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REPORTS:

No

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No

NEWSPAPER ARTICLES:

No

RH/CL

§1 - C.17:48-6vv
§2 - C.17:48A-7ss
§3 –
C.17:48E-35.46
§4 –
C.17B:26-2.1oo
§5 –
C.17B:27-46.1vv
§6 –
C.17B:27A-7.29
§7 –
C.17B:27A-19.33
§8 - C.26:2J-4.47
§9 –
C.52:14-17.29ee
§10 –
C.52:14-17.46.6p

P.L. 2021, CHAPTER 73, *approved April 30, 2021*
Assembly, No. 3548

1 **AN ACT** concerning health benefits coverage for adolescent
2 depression screenings and supplementing various parts of
3 statutory law.

4

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

7

8 1. A hospital service corporation contract that provides hospital
9 and medical expense benefits and is delivered, issued, executed, or
10 renewed in this State pursuant to P.L.1938, c.366 (C.17:48-1 et
11 seq.), or approved for issuance or renewal in this State by the
12 Commissioner of Banking and Insurance, on or after the effective
13 date of this act, shall provide coverage for expenses incurred in
14 screening adolescents between the ages of 12 and 18 for major
15 depressive disorder, so long as screening for major depressive
16 disorder in adolescents continues to receive a rating of “A” or “B”
17 from the United States Preventative Services Task Force. Coverage
18 shall not be denied solely on the basis that the screening is provided
19 in conjunction with any other health care evaluation, treatment, or
20 service.

21 The benefits shall be provided to the same extent as for any other
22 condition under the contract, except that the hospital service
23 corporation shall not impose on covered persons receiving these
24 services any form of cost sharing, including, but not limited to,
25 copayments, deductibles, or coinsurance.

26 This section shall apply to those hospital service corporation
27 contracts in which the hospital service corporation has reserved the
28 right to change the premium.

1 2. A medical service corporation contract that provides hospital
2 and medical expense benefits and is delivered, issued, executed, or
3 renewed in this State pursuant to P.L.1940, c.74 (C.17:48A-1 et
4 seq.), or approved for issuance or renewal in this State by the
5 Commissioner of Banking and Insurance, on or after the effective
6 date of this act, shall provide coverage for expenses incurred in
7 screening adolescents between the ages of 12 and 18 for major
8 depressive disorder, so long as screening for major depressive
9 disorder in adolescents continues to receive a rating of "A" or "B"
10 from the United States Preventative Services Task Force. Coverage
11 shall not be denied solely on the basis that the screening is provided
12 in conjunction with any other health care evaluation, treatment, or
13 service.

14 The benefits shall be provided to the same extent as for any other
15 condition under the contract, except that the medical service
16 corporation shall not impose on covered persons receiving these
17 services any form of cost sharing, including, but not limited to,
18 copayments, deductibles, or coinsurance.

19 This section shall apply to those medical service corporation
20 contracts in which the medical service corporation has reserved the
21 right to change the premium.
22

23 3. A health service corporation contract that provides hospital
24 and medical expense benefits and is delivered, issued, executed, or
25 renewed in this State pursuant to P.L.1985, c.236 (C.17:48E-1 et
26 seq.), or approved for issuance or renewal in this State by the
27 Commissioner of Banking and Insurance, on or after the effective
28 date of this act, shall provide coverage for expenses incurred in
29 screening adolescents between the ages of 12 and 18 for major
30 depressive disorder, so long as screening for major depressive
31 disorder in adolescents continues to receive a rating of "A" or "B"
32 from the United States Preventative Services Task Force. Coverage
33 shall not be denied solely on the basis that the screening is provided
34 in conjunction with any other health care evaluation, treatment, or
35 service.

36 The benefits shall be provided to the same extent as for any other
37 condition under the contract, except that the health service
38 corporation shall not impose on covered persons receiving these
39 services any form of cost sharing, including, but not limited to,
40 copayments, deductibles, or coinsurance.

41 This section shall apply to those health service corporation
42 contracts in which the health service corporation has reserved the
43 right to change the premium.
44

45 4. An individual health insurance policy that provides hospital
46 and medical expense benefits and is delivered, issued, executed, or
47 renewed in this State pursuant to chapter 26 of Title 17B of the New
48 Jersey Statutes, or approved for issuance or renewal in this State by

1 the Commissioner of Banking and Insurance, on or after the
2 effective date of this act, shall provide coverage for expenses
3 incurred in screening adolescents between the ages of 12 and 18 for
4 major depressive disorder, so long as screening for major
5 depressive disorder in adolescents continues to receive a rating of
6 “A” or “B” from the United States Preventative Services Task
7 Force. Coverage shall not be denied solely on the basis that the
8 screening is provided in conjunction with any other health care
9 evaluation, treatment, or service.

10 The benefits shall be provided to the same extent as for any other
11 condition under the policy, except that the insurer shall not impose
12 on covered persons receiving these services any form of cost
13 sharing, including, but not limited to, copayments, deductibles, or
14 coinsurance.

15 This section shall apply to those policies in which the insurer has
16 reserved the right to change the premium.

17

18 5. A group health insurance policy that provides hospital and
19 medical expense benefits and is delivered, issued, executed, or
20 renewed in this State pursuant to chapter 27 of Title 17B of the New
21 Jersey Statutes, or approved for issuance or renewal in this State by
22 the Commissioner of Banking and Insurance, on or after the
23 effective date of this act, shall provide coverage for expenses
24 incurred in screening adolescents between the ages of 12 and 18 for
25 major depressive disorder, so long as screening for major
26 depressive disorder in adolescents continues to receive a rating of
27 “A” or “B” from the United States Preventative Services Task
28 Force. Coverage shall not be denied solely on the basis that the
29 screening is provided in conjunction with any other health care
30 evaluation, treatment, or service.

31 The benefits shall be provided to the same extent as for any other
32 condition under the policy, except that the insurer shall not impose
33 on covered persons receiving these services any form of cost
34 sharing, including, but not limited to, copayments, deductibles, or
35 coinsurance.

36 This section shall apply to those policies in which the insurer has
37 reserved the right to change the premium.

38

39 6. An individual health benefits plan that provides hospital and
40 medical expense benefits and is delivered, issued, executed, or
41 renewed in this State pursuant to P.L.1992, c.161 (C.17B:27A-2 et
42 seq.), on or after the effective date of this act, shall provide
43 coverage for expenses incurred in screening adolescents between
44 the ages of 12 and 18 for major depressive disorder, so long as
45 screening for major depressive disorder in adolescents continues to
46 receive a rating of “A” or “B” from the United States Preventative
47 Services Task Force. Coverage shall not be denied solely on the
48 basis that the screening is provided in conjunction with any other

1 health care evaluation, treatment, or service.

2 The benefits shall be provided to the same extent as for any other
3 condition under the health benefits plan, except that the carrier shall
4 not impose on covered persons receiving these services any form of
5 cost sharing, including, but not limited to, copayments, deductibles,
6 or coinsurance.

7 This section shall apply to those health benefits plans in which
8 the carrier has reserved the right to change the premium.

9

10 7. A small employer health benefits plan that provides hospital
11 and medical expense benefits and is delivered, issued, executed, or
12 renewed in this State pursuant to P.L.1992, c.162 (C.17B:27A-17 et
13 seq.), on or after the effective date of this act, shall provide
14 coverage for expenses incurred in screening adolescents between
15 the ages of 12 and 18 for major depressive disorder, so long as
16 screening for major depressive disorder in adolescents continues to
17 receive a rating of "A" or "B" from the United States Preventative
18 Services Task Force. Coverage shall not be denied solely on the
19 basis that the screening is provided in conjunction with any other
20 health care evaluation, treatment, or service.

21 The benefits shall be provided to the same extent as for any other
22 condition under the health benefits plan, except that the carrier shall
23 not impose on covered persons receiving these services any form of
24 cost sharing, including, but not limited to, copayments, deductibles,
25 or coinsurance.

26 This section shall apply to those health benefits plans in which
27 the carrier has reserved the right to change the premium.

28

29 8. A health maintenance organization contract for health care
30 services that is delivered, issued, executed, or renewed in this State
31 pursuant to P.L.1973, c.337 (C.26:2J-1 et seq.), or approved for
32 issuance or renewal in this State by the Commissioner of Banking
33 and Insurance, on or after the effective date of this act, shall provide
34 coverage for expenses incurred in screening adolescents between
35 the ages of 12 and 18 for major depressive disorder, so long as
36 screening for major depressive disorder in adolescents continues to
37 receive a rating of "A" or "B" from the United States Preventative
38 Services Task Force. Coverage shall not be denied solely on the
39 basis that the screening is provided in conjunction with any other
40 health care evaluation, treatment, or service.

41 The health care services shall be provided to the same extent as
42 for any other condition under the contract, except that the health
43 maintenance organization shall not impose on covered persons
44 receiving these services any form of cost sharing, including, but not
45 limited to, copayments, deductibles, or coinsurance.

46 This section shall apply to those contracts for health care
47 services under which the right to change the schedule of charges for
48 enrollee coverage is reserved.

1 9. The State Health Benefits Commission shall ensure that
2 every contract purchased by the commission, on or after the
3 effective date of this act, that provides hospital or medical expense
4 benefits shall provide coverage for expenses incurred in screening
5 adolescents between the ages of 12 and 18 for major depressive
6 disorder, so long as screening for major depressive disorder in
7 adolescents continues to receive a rating of “A” or “B” from the
8 United States Preventative Services Task Force. Coverage shall not
9 be denied solely on the basis that the screening is provided in
10 conjunction with any other health care evaluation, treatment, or
11 service.

12 The benefits shall be provided to the same extent as for any other
13 condition under the contract, except that the contract shall not
14 impose on covered persons receiving these services any form of
15 cost sharing, including, but not limited to, copayments, deductibles,
16 or coinsurance.

17
18 10. The School Employees’ Health Benefits Commission shall
19 ensure that every contract purchased by the commission, on or after
20 the effective date of this act, that provides hospital or medical
21 expense benefits shall provide coverage for expenses incurred in
22 screening adolescents between the ages of 12 and 18 for major
23 depressive disorder, so long as screening for major depressive
24 disorder in adolescents continues to receive a rating of “A” or “B”
25 from the United States Preventative Services Task Force. Coverage
26 shall not be denied solely on the basis that the screening is provided
27 in conjunction with any other health care evaluation, treatment, or
28 service.

29 The benefits shall be provided to the same extent as for any other
30 condition under the contract, except that the contract shall not
31 impose on covered persons receiving these services any form of
32 cost sharing, including, but not limited to, copayments, deductibles,
33 or coinsurance.

34
35 11. This act shall take effect on the 180th day after enactment
36 and shall apply to policies or contracts issued or renewed on or after
37 the effective date.

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STATEMENT

41

42 The bill requires insurance coverage for expenses incurred in
43 screening adolescents between the ages of 12 and 18 for major
44 depressive disorder, so long as screening for major depressive disorder
45 in adolescents continues to receive a rating of “A” or “B” from the
46 United States Preventative Services Task Force. The bill would apply
47 to hospital, medical, and health service corporations; commercial
48 individual, small employer, and larger group insurers; health

1 maintenance organizations; and the State Health Benefits Program and
2 the School Employees' Health Benefits Program. Coverage may not
3 be denied solely on the basis that the screening is provided in
4 conjunction with any other health care evaluation, treatment, or
5 service.

6 The bill provides that the benefits are to be provided to the same
7 extent as for any other condition under the contract or policy, except
8 that the insurer may not impose on covered persons receiving these
9 services any form of cost sharing, including, but not limited to,
10 copayments, deductibles, or coinsurance.

11 Depression is associated with higher levels of stress and anxiety
12 and can affect an adolescent's personal, school, work, social, and
13 family life, leading to social isolation and other problems. Early
14 diagnosis is essential to the effective treatment of depression in young
15 people.

16

17

18

19

20 Requires health benefits coverage for adolescent depression
21 screenings.

ASSEMBLY, No. 3548

STATE OF NEW JERSEY 219th LEGISLATURE

INTRODUCED FEBRUARY 25, 2020

Sponsored by:

Assemblywoman PAMELA R. LAMPITT

District 6 (Burlington and Camden)

Assemblywoman VERLINA REYNOLDS-JACKSON

District 15 (Hunterdon and Mercer)

Senator JOSEPH F. VITALE

District 19 (Middlesex)

Senator NELLIE POU

District 35 (Bergen and Passaic)

Co-Sponsored by:

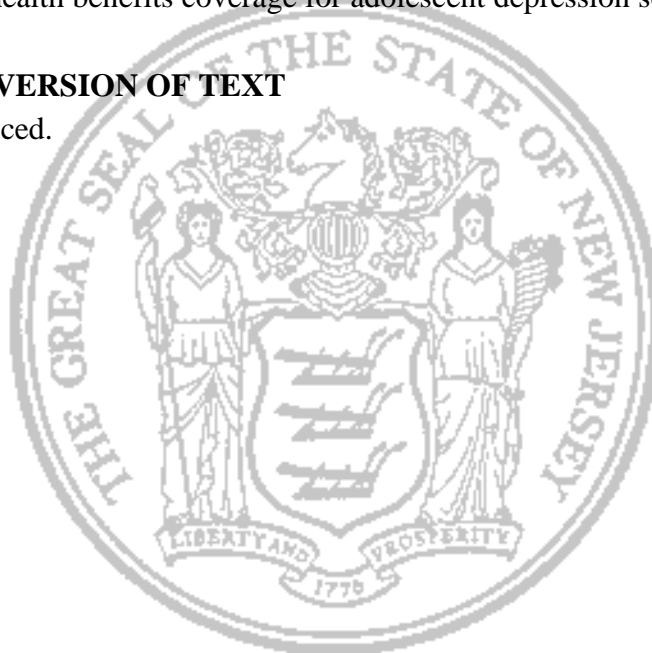
**Assemblywomen Murphy, Vainieri Huttie, Assemblyman Mejia,
Assemblywomen Jasey, Jimenez, Lopez, Downey, Swain, Senators Diegnan
and Lagana**

SYNOPSIS

Requires health benefits coverage for adolescent depression screenings.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 3/25/2021)

1 AN ACT concerning health benefits coverage for adolescent
2 depression screenings and supplementing various parts of
3 statutory law.

4
5 **BE IT ENACTED** *by the Senate and General Assembly of the State*
6 *of New Jersey:*

7
8 1. A hospital service corporation contract that provides hospital
9 and medical expense benefits and is delivered, issued, executed, or
10 renewed in this State pursuant to P.L.1938, c.366 (C.17:48-1 et
11 seq.), or approved for issuance or renewal in this State by the
12 Commissioner of Banking and Insurance, on or after the effective
13 date of this act, shall provide coverage for expenses incurred in
14 screening adolescents between the ages of 12 and 18 for major
15 depressive disorder, so long as screening for major depressive
16 disorder in adolescents continues to receive a rating of “A” or “B”
17 from the United States Preventative Services Task Force. Coverage
18 shall not be denied solely on the basis that the screening is provided
19 in conjunction with any other health care evaluation, treatment, or
20 service.

21 The benefits shall be provided to the same extent as for any other
22 condition under the contract, except that the hospital service
23 corporation shall not impose on covered persons receiving these
24 services any form of cost sharing, including, but not limited to,
25 copayments, deductibles, or coinsurance.

26 This section shall apply to those hospital service corporation
27 contracts in which the hospital service corporation has reserved the
28 right to change the premium.

29
30 2. A medical service corporation contract that provides hospital
31 and medical expense benefits and is delivered, issued, executed, or
32 renewed in this State pursuant to P.L.1940, c.74 (C.17:48A-1 et
33 seq.), or approved for issuance or renewal in this State by the
34 Commissioner of Banking and Insurance, on or after the effective
35 date of this act, shall provide coverage for expenses incurred in
36 screening adolescents between the ages of 12 and 18 for major
37 depressive disorder, so long as screening for major depressive
38 disorder in adolescents continues to receive a rating of “A” or “B”
39 from the United States Preventative Services Task Force. Coverage
40 shall not be denied solely on the basis that the screening is provided
41 in conjunction with any other health care evaluation, treatment, or
42 service.

43 The benefits shall be provided to the same extent as for any other
44 condition under the contract, except that the medical service
45 corporation shall not impose on covered persons receiving these
46 services any form of cost sharing, including, but not limited to,
47 copayments, deductibles, or coinsurance.

48 This section shall apply to those medical service corporation

1 contracts in which the medical service corporation has reserved the
2 right to change the premium.

3

4 3. A health service corporation contract that provides hospital
5 and medical expense benefits and is delivered, issued, executed, or
6 renewed in this State pursuant to P.L.1985, c.236 (C.17:48E-1 et
7 seq.), or approved for issuance or renewal in this State by the
8 Commissioner of Banking and Insurance, on or after the effective
9 date of this act, shall provide coverage for expenses incurred in
10 screening adolescents between the ages of 12 and 18 for major
11 depressive disorder, so long as screening for major depressive
12 disorder in adolescents continues to receive a rating of "A" or "B"
13 from the United States Preventative Services Task Force. Coverage
14 shall not be denied solely on the basis that the screening is provided
15 in conjunction with any other health care evaluation, treatment, or
16 service.

17 The benefits shall be provided to the same extent as for any other
18 condition under the contract, except that the health service
19 corporation shall not impose on covered persons receiving these
20 services any form of cost sharing, including, but not limited to,
21 copayments, deductibles, or coinsurance.

22 This section shall apply to those health service corporation
23 contracts in which the health service corporation has reserved the
24 right to change the premium.

25

26 4. An individual health insurance policy that provides hospital
27 and medical expense benefits and is delivered, issued, executed, or
28 renewed in this State pursuant to chapter 26 of Title 17B of the New
29 Jersey Statutes, or approved for issuance or renewal in this State by
30 the Commissioner of Banking and Insurance, on or after the
31 effective date of this act, shall provide coverage for expenses
32 incurred in screening adolescents between the ages of 12 and 18 for
33 major depressive disorder, so long as screening for major
34 depressive disorder in adolescents continues to receive a rating of
35 "A" or "B" from the United States Preventative Services Task
36 Force. Coverage shall not be denied solely on the basis that the
37 screening is provided in conjunction with any other health care
38 evaluation, treatment, or service.

39 The benefits shall be provided to the same extent as for any other
40 condition under the policy, except that the insurer shall not impose
41 on covered persons receiving these services any form of cost
42 sharing, including, but not limited to, copayments, deductibles, or
43 coinsurance.

44 This section shall apply to those policies in which the insurer has
45 reserved the right to change the premium.

46

47 5. A group health insurance policy that provides hospital and
48 medical expense benefits and is delivered, issued, executed, or

1 renewed in this State pursuant to chapter 27 of Title 17B of the New
2 Jersey Statutes, or approved for issuance or renewal in this State by
3 the Commissioner of Banking and Insurance, on or after the
4 effective date of this act, shall provide coverage for expenses
5 incurred in screening adolescents between the ages of 12 and 18 for
6 major depressive disorder, so long as screening for major
7 depressive disorder in adolescents continues to receive a rating of
8 "A" or "B" from the United States Preventative Services Task
9 Force. Coverage shall not be denied solely on the basis that the
10 screening is provided in conjunction with any other health care
11 evaluation, treatment, or service.

12 The benefits shall be provided to the same extent as for any other
13 condition under the policy, except that the insurer shall not impose
14 on covered persons receiving these services any form of cost
15 sharing, including, but not limited to, copayments, deductibles, or
16 coinsurance.

17 This section shall apply to those policies in which the insurer has
18 reserved the right to change the premium.

19

20 6. An individual health benefits plan that provides hospital and
21 medical expense benefits and is delivered, issued, executed, or
22 renewed in this State pursuant to P.L.1992, c.161 (C.17B:27A-2 et
23 seq.), on or after the effective date of this act, shall provide
24 coverage for expenses incurred in screening adolescents between
25 the ages of 12 and 18 for major depressive disorder, so long as
26 screening for major depressive disorder in adolescents continues to
27 receive a rating of "A" or "B" from the United States Preventative
28 Services Task Force. Coverage shall not be denied solely on the
29 basis that the screening is provided in conjunction with any other
30 health care evaluation, treatment, or service.

31 The benefits shall be provided to the same extent as for any other
32 condition under the health benefits plan, except that the carrier shall
33 not impose on covered persons receiving these services any form of
34 cost sharing, including, but not limited to, copayments, deductibles,
35 or coinsurance.

36 This section shall apply to those health benefits plans in which
37 the carrier has reserved the right to change the premium.

38

39 7. A small employer health benefits plan that provides hospital
40 and medical expense benefits and is delivered, issued, executed, or
41 renewed in this State pursuant to P.L.1992, c.162 (C.17B:27A-17 et
42 seq.), on or after the effective date of this act, shall provide
43 coverage for expenses incurred in screening adolescents between
44 the ages of 12 and 18 for major depressive disorder, so long as
45 screening for major depressive disorder in adolescents continues to
46 receive a rating of "A" or "B" from the United States Preventative
47 Services Task Force. Coverage shall not be denied solely on the
48 basis that the screening is provided in conjunction with any other

1 health care evaluation, treatment, or service.

