one baseline  
22 mammogram examination for women who are at least 35 but less than  
23 40 years of age; and one mammogram examination every year for  
24 women age 40 and over.

25 b. These benefits shall be provided to the same extent as for any  
26 other sickness under the contract.

27 c. The provisions of this section shall apply to all health service  
28 corporation contracts in which the health service corporation has  
29 reserved the right to change the premium.

30 (cf: P.L.1999, c.341, s.3)

31

32 4. Section 4 of P.L.1991, c.279 (C.17B:26-2.1e) is amended to  
33 read as follows:

34 4. a. No individual health insurance policy providing hospital or  
35 medical expense benefits shall be delivered, issued, executed or  
36 renewed in this State, or approved for issuance or renewal in this State  
37 by the Commissioner of Banking and Insurance on or after the  
38 effective date of this act, unless the policy provides benefits to any  
39 named insured or other person covered thereunder for expenses  
40 incurred in conducting: an annual mammogram examination for  
41 women under 40 years of age with a family history of breast cancer or  
42 other breast cancer risk factors, beginning at that age deemed  
43 medically necessary by the woman's physician; one baseline  
44 mammogram examination for women who are at least 35 but less than  
45 40 years of age; and one mammogram examination every year for  
46 women age 40 and over.

1     b. These benefits shall be provided to the same extent as for any  
2 other sickness under the policy.

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

5 (cf: P.L.1999, c.341, s.4)

6  
7     5. Section 5 of P.L.1991, c.279 (C.17B:27-46.1f) is amended to  
8 read as follows:

9     5. a. No group health insurance policy providing hospital or  
10 medical expense benefits shall be delivered, issued, executed or  
11 renewed in this State, or approved for issuance or renewal in this State  
12 by the Commissioner of Banking and Insurance on or after the  
13 effective date of this act, unless the policy provides benefits to any  
14 named insured or other person covered thereunder for expenses  
15 incurred in conducting: an annual mammogram examination for  
16 women under 40 years of age with a family history of breast cancer or  
17 other breast cancer risk factors, beginning at that age deemed  
18 medically necessary by the woman's physician; one baseline  
19 mammogram examination for women who are at least 35 but less than  
20 40 years of age; and one mammogram examination every year for  
21 women age 40 and over.

22     b. These benefits shall be provided to the same extent as for any  
23 other sickness under the policy.

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

26 (cf: P.L.1999, c.341, s.5)

27  
28     6. Section 6 of P.L.1991, c.279 (C.26:2J-4.4) is amended to read  
29 as follows:

30     6. a. Notwithstanding any provision of law to the contrary, a  
31 certificate of authority to establish and operate a health maintenance  
32 organization in this State shall not be issued or continued by the  
33 Commissioner of Health and Senior Services on or after the effective  
34 date of this act unless the health maintenance organization provides  
35 health care services to any enrollee for the conduct of: an annual  
36 mammogram examination for women under 40 years of age with a  
37 family history of breast cancer or other breast cancer risk factors,  
38 beginning at that age deemed medically necessary by the woman's  
39 physician; one baseline mammogram examination for women who are  
40 at least 35 but less than 40 years of age; and one mammogram  
41 examination every year for women age 40 and over.

42     b. These health care services shall be provided to the same extent  
43 as for any other sickness under the enrollee agreement.

44     c. The provisions of this section shall apply to all enrollee  
45 agreements in which the health maintenance organization has reserved

1 the right to change the schedule of charges.

2 (cf: P.L.1999, c.341, s.6)

3

4 7. (New section) a. Every individual health benefits plan that is  
5 delivered, issued, executed or renewed in this State pursuant to  
6 P.L.1992, c.161 (C.17B:27A-2 et seq.) or approved for issuance or  
7 renewal in this State, on or after the effective date of this act, shall  
8 provide benefits to any woman covered thereunder for expenses  
9 incurred in conducting: an annual mammogram examination for  
10 women under 40 years of age with a family history of breast cancer or  
11 other breast cancer risk factors, beginning at that age deemed  
12 medically necessary by the woman's physician; one baseline  
13 mammogram examination for women who are at least 35 but less than  
14 40 years of age; and one mammogram examination every year for  
15 women age 40 and over.

16 b. The benefits shall be provided to the same extent as for any  
17 other medical condition under the health benefits plan.

18 c. The provisions of this section shall apply to all health benefit  
19 plans in which the carrier has reserved the right to change the  
20 premium.

21

22 8. (New section) a. Every small employer health benefits plan that  
23 is delivered, issued, executed or renewed in this State pursuant to  
24 P.L.1992, c.162 (C.17B:27A-17 et seq.) or approved for issuance or  
25 renewal in this State, on or after the effective date of this act, shall  
26 provide benefits to any woman covered thereunder for expenses  
27 incurred in conducting: an annual mammogram examination for  
28 women under 40 years of age with a family history of breast cancer or  
29 other breast cancer risk factors, beginning at that age deemed  
30 medically necessary by the woman's physician; one baseline  
31 mammogram examination for women who are at least 35 but less than  
32 40 years of age; and one mammogram examination every year for  
33 women age 40 and over.

34 b. The benefits shall be provided to the same extent as for any  
35 other medical condition under the health benefits plan.

36 c. The provisions of this section shall apply to all health benefit  
37 plans in which the carrier has reserved the right to change the  
38 premium.

39

40 9. (New section) a. The State Health Benefits Commission shall  
41 provide benefits to each person covered under the State Health  
42 Benefits Program for expenses incurred in conducting: an annual  
43 mammogram examination for women under 40 years of age with a  
44 family history of breast cancer or other breast cancer risk factors,  
45 beginning at that age deemed medically necessary by the woman's  
46 physician; one baseline mammogram examination for women who are

1 at least 35 but less than 40 years of age; and one mammogram  
2 examination every year for women age 40 and over.

3 b. The benefits shall be provided to the same extent as for any  
4 other medical condition under the contract.

5  
6 10. This act shall take effect on the 90th day after enactment and  
7 shall apply to all contracts and policies that are delivered, issued,  
8 executed or renewed or approved for issuance or renewal in this State  
9 on or after the effective date.

10  
11  
12 STATEMENT

13  
14 This bill requires health insurers, including health, hospital and  
15 medical service corporations; commercial individual and group health  
16 insurers; health maintenance organizations; health benefits plans issued  
17 pursuant to the New Jersey Individual Health Coverage (IHC) and  
18 Small Employer Health Benefits Programs (SEH); and the State Health  
19 Benefits Program (SHBP) to provide health benefits coverage for  
20 expenses incurred in conducting an annual mammogram for women  
21 under 40 years of age with a family history of breast cancer or other  
22 breast cancer risk factors, beginning when the woman's physician  
23 deems the mammogram to be medically necessary.

24 Currently, most insurers are required to provide benefits for  
25 expenses incurred in conducting one baseline mammogram  
26 examination for women who are at least 35 but less than 40 years of  
27 age, and one mammogram examination every year for women age 40  
28 and over. For women with a family history of breast cancer or other  
29 risk factors, however, many physicians recommend that they begin  
30 annual mammograms 10 years prior to the age at which their family  
31 member was first diagnosed; for some women, this means that they  
32 should start having annual mammograms as early as age 25.

33 Statistics indicate that breast cancer is the second leading cause of  
34 cancer-related deaths among women. However, according to the  
35 national Centers for Disease Control and Prevention, if detected early,  
36 the five-year survival rate for localized breast cancer is 97%.

37 Thus, in order to ensure that younger women can avail themselves  
38 of this potentially life-saving test when medically indicated, this bill  
39 extends the annual mammogram requirement to cover women under  
40 the age of 40 who have a family history of breast cancer or other  
41 breast cancer risk factors. The bill also provides that this coverage  
42 shall be available under the IHC, SEH and SHBP, so as to ensure that  
43 women have the benefit of this vital test regardless of the type of  
44 health benefits plan in which they are enrolled.

SENATE HEALTH, HUMAN SERVICES AND SENIOR  
CITIZENS COMMITTEE

STATEMENT TO

SENATE COMMITTEE SUBSTITUTE FOR  
**SENATE, Nos. 862, 1409 and 1530**

**STATE OF NEW JERSEY**

DATED: JUNE 7, 2004

The Senate Health, Human Services and Senior Citizens Committee reports favorably a Senate Committee Substitute for Senate Bill Nos. 862, 1409 and 1530.

This substitute requires health insurers, including health, hospital and medical service corporations, commercial individual, small employer and group health insurers, health maintenance organizations and the State Health Benefits Program (SHBP), to provide health benefits coverage for expenses incurred in conducting a mammogram for women under 40 years of age who have a family history of breast cancer or other breast cancer risk factors, at such age and intervals as deemed medically necessary by the woman's health care provider.

Currently, most insurers are required under law to provide benefits for expenses incurred in conducting one baseline mammogram examination for women who are at least 35 but less than 40 years of age, and one mammogram examination every year for women age 40 and over. For women with a family history of breast cancer or other risk factors, however, many physicians recommend that they begin annual mammograms 10 years prior to the age at which their family member was first diagnosed; for some women, this means that they should start having annual mammograms as early as age 25.

Statistics indicate that breast cancer is the second leading cause of cancer-related deaths among women. However, according to the national Centers for Disease Control and Prevention, if detected early, the five-year survival rate for localized breast cancer is 97%.

Thus, in order to ensure that younger women can avail themselves of this potentially life-saving test when medically indicated, this substitute extends the mammogram requirement to cover women under the age of 40 who have a family history of breast cancer or other breast cancer risk factors. The substitute also provides that the basic mammogram coverage for women over 40 years of age shall be available under the New Jersey Individual Health Coverage Program, Small Employer Health Benefits Program and the SHBP, so as to ensure that women have the benefit of this vital test regardless of the

type of health benefits plan in which they are enrolled.

This substitute is identical to Assembly Bill No. 2261 Sca (Voss/Greenstein/Weinberg/Roberts/Cohen), which the committee also reported favorably on this date.



## Office of the Governor

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### News Releases

Contact: Micah Rasmussen  
609-777-2600

RELEASE: July 07, 2004

[Previous Screen](#)

### **McGreevey Signs Law Protection New Jersey's Women**

#### *Law Marks Successful Fight to Mandate Insurance Coverage of Mammograms for Young Women*

(FREEHOLD)— Governor James E. McGreevey today joined breast cancer survivors, advocates and Legislative sponsors at Centra State Medical Center, to sign A2261/S862 into law. In his annual State of the State address in January, Governor James E. McGreevey first proposed legislation to require insurance companies to cover mammograms for women under 40 with a family history of breast cancer. Since then, the Governor, female Cabinet members, and Legislators have been working with women's health advocates from across the state to fight to get A2261/S862 passed.

“Today is a great day for the women of New Jersey,” said Governor McGreevey. “Cancer, particularly breast cancer is among the most pressing health issues in this state, and access to mammograms is the most important weapon we have in this fight. That is why we have fought, alongside the women in this room, to make sure insurance companies cover mammograms for any woman who needs one – regardless of age. And today we celebrate the results of that fight – a fight that began months ago, when women came to me and asked me to make this the law. Today we score a victory that will help women for years to come.”

The Governor cited statistics like the American Cancer Society's estimation that 7,400 new cases of breast cancer will be diagnosed in New Jersey this year, and that New Jersey actually has the highest mortality rate in the nation for breast cancer.

Previously, New Jersey law only required insurance companies to cover an annual mammogram for women age 40 and older. For women with a family history of breast cancer, however, many doctors recommend that they begin annual mammograms ten years prior to the age at which their family member was first diagnosed. For some women, this means that they must start having annual mammograms as early as age 25.

The bill signed into law today, A2261/S862, requires health insurance companies cover an

annual mammogram for women under 40 when recommended by her doctor.

“For so many of us, the statistics about women’s breast disease are more than anonymous numbers,” said Senate Sponsor Senator Ellen Karcher. “They represent our mothers, sisters, aunts, and daughters who are facing breast disease and cancer at alarmingly younger and younger ages. No woman should have to fight with her insurance company to cover this potentially life-saving test. Not me, not you, not any young woman in New Jersey. This law makes sure that no woman in this state will ever have to face that fight again.”

"Insurance companies should not be allowed to deny women early detection of breast cancer," said Assemblywoman Joan M.Voss (D-Bergen). "In many cases women are genetically pre-disposed, and this law is crucially important because it will save lives."

"When women are at-risk for breast cancer, they should have access to detection alternatives regardless of age," said Assemblywoman Linda R.Greenstein (D-Middlesex). "Far too many lives have been lost to late detection."

"Although breast cancer is more likely in women age 40 and older, thousands of younger women are being diagnosed with the illness each year," said Assemblywoman Loretta Weinberg (D-Bergen). "Fortunately, breast cancer can be cured at any age if detected early enough; this law will ensure that."

"Breast cancer knows no boundaries, including age," said Assemblyman Joseph J. Roberts (D-Camden). "Because a family history of breast cancer is a predicator of one's potential susceptibility, covering the cost of mammograms at any age should be required by insurers."

"There are two steps to protecting women at risk for breast cancer: detection and treatment," said Assemblyman Neil M. Cohen (D-Union). "This law will guarantee the availability of insurance coverage for women who need treatment the most."

State of New Jersey Governor's Office

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