#### LEGISLATIVE HISTORY CHECKLIST Compiled by the NJ State Law Library

NJSA: 17:48-1 et al

(Mam mogram -require health insurance coverage)

LAWS OF: 1991

CHAPTER: 279

Bill No:

A803

Sponsor(s):

Bush and others

Date Introduced: Pre-filed

Committee: Assembly: Insurance

Senate:

A mended during passage:

Yes

A mendments during passage

denoted by asterisks.

Date of Passage: Assembly:

June 20, 1990

Senate:

July 29, 1991

Date of Approval: September 16, 1991

Following statements are attached if available:

Sponsor statement:

Committee Statement: Assembly: Yes

Senate:

Νo

Fiscal Note:

Yes

Veto Message:

Nο

Message on signing:

Yes

Following were printed:

Reports:

No

Hearings:

Νo

KBG/SLJ

# [FIRST REPRINT] ASSEMBLY, No. 803

#### STATE OF NEW JERSEY

#### PRE-FILED FOR INTRODUCTION IN THE 1990 SESSION

By Assemblywoman BUSH, Assemblyman McGREEVEY, Assemblywoman Randall and Assemblyman Russo

AN ACT requiring health insurance benefits for mammograms and supplementing P.L.1938, c.366 (C.17:48-1 et seq.), P.L.1940, c.74 (C.17:48A-1 et seq.), P.L.1985, c.236 (C.17:48E-1 et seq.), chapter 26 of Title 17B of the New Jersey Statutes, chapter 27 of Title 17B of the New Jersey Statutes, and P.L.1973, c.337 (C.26:2J-1 et seq.).

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

- 1. No group or individual hospital service corporation contract providing hospital or medical expense benefits shall be delivered, issued, executed or renewed in this State, or approved for issuance or renewal in this State by the Commissioner of Insurance on or after the effective date of this act, unless the contract provides benefits to any subscriber or other person covered thereunder for expenses incurred in conducting <sup>1</sup>[a mammogram] one baseline mammogram examination for women who are at least 35 but less than 40 years of age; one mammogram examination every two years, or more frequently if recommended by a physician, for women who are at least 40 but less than 50 years of age; and one mammogram examination every year for women age 50 and over<sup>1</sup>. These benefits shall be provided to the same extent as for any other sickness under the contract.
- 2. No group or individual medical service corporation contract providing hospital or medical expense benefits shall be delivered, issued, executed or renewed in this State, or approved for issuance or renewal in this State by the Commissioner of Insurance on or after the effective date of this act, unless the contract provides benefits to any subscriber or other person covered thereunder for expenses incurred in conducting <sup>1</sup>[a mammogram] one baseline mammogram examination for women who are at least 35 but less than 40 years of age; one mammogram examination every two years, or more frequently if recommended by a physician, for women who are at least 40 but less than 50 years of age; and one mammogram examination every year for women age 50 and over <sup>1</sup>. These benefits shall be provided to the same extent as for any other sickness under the contract.

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

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- 3. No group or individual health service corporation contract providing hospital or medical expense benefits shall be delivered, issued, executed or renewed in this State, or approved for issuance or renewal in this State by the Commissioner of Insurance on or after the effective date of this act, unless the contract provides benefits to any subscriber or other person covered thereunder for expenses incurred in conducting <sup>1</sup>[a mammogram] one baseline mammogram examination for women who are at least 35 but less than 40 years of age; one mammogram examination every two years, or more frequently if recommended by a physician, for women who are at least 40 but less than 50 years of age; and one mammogram examination every year for women age 50 and over 1. These benefits shall be provided to the same extent as for any other sickness under the contract.
- 4. No individual health insurance policy providing hospital or medical expense benefits shