# LEGISLATIVE HISTORY CHECKLIST Compiled by the NJ State Law Library

(Diabetes--health coverage)

NJSA:

17:48-6n

LAWS OF:

1995

CHAPTER:

331

BILL NO:

S1759

SPONSOR(S):

Palaia

DATE INTRODUCED:

January 23, 1995

COMMITTEE:

ASSEMBLY

Insurance

SENATE:

Health

AMENDED DURING PASSAGE: Fourth reprint enacted

Yes

Amendments during passage

denoted by superscript numbers

DATE OF PASSAGE:

ASSEMBLY:

December 11, 1995

SENATE:

June 26, 1995

PATE OF APPROVAL:

January 5, 1996

OLLOWING STATEMENTS ARE ATTACHED IF AVAILABLE:

SPONSOR STATEMENT:

Yes

COMMITTEE STATEMENT:

ASSEMBLY:

Yes

SENATE:

Yes

FISCAL NOTE:

No

VETO MESSAGE:

No

MESSAGE ON SIGNING:

No

FOLLOWING WERE PRINTED:

REPORTS:

No

HEARINGS:

No

KBP:pp

\$1 C. 17:48-6n \$2 C. 17:48A-7! \$3 C. 17:48E-35.11 \$4 C. 17B:26-2.1! \$5 C. 17B:27-46.1m \$6 C.26:21-4.11

## P.L. 1995, CHAPTER 331, approved January 5, 1996 1995 Senate No. 1759 (Fourth Reprint)

AN ACT concerning health insurance coverage for treatment of diabetes and supplementing various parts of the statutory law.

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42 43 BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

1. a. Every individual or group hospital service corporation contract providing hospital or medical expense benefits that is delivered, issued, executed or renewed in this State pursuant to P.L.1938, c.366 (C.17:48-1 et seq.) or approved for issuance or renewal in this State by the Commissioner of Insurance on or after the effective date of this act shall provide benefits to any subscriber or other person covered thereunder for expenses incurred for the following equipment and supplies for the treatment of diabetes, if recommended or prescribed by a physician lor nurse practitioner/clinical nurse specialist1: blood glucose monitors and blood glucose monitors for the legally blind: 4[data management systems:]4 test strips for glucose monitors and visual reading and urine testing strips; insulin; injection aids; cartridges for the legally blind; syringes; insulin pumps and appurtenances thereto; insulin infusion devices; and oral agents for controlling blood sugar.

Each individual or group hospital service corporation contract shall also provide benefits for expenses incurred for diabetes self-management education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. Benefits provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes; upon diagnosis by a physician lor nurse practitioner/clinical nurse specialist lof a significant change in the subscriber's or other covered person's symptoms or conditions which necessitate changes in that person's self-management; and upon determination of a physician 1 or nurse practitioner/clinical nurse specialist 1 that reeducation or refresher education is necessary. <sup>2</sup>Diabetes self-management education shall be provided by 3a dietitian registered by a nationally recognized professional association of dietitians or 3 a health care professional recognized as a Cartified Diabetes Educator by the American Association of Diabetes Educators for a registered pharmacist in the State qualified with regard to management education for diabetes by any institution recognized by the board of pharmacy of the State of New Jersey 4.2

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.
Ratter enclosed in superscript numerals has been adopted as follows:
Senate Stat committee amendments adopted May 8, 1995.
Senate floor amendments adopted May 11, 1995.
Senate floor amendments adopted June 12, 1995.
Assembly AIN committee amendments adopted Nayameur ph, 1998.

c. The benefits required by this section shall be provided to the same extent as for any other sickness under the contract.

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- d. This section shall apply to all hospital service corporation contracts in which the hospital service corporation has reserved the right to change the premium.
- e. The provisions of this section shall not apply to a health benefits plan subject to the provisions of P.L.1992, c.161 (C.17B:27A-2 et seq.) or P.L.1992, c.162 (C.17B:27A-17 et seq.).
- f. The Commissioner of Insurance may, in consultation with the Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), promulgate and periodically update a list of additional diabetes equipment and related supplies that are medically necessary for the treatment of diabetes and for which benefits shall be provided according to the provisions of this section.
- 2. a. Every individual or group medical service corporation contract providing hospital or medical expense benefits that is delivered, issued, executed or renewed in this State pursuant to P.L.1940, c.74 (C.17:48A-1 et seq.) or approved for issuance or renewal in this State by the Commissioner of Insurance on or after the effective date of this act shall provide benefits to any subscriber or other person covered thereunder for expenses incurred for the following equipment and supplies for the treatment of diabetes, if recommended or prescribed by a physician for nurse practitioner/clinical nurse specialist1: blood glucose monitors and blood glucose monitors for the legally blind; <sup>4</sup>[data management systems;]<sup>4</sup> test strips for glucose monitors and visual reading and urine testing strips; insulin; injection aids; cartridges for the legally blind; syringes; insulin pumps and appurtenances thereto; insulin infusion devices; and oral agents for controlling blood sugar.
- b. Each individual or group medical service corporation contract shall also provide benefits for expenses incurred for diabetes self-management education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. Benefits provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes; upon diagnosis by a physician for nurse practitioner/clinical nurse specialist 1 of a significant change in the subscriber's or other covered person's symptoms or conditions which necessitate changes in that person's self-management; and upon determination of a physician for nurse practitioner/clinical nurse specialist that reeducation or refresher education is necessary. -Diabetes self-management education shall be provided by 3a dietitian registered by a nationally recognized professional association of dietitians or a health care professional recognized as a Certified Diabetes Educator by the American Association of Diabetes Educators 4 or a registered pharmacist in the State qualified with regard to management education for diabetes by any institution recognized by the board of pharmacy of the State of New Jersey 4.2
- c. The benefits required by this section shall be provided to the same extent as for any other sickness under the contract.

d. This section shall apply to all medical service corporation contracts in which the medical service corporation has reserved the right to change the premium.

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- e. The provisions of this section shall not apply to a health benefits plan subject to the provisions of P.L.1992, c.161 (C.17B:27A-2 et seq.) or P.L.1992, c.162 (C.17B:27A-17 et seq.).
- f. The Commissioner of Insurance may, in consultation with the Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), promulgate and periodically update a list of additional diabetes equipment and related supplies that are medically necessary for the treatment of diabetes and for which benefits shall be provided according to the provisions of this section.
- 3. a. Every individual or group health service corporation contract providing hospital or medical expense benefits that is delivered, issued, executed or renewed in this State pursuant to P.L. 1985, c.236 (C.17:48E-1 et seq.) or approved for issuance or renewal in this State by the Commissioner of Insurance on or after the effective date of this act shall provide benefits to any subscriber or other person covered thereunder for expenses incurred for the following equipment and supplies for the treatment of diabetes, if recommended or prescribed by a physician lor nurse practitioner/clinical nurse specialist1: blood glucose monitors and blood glucose monitors for the legally blind: 4[data management systems;]4 test strips for glucose monitors and visual reading and urine testing strips; insulin; injection aids; cartridges for the legally blind; syringes; insulin pumps and appurtenances thereto: insulin infusion devices; and oral agents for controlling blood sugar.
- b. Each individual or group health service corporation contract shall also provide benefits for expenses incurred for diabetes self-management education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. Benefits provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes; upon the diagnosis by a physician 1 or nurse practitioner/clinical nurse specialist of a significant change in the subscriber's or other covered person's symptoms or conditions which necessitate changes in that person's self-management; and upon determination of a physician lor nurse practitioner/clinical nurse specialist<sup>1</sup> that reeducation or refresher education is necessary. <sup>2</sup>Diabetes self-management education shall be provided by 3a dictitian registered by a nationally recognized professional association of dietitians or 3 a health care professional recognized as a Certified Diabetes Educator by the American Association of Diabetes Educators for a registered pharmacist in the State qualified with regard to management education for diabetes by any institution recognized by the board of pharmacy of the State of New Jersey 4.2

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- c. The benefits required by this section shall be provided to the same extent as for any other sickness under the contract.
- d. This section shall apply to all health service corporation contracts in which the health service corporation has reserved

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the right to change the premium.

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- e. The provisions of this section shall not apply to a health benefits plan subject to the provisions of P.L.1992, c.161 (C.17B:27A-2 et seq.) or P.L.1992, c.162 (C.17B:27A-17 et seq.).
- f. The Commissioner of Insurance may, in consultation with the Commissioner of Health, pursuant to the "Administrative Procedure Act." P.L.1968, c.410 (C.52:14B-1 et seq.), promulgate and periodically update a list of additional diabetes equipment and related supplies that are medically necessary for the treatment of diabetes and for which benefits shall be provided according to the provisions of this section.
- 4. a. Every individual health insurance policy providing hospital or medical expense benefits that is delivered, issued. executed or renewed in this State pursuant to Chapter 26 of Title 17B of the New Jersey Statutes or approved for issuance or renewal in this State by the Commissioner of Insurance on or after the effective date of this act shall provide benefits to any person covered thereunder for expenses incurred for the following equipment and supplies for the treatment of diabetes, if recommended or prescribed by a physician <sup>1</sup>or nurse practitioner/clinical nurse specialist1: blood glucose monitors and blood glucose monitors for the legally blind; 4[data management systems;]4 test strips for glucose monitors and visual reading and urine testing strips; insulin; injection aids; cartridges for the legally blind; syringes; insulin pumps and appurtenances thereto; insulin infusion devices; and oral agents for controlling blood sugar.
- b. Each individual health insurance policy shall also provide benefits for expenses incurred for diabetes self-management education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes; upon diagnosis by a physician lor nurse practitioner/clinical nurse specialist of a significant change in the covered person's symptoms or conditions which necessitate changes in that person's self-management; and upon determination of a physician 1 or nurse practitioner/clinical nurse specialist that reeducation or refresher education is necessary. <sup>2</sup>Diabetes self-management education shall be provided by <sup>3</sup>a dietitian registered by a nationally recognized professional association of dietitians or a health care professional recognized as a Certified Diabetes Educator by the American Association of Diabetes Educators 4 or a registered pharmacist in the State qualified with regard to management education for diabetes by any institution recognized by the board of pharmacy of the State of New Jersey<sup>4</sup>.<sup>2</sup>
- c. The benefits required by this section shall be provided to the same extent as for any other sickness under the policy.
- d. This section shall apply to all individual health insurance policies in which the insurer has reserved the right to change the premium.
  - e. The provisions of this section shall not apply to a health

benefits plan subject to the provisions of P.L.1992, c.161 (C.17B:27A-2 et seq.) or P.L.1992, c.162 (C.17B:27A-17 et seq.).

- f. The Commissioner of Insurance may, in consultation with the Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), promulgate and periodically update a list of additional diabetes equipment and related supplies that are inedically necessary for the treatment of diabetes and for which benefits shall be provided according to the provisions of this section.
- 5. a. Every group health insurance policy providing hospital or medical expense benefits that is delivered, issued, executed or renewed in this State pursuant to Chapter 27 of Title 17B of the New Jersey Statutes or approved for issuance or renewal in this State by the Commissioner of Insurance on or after the effective date of this act shall provide benefits to any person covered thereunder for expenses incurred for the following equipment and supplies for the treatment of diabetes, if recommended or prescribed by a physician 1 or nurse practitioner/clinical nurse specialist 1: blood glucose monitors and blood glucose monitors for the legally blind; 4 [data management systems;] 4 test strips for glucose monitors and visual reading and urine testing strips; insulin; injection aids; cartridges for the legally blind; syringes; insulin pumps and appurtenances thereto; insulin infusion devices; and oral agents for controlling blood sugar.
- b. Each group health insurance policy shall also provide benefits for expenses incurred for diabetes self-management education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes: upon diagnosis by a physician lor nurse practitioner/clinical nurse specialist of a significant change in the covered person's symptoms or conditions which necessitate changes in that person's self-management; and determination of a physician 1 or nurse practitioner/clinical nurse specialist 1 that reeducation or refresher education is necessary. <sup>2</sup>Diabetes self-management education shall be provided by <sup>3</sup>a dietitiza registered by a nationally recognized professional association of dietitians or 3 a health care professional recognized as a Certified Diabetes Educator by the American Association of Diabetes Educators for a registered pharmacist in the State qualified with regard to management education for diabetes by any institution recognized by the board of pharmacy of the State of New Jersey4,2
- c. The benefits required by this section shall be provided to the same extent as for any other sickness under the policy.
- d. This section shall apply to all group health insurance policies in which the insurer has reserved the right to change the premium.
- e. The provisions of this section shall not apply to a health benefits plan subject to the provisions of P.L.1992, c.161 (C.17B:27A-2 et seq.) or P.L.1992, c.162 (C.17B:27A-17 et seq.).
  - f. The Commissioner of Insurance may, in consultation with

the Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), promulgate and periodically update a list of additional diabetes equipment and related supplies that are medically necessary for the treatment of diabetes and for which benefits shall be provided according to the provisions of this section.

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6. a. Every <sup>1</sup>[enrollee agreement providing] contract for <sup>1</sup> health care services that is delivered, issued, executed or renewed in this State pursuant to P.L.1973, c.337 (C.26:2]-1 et seq.) or approved for issuance or renewal in this State on or after the effective date of this act shall provide health care services to any enrollee or other person covered thereunder for the following equipment and supplies for the treatment of diabetes, if recommended or prescribed by a <sup>1</sup>participating <sup>1</sup> physician <sup>1</sup>or <sup>4</sup>participating <sup>4</sup> nurse practitioner/clinical nurse specialist <sup>1</sup>: blood glucose monitors and blood glucose monitors for the legally blind; <sup>4</sup>[data management systems;] <sup>4</sup> test strips for glucose monitors and visual reading and urine testing strips; insulin; injection aids; cartridges for the legally blind; syringes; insulin pumps and appurtenances thereto; insulin infusion devices; and oral agents for controlling blood sugar.

b. Each <sup>1</sup>[enrollee agreement] contract<sup>1</sup> shall also provide health care services for diabetes self-management education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. Health care services provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes; upon diagnosis by a <sup>1</sup>participating <sup>1</sup> physician for 4participating4 nurse practitioner/clinical nurse specialist of a significant change in the enrollee's or other covered person's symptoms or conditions which necessitate changes in that person's self-management: and determination of a <sup>1</sup>participating <sup>1</sup> physician <sup>1</sup>or <sup>1</sup>participating <sup>1</sup> nurse practitioner/clinical nurse specialist1 that reeducation or refresher education is necessary. <sup>2</sup>Diabetes self-management education shall be provided by 3a 4participating dietitiza registered by a nationally recognized professional association of dietitians or a health care professional recognized as a Certified Diabetes Educator by the American Association of Diabetes Educators for, pursuant to section 6 of P.L.1993, c.378 (C.26:2[-4.7], a registered pharmacist in the State qualified with regard to management education for diabetes by any institution ercognized by the board of pharmacy of the State of New Jersey

c. The health care services required by this section shall be provided to the same extent as for any other sickness under the 4[enrollee agreement] contract<sup>4</sup>.

d. This section shall apply to all [lenrollee agreements] contracts in which the health maintenance organization has reserved the right to change the schedule of charges.

e. The provisions of this section shall not apply to a health benefits plan subject to the provisions of P.L.1992, c.161 (C.17B:27A-2 et seq.) or P.L.1992, c.162 (C.17B:27A-17 et seq.).

S1759 [4R]

f. The Commissioner of Insurance may, in consultation with the Commissioner of Health, pursuant to the "Administrative Procedure Act." P.L.1968, c.410 (C.52:14B-1 et seq.), promulgate and periodically update a list of additional diabetes equipment and related supplies that are medically necessary for the treatment of diabetes and for which benefits shall be provided according to the provisions of this section.

7. This act shall take effect immediately.

Requires health insurers to provide coverage for diabetes self-management education, equipment and supplies.

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**STATEMENT** 

6 This bill requires hospital service corporations, medical service corporations, health service corporations, commercial individual and group health insurers and health maintenance organizations to provide benefits for expenses incurred for the following equipment and supplies for the treatment of diabetes, if recommended or prescribed by a physician: blood glucose monitors and blood glucose monitors for the legally blind; data management systems; test strips for glucose monitors and visual reading and urine testing strips; insulin; injection aids; cartridges for the legally blind; syringes; insulin pumps and appurtenances thereto; insulin infusion devices; and oral agents for controlling blood sugar.

The bill also provides that health insurers shall provide benefits for expenses incurred for diabetes self-management education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. Benefits provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes, upon significant change in a covered person's symptoms or conditions which necessitate changes in that person's self-management, and upon the need for reeducation or refresher education.

Nationwide studies indicate that access to self-management education, equipment and supplies can result in cost savings for hospitalization and treatment of diabetes. Studies also indicate that inadequate reimbursement creates a major impediment to high quality care for persons with diabetes. Despite recent advances in the treatment and monitoring of this disease which allow a person with diabetes to live a near normal and productive life, many persons are often unable to comply with optimal programs of treatment because they cannot afford the cost of supplies, equipment, education or treatment. This bill would require reimbursement by health insurers for diabetes self-management education, equipment and supplies.

Requires health insurers to provide coverage for diabetes self-management education, equipment and supplies.

Amendments to SENATE, No. 1759 (2R) Page 7

f. The Commissioner of Insurance may, in consultation with the Commissioner of Health, pursuant to the "Administrative Procedure Act." P.L.1968, c.410 (C.52:14B-1 et seq.), promulgate and periodically update a list of additional diabetes equipment and related supplies that are medically necessary for the treatment of diabetes and for which benefits shall the provided according to the provisions of this section.

## **STATEMENT**

This bill requires that health insurers provide coverage for diabetes self management education and specifies that this education shall be provided by a health care professional recognized as a Certified Diabetes Educator by the American Association of Diabetes Educators.

The amendments add that this education may also be provided by a dietitian registered by a nationally recognized professional association of dietitians.

#### ASSEMBLY INSURANCE COMMITTEE

STATEMENT TO

[THIRD REPRINT] SENATE, No. 1759

with committee amendments

# STATE OF NEW JERSEY

DATED: NOVEMBER 20, 1995

The Assembly Insurance Committee reports favorably and with committee amendments, Senate, No. 1759 (3R).

As amended by the committee, this bill requires hospital, medical and health service corporations, commercial individual and group health insurers and health maintenance organizations to provide benefits for expenses incurred for the following equipment and supplies for the treatment of diabetes, if recommended or prescribed by a physician or nurse practitioner/clinical nurse specialist: blood glucose monitors and blood glucose monitors for the legally blind; test strips for glucose monitors and visual reading and urine testing strips; insulin; injection aids; cartridges for the legally blind; syringes; insulin pumps and appurtenances thereto; insulin infusion devices; and oral agents for controlling blood sugar.

The bill also requires health insurers to provide benefits for expenses incurred for diabetes self-management education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. Benefits provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes, upon significant change in a covered person's symptoms or conditions which necessitate changes in that person's self-management, and upon the need for reeducation or refresher education.

Nationwide studies indicate that access to self-management education, equipment and supplies can result in cost savings for hospitalization and treatment of diabetes. Studies also indicate that inadequate reimbursement creates a major impediment to high quality care for persons with diabetes. Despite recent advances in the treatment and monitoring of this disease which allow a person with diabetes to live a near normal and productive life, many persons are often unable to comply with optimal programs of treatment because they cannot afford the cost of supplies, equipment, education or treatment.

The committee amended the bill to delete the reference to data management systems as a reimburseable benefit and to provide that diabetes self-management education shall be provided by registered pharmacists in the State qualified with regard to management education for diabetes by any institution recognized by the board of pharmacy of the State of New Jersey in addition to dietitians registered by a nationally recognized professional association of dietitians and health care professionals recognized as Certified Diabetes Educators by the American Association of Diabetes Educators.

As released by the committee, this bill is identical to Assembly, No. 2878 (1R).

## SENATE HEALTH COMMITTEE

STATEMENT TO

SENATE, No. 1759

with committee amendments

## STATE OF NEW JERSEY

**DATED: MAY 8, 1995** 

The Senate Health Committee favorably reports Senate Bill No.1759 with committee amendments.

As amended by committee, this bill requires hospital, medical and health service corporations, commercial individual and group health insurers and health maintenance organizations to provide benefits for expenses incurred for the following equipment and supplies for the treatment of diabetes, if recommended or prescribed by a physician or nurse practitioner/clinical nurse specialist: blood glucose monitors and blood glucose monitors for the legally blind; data management systems; test strips for glucose monitors and visual reading and urine testing strips; insulin: injection aids: cartridges for the legally blind; syringes; insulin pumps and appurtenances thereto; insulin infusion devices; and oral agents for controlling blood sugar.

The bill also provides that health insurers shall provide benefits for expenses incurred for diabetes self-management education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. Benefits provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes, upon significant change in a covered person's symptoms or conditions which necessitate changes in that person's self-management, and upon the need for reeducation or refresher education.

Nationwide studies indicate that access to self-management education, equipment and supplies can result in cost savings for hospitalization and treatment of diabetes. Studies also indicate that inadequate reimbursement creates a major impediment to high quality care for persons with diabetes. Despite recent advances in the treatment and monitoring of this disease which allow a person with diabetes to live a near normal and productive life, many persons are often unable to comply with optimal programs of treatment because they cannot afford the cost of supplies, equipment, education or treatment.

The committee amended the bill to include nurse practitioners/clinical nurse specialists, in addition to physicians, as practitioners who can recommend or prescribe the services and equipment and supplies related to diabetes. Other amendments are technical and clarify, terminology with respect to health maintenance organizations.