2 The benefits shall be provided to the same extent as for any other
3 condition under the health benefits plan, except that the carrier shall
4 not impose on covered persons receiving these services any form of
5 cost sharing, including, but not limited to, copayments, deductibles,
6 or coinsurance.

7 This section shall apply to those health benefits plans in which
8 the carrier has reserved the right to change the premium.

9
10 8. A health maintenance organization contract for health care
11 services that is delivered, issued, executed, or renewed in this State
12 pursuant to P.L.1973, c.337 (C.26:2J-1 et seq.), or approved for
13 issuance or renewal in this State by the Commissioner of Banking
14 and Insurance, on or after the effective date of this act, shall provide
15 coverage for expenses incurred in screening adolescents between
16 the ages of 12 and 18 for major depressive disorder, so long as
17 screening for major depressive disorder in adolescents continues to
18 receive a rating of "A" or "B" from the United States Preventative
19 Services Task Force. Coverage shall not be denied solely on the
20 basis that the screening is provided in conjunction with any other
21 health care evaluation, treatment, or service.

22 The health care services shall be provided to the same extent as
23 for any other condition under the contract, except that the health
24 maintenance organization shall not impose on covered persons
25 receiving these services any form of cost sharing, including, but not
26 limited to, copayments, deductibles, or coinsurance.

27 This section shall apply to those contracts for health care
28 services under which the right to change the schedule of charges for
29 enrollee coverage is reserved.

30
31 9. The State Health Benefits Commission shall ensure that
32 every contract purchased by the commission, on or after the
33 effective date of this act, that provides hospital or medical expense
34 benefits shall provide coverage for expenses incurred in screening
35 adolescents between the ages of 12 and 18 for major depressive
36 disorder, so long as screening for major depressive disorder in
37 adolescents continues to receive a rating of "A" or "B" from the
38 United States Preventative Services Task Force. Coverage shall not
39 be denied solely on the basis that the screening is provided in
40 conjunction with any other health care evaluation, treatment, or
41 service.

42 The benefits shall be provided to the same extent as for any other
43 condition under the contract, except that the contract shall not
44 impose on covered persons receiving these services any form of
45 cost sharing, including, but not limited to, copayments, deductibles,
46 or coinsurance.

47
48 10. The School Employees' Health Benefits Commission shall

1 ensure that every contract purchased by the commission, on or after
2 the effective date of this act, that provides hospital or medical
3 expense benefits shall provide coverage for expenses incurred in
4 screening adolescents between the ages of 12 and 18 for major
5 depressive disorder, so long as screening for major depressive
6 disorder in adolescents continues to receive a rating of “A” or “B”
7 from the United States Preventative Services Task Force. Coverage
8 shall not be denied solely on the basis that the screening is provided
9 in conjunction with any other health care evaluation, treatment, or
10 service.

11 The benefits shall be provided to the same extent as for any other
12 condition under the contract, except that the contract shall not
13 impose on covered persons receiving these services any form of
14 cost sharing, including, but not limited to, copayments, deductibles,
15 or coinsurance.

16
17 11. This act shall take effect on the 180th day after enactment
18 and shall apply to policies or contracts issued or renewed on or after
19 the effective date.

20

21

22

STATEMENT

23

24 The bill requires insurance coverage for expenses incurred in
25 screening adolescents between the ages of 12 and 18 for major
26 depressive disorder, so long as screening for major depressive disorder
27 in adolescents continues to receive a rating of “A” or “B” from the
28 United States Preventative Services Task Force. The bill would apply
29 to hospital, medical, and health service corporations; commercial
30 individual, small employer, and larger group insurers; health
31 maintenance organizations; and the State Health Benefits Program and
32 the School Employees’ Health Benefits Program. Coverage may not
33 be denied solely on the basis that the screening is provided in
34 conjunction with any other health care evaluation, treatment, or
35 service.

36 The bill provides that the benefits are to be provided to the same
37 extent as for any other condition under the contract or policy, except
38 that the insurer may not impose on covered persons receiving these
39 services any form of cost sharing, including, but not limited to,
40 copayments, deductibles, or coinsurance.

41 Depression is associated with higher levels of stress and anxiety
42 and can affect an adolescent’s personal, school, work, social, and
43 family life, leading to social isolation and other problems. Early
44 diagnosis is essential to the effective treatment of depression in young
45 people.

ASSEMBLY FINANCIAL INSTITUTIONS AND INSURANCE
COMMITTEE

STATEMENT TO

ASSEMBLY, No. 3548

STATE OF NEW JERSEY

DATED: JULY 9, 2020

The Assembly Financial Institutions and Insurance Committee reports favorably Assembly Bill No. 3548.

The bill requires insurance coverage for expenses incurred in screening adolescents between the ages of 12 and 18 for major depressive disorder, so long as screening for major depressive disorder in adolescents continues to receive a rating of “A” or “B” from the United States Preventative Services Task Force. The bill would apply to hospital, medical, and health service corporations; commercial individual, small employer, and larger group insurers; health maintenance organizations; and the State Health Benefits Program and the School Employees’ Health Benefits Program. Coverage may not be denied solely on the basis that the screening is provided in conjunction with any other health care evaluation, treatment, or service.

The bill provides that the benefits are to be provided to the same extent as for any other condition under the contract or policy, except that the insurer may not impose on covered persons receiving these services any form of cost sharing, including, but not limited to, copayments, deductibles, or coinsurance.

Depression is associated with higher levels of stress and anxiety and can affect an adolescent’s personal, school, work, social, and family life, leading to social isolation and other problems. Early diagnosis is essential to the effective treatment of depression in young people.

SENATE COMMERCE COMMITTEE

STATEMENT TO

ASSEMBLY, No. 3548

STATE OF NEW JERSEY

DATED: FEBRUARY 11, 2021

The Senate Commerce Committee reports favorably Assembly Bill No. 3548.

The bill requires insurance coverage for expenses incurred in screening adolescents between the ages of 12 and 18 for major depressive disorder, so long as screening for major depressive disorder in adolescents continues to receive a rating of “A” or “B” from the United States Preventative Services Task Force. The bill would apply to hospital, medical, and health service corporations; commercial individual, small employer, and larger group insurers; health maintenance organizations; and the State Health Benefits Program and the School Employees’ Health Benefits Program. Coverage may not be denied solely on the basis that the screening is provided in conjunction with any other health care evaluation, treatment, or service.

The bill provides that the benefits are to be provided to the same extent as for any other condition under the contract or policy, except that the insurer may not impose on covered persons receiving these services any form of cost sharing, including, but not limited to, copayments, deductibles, or coinsurance.

Depression is associated with higher levels of stress and anxiety and can affect an adolescent’s personal, school, work, social, and family life, leading to social isolation and other problems. Early diagnosis is essential to the effective treatment of depression in young people.

SENATE, No. 1140

STATE OF NEW JERSEY 219th LEGISLATURE

INTRODUCED JANUARY 30, 2020

Sponsored by:

Senator JOSEPH F. VITALE

District 19 (Middlesex)

Senator NELLIE POU

District 35 (Bergen and Passaic)

Co-Sponsored by:

Senators Diegnan and Lagana

SYNOPSIS

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16 disorder in adolescents continues to receive a rating of “A” or “B”
17 from the United States Preventative Services Task Force. Coverage
18 shall not be denied solely on the basis that the screening is provided
19 in conjunction with any other health care evaluation, treatment, or
20 service.

21 The benefits shall be provided to the same extent as for any other
22 condition under the contract, except that the hospital service
23 corporation shall not impose on covered persons receiving these
24 services any form of cost sharing, including, but not limited to,
25 copayments, deductibles, or coinsurance.

26 This section shall apply to those hospital service corporation
27 contracts in which the hospital service corporation has reserved the
28 right to change the premium.

29
30 2. A medical service corporation contract that provides hospital
31 and medical expense benefits and is delivered, issued, executed, or
32 renewed in this State pursuant to P.L.1940, c.74 (C.17:48A-1 et
33 seq.), or approved for issuance or renewal in this State by the
34 Commissioner of Banking and Insurance, on or after the effective
35 date of this act, shall provide coverage for expenses incurred in
36 screening adolescents between the ages of 12 and 18 for major
37 depressive disorder, so long as screening for major depressive
38 disorder in adolescents continues to receive a rating of “A” or “B”
39 from the United States Preventative Services Task Force. Coverage
40 shall not be denied solely on the basis that the screening is provided
41 in conjunction with any other health care evaluation, treatment, or
42 service.

43 The benefits shall be provided to the same extent as for any other
44 condition under the contract, except that the medical service
45 corporation shall not impose on covered persons receiving these
46 services any form of cost sharing, including, but not limited to,
47 copayments, deductibles, or coinsurance.

48 This section shall apply to those medical service corporation

1 contracts in which the medical service corporation has reserved the
2 right to change the premium.

3

4 3. A health service corporation contract that provides hospital
5 and medical expense benefits and is delivered, issued, executed, or
6 renewed in this State pursuant to P.L.1985, c.236 (C.17:48E-1 et
7 seq.), or approved for issuance or renewal in this State by the
8 Commissioner of Banking and Insurance, on or after the effective
9 date of this act, shall provide coverage for expenses incurred in
10 screening adolescents between the ages of 12 and 18 for major
11 depressive disorder, so long as screening for major depressive
12 disorder in adolescents continues to receive a rating of "A" or "B"
13 from the United States Preventative Services Task Force. Coverage
14 shall not be denied solely on the basis that the screening is provided
15 in conjunction with any other health care evaluation, treatment, or
16 service.

17 The benefits shall be provided to the same extent as for any other
18 condition under the contract, except that the health service
19 corporation shall not impose on covered persons receiving these
20 services any form of cost sharing, including, but not limited to,
21 copayments, deductibles, or coinsurance.

22 This section shall apply to those health service corporation
23 contracts in which the health service corporation has reserved the
24 right to change the premium.

25

26 4. An individual health insurance policy that provides hospital
27 and medical expense benefits and is delivered, issued, executed, or
28 renewed in this State pursuant to chapter 26 of Title 17B of the New
29 Jersey Statutes, or approved for issuance or renewal in this State by
30 the Commissioner of Banking and Insurance, on or after the
31 effective date of this act, shall provide coverage for expenses
32 incurred in screening adolescents between the ages of 12 and 18 for
33 major depressive disorder, so long as screening for major
34 depressive disorder in adolescents continues to receive a rating of
35 "A" or "B" from the United States Preventative Services Task
36 Force. Coverage shall not be denied solely on the basis that the
37 screening is provided in conjunction with any other health care
38 evaluation, treatment, or service.

39 The benefits shall be provided to the same extent as for any other
40 condition under the policy, except that the insurer shall not impose
41 on covered persons receiving these services any form of cost
42 sharing, including, but not limited to, copayments, deductibles, or
43 coinsurance.

44 This section shall apply to those policies in which the insurer has
45 reserved the right to change the premium.

46

47 5. A group health insurance policy that provides hospital and
48 medical expense benefits and is delivered, issued, executed, or

1 renewed in this State pursuant to chapter 27 of Title 17B of the New
2 Jersey Statutes, or approved for issuance or renewal in this State by
3 the Commissioner of Banking and Insurance, on or after the
4 effective date of this act, shall provide coverage for expenses
5 incurred in screening adolescents between the ages of 12 and 18 for
6 major depressive disorder, so long as screening for major
7 depressive disorder in adolescents continues to receive a rating of
8 "A" or "B" from the United States Preventative Services Task
9 Force. Coverage shall not be denied solely on the basis that the
10 screening is provided in conjunction with any other health care
11 evaluation, treatment, or service.

12 The benefits shall be provided to the same extent as for any other
13 condition under the policy, except that the insurer shall not impose
14 on covered persons receiving these services any form of cost
15 sharing, including, but not limited to, copayments, deductibles, or
16 coinsurance.

17 This section shall apply to those policies in which the insurer has
18 reserved the right to change the premium.

19

20 6. An individual health benefits plan that provides hospital and
21 medical expense benefits and is delivered, issued, executed, or
22 renewed in this State pursuant to P.L.1992, c.161 (C.17B:27A-2 et
23 seq.), on or after the effective date of this act, shall provide
24 coverage for expenses incurred in screening adolescents between
25 the ages of 12 and 18 for major depressive disorder, so long as
26 screening for major depressive disorder in adolescents continues to
27 receive a rating of "A" or "B" from the United States Preventative
28 Services Task Force. Coverage shall not be denied solely on the
29 basis that the screening is provided in conjunction with any other
30 health care evaluation, treatment, or service.

31 The benefits shall be provided to the same extent as for any other
32 condition under the health benefits plan, except that the carrier shall
33 not impose on covered persons receiving these services any form of
34 cost sharing, including, but not limited to, copayments, deductibles,
35 or coinsurance.

36 This section shall apply to those health benefits plans in which
37 the carrier has reserved the right to change the premium.

38

39 7. A small employer health benefits plan that provides hospital
40 and medical expense benefits and is delivered, issued, executed, or
41 renewed in this State pursuant to P.L.1992, c.162 (C.17B:27A-17 et
42 seq.), on or after the effective date of this act, shall provide
43 coverage for expenses incurred in screening adolescents between
44 the ages of 12 and 18 for major depressive disorder, so long as
45 screening for major depressive disorder in adolescents continues to
46 receive a rating of "A" or "B" from the United States Preventative
47 Services Task Force. Coverage shall not be denied solely on the
48 basis that the screening is provided in conjunction with any other

1 health care evaluation, treatment, or service.

2 The benefits shall be provided to the same extent as for any other
3 condition under the health benefits plan, except that the carrier shall
4 not impose on covered persons receiving these services any form of
5 cost sharing, including, but not limited to, copayments, deductibles,
6 or coinsurance.

7 This section shall apply to those health benefits plans in which
8 the carrier has reserved the right to change the premium.

9
10 8. A health maintenance organization contract for health care
11 services that is delivered, issued, executed, or renewed in this State
12 pursuant to P.L.1973, c.337 (C.26:2J-1 et seq.), or approved for
13 issuance or renewal in this State by the Commissioner of Banking
14 and Insurance, on or after the effective date of this act, shall provide
15 coverage for expenses incurred in screening adolescents between
16 the ages of 12 and 18 for major depressive disorder, so long as
17 screening for major depressive disorder in adolescents continues to
18 receive a rating of "A" or "B" from the United States Preventative
19 Services Task Force. Coverage shall not be denied solely on the
20 basis that the screening is provided in conjunction with any other
21 health care evaluation, treatment, or service.

22 The health care services shall be provided to the same extent as
23 for any other condition under the contract, except that the health
24 maintenance organization shall not impose on covered persons
25 receiving these services any form of cost sharing, including, but not
26 limited to, copayments, deductibles, or coinsurance.

27 This section shall apply to those contracts for health care
28 services under which the right to change the schedule of charges for
29 enrollee coverage is reserved.

30
31 9. The State Health Benefits Commission shall ensure that
32 every contract purchased by the commission, on or after the
33 effective date of this act, that provides hospital or medical expense
34 benefits shall provide coverage for expenses incurred in screening
35 adolescents between the ages of 12 and 18 for major depressive
36 disorder, so long as screening for major depressive disorder in
37 adolescents continues to receive a rating of "A" or "B" from the
38 United States Preventative Services Task Force. Coverage shall not
39 be denied solely on the basis that the screening is provided in
40 conjunction with any other health care evaluation, treatment, or
41 service.

42 The benefits shall be provided to the same extent as for any other
43 condition under the contract, except that the contract shall not
44 impose on covered persons receiving these services any form of
45 cost sharing, including, but not limited to, copayments, deductibles,
46 or coinsurance.

47

48 10. The School Employees' Health Benefits Commission shall

1 ensure that every contract purchased by the commission, on or after
2 the effective date of this act, that provides hospital or medical
3 expense benefits shall provide coverage for expenses incurred in
4 screening adolescents between the ages of 12 and 18 for major
5 depressive disorder, so long as screening for major depressive
6 disorder in adolescents continues to receive a rating of “A” or “B”
7 from the United States Preventative Services Task Force. Coverage
8 shall not be denied solely on the basis that the screening is provided
9 in conjunction with any other health care evaluation, treatment, or
10 service.

11 The benefits shall be provided to the same extent as for any other
12 condition under the contract, except that the contract shall not
13 impose on covered persons receiving these services any form of
14 cost sharing, including, but not limited to, copayments, deductibles,
15 or coinsurance.

16

17 11. This act shall take effect on the 180th day after enactment
18 and shall apply to policies or contracts issued or renewed on or after
19 the effective date.

20

21

22

STATEMENT

23

24 This bill requires insurance coverage for expenses incurred in
25 screening adolescents between the ages of 12 and 18 for major
26 depressive disorder, so long as screening for major depressive
27 disorder in adolescents continues to receive a rating of “A” or “B”
28 from the United States Preventative Services Task Force. The bill
29 would apply to hospital, medical, and health service corporations;
30 commercial individual, small employer, and larger group insurers;
31 health maintenance organizations; and the State Health Benefits
32 Program and the School Employees’ Health Benefits Program.
33 Coverage may not be denied solely on the basis that the screening is
34 provided in conjunction with any other health care evaluation,
35 treatment, or service.

36 The bill provides that the benefits will be provided to the same
37 extent as for any other condition under the contract or policy,
38 except that the insurer may not impose on covered persons
39 receiving these services any form of cost sharing, including, but not
40 limited to, copayments, deductibles, or coinsurance.

41 Depression is associated with higher levels of stress and anxiety
42 and can affect an adolescent’s personal, school, work, social, and
43 family life, leading to social isolation and other problems. Early
44 diagnosis is essential to the effective treatment of depression in
45 young people.

SENATE COMMERCE COMMITTEE

STATEMENT TO

SENATE, No. 1140

STATE OF NEW JERSEY

DATED: FEBRUARY 11, 2021

The Senate Commerce Committee reports favorably Senate Bill No. 1140.

This bill requires insurance coverage for expenses incurred in screening adolescents between the ages of 12 and 18 for major depressive disorder, so long as screening for major depressive disorder in adolescents continues to receive a rating of “A” or “B” from the United States Preventative Services Task Force. The bill would apply to hospital, medical, and health service corporations; commercial individual, small employer, and larger group insurers; health maintenance organizations; and the State Health Benefits Program and the School Employees’ Health Benefits Program. Coverage may not be denied solely on the basis that the screening is provided in conjunction with any other health care evaluation, treatment, or service.

The bill provides that the benefits will be provided to the same extent as for any other condition under the contract or policy, except that the insurer may not impose on covered persons receiving these services any form of cost sharing, including, but not limited to, copayments, deductibles, or coinsurance.

Depression is associated with higher levels of stress and anxiety and can affect an adolescent’s personal, school, work, social, and family life, leading to social isolation and other problems. Early diagnosis is essential to the effective treatment of depression in young people.

Marking National Mental Health Awareness Month, Governor Murphy Signs Legislation to Cover Expenses for Adolescent Mental Health Screenings

04/30/2021

TRENTON – In advance of National Mental Health Awareness Month in May, Governor Phil Murphy today signed A3548 into law, which will require private insurers, the State Health Benefit Plan, and School Employees' Health Benefits Program to put into place policies and procedures to ensure coverage of expenses in mental health screening of a major depressive disorder for adolescents between the ages of 12 and 18.

“The effects and uncertainty of the COVID-19 pandemic has put the mental health of our adolescents at risk, and it’s critical now more than ever to keep the well-being of our youth at the forefront of our post COVID-19 recovery,” **said Governor Murphy**. “With today’s bill signing, we are prioritizing the mental health of our children and ensuring that they receive the support they need during this time and beyond.”

Under this new law, health benefits coverage will be provided to the same extent as for any other condition within the contract or policy. The insurer may not enforce on individuals who are covered that receive these services any form of cost sharing, including copayments, deductibles, or coinsurance. Currently, the Affordable Care Act (ACA) already requires coverage for adolescent depression screenings. By signing this bill, the Governor is taking steps to ensure that this coverage continues should the ACA ever be repealed or found invalid.

“Early diagnosis of depression and other mental health disorders is critical, as that is the primary way we can ensure our adolescents are receiving the help they may urgently need,” **said Senator Joseph Vitale, chair of the Senate Health Committee**. “School, work, family life, and personal life tend to be among the main contributors to a person’s stress and anxiety levels, and yet, many adolescents are currently unable to receive the treatment they need. This law will ensure that children and teenagers are able to receive timely and proper treatment for depression or other mental health issues.”

“Major Depression Disorder affects eight percent of adolescents in the United States. Early intervention and diagnosis is key for proper treatment,” **said Senator Nellie Pou**. “Due to financial hardships, mental health screenings may not be obtainable for every family that needs it. Ensuring that the proper mental health screenings and treatments are accessible to all people without risk of financial barriers is essential.”

“To achieve better outcomes in adulthood, it is critical that we identify mental health disorders early,” **said Assemblywomen Pamela Lampitt and Verlina Reynolds Jackson, in a joint statement**. “Depression screening is an easy way to catch mental health issues at an early stage and establish a treatment plan that will help manage symptoms. We must treat mental health care in the same fashion that we do for physical health and place a strong focus on preventative care. Mental health disorders are treatable, but it is important that we identify the problem before a person is in crisis. Given the prevalence of mental health issues among today’s youth, we must take action to ensure adolescents struggling with their mental health are able to get the help they need.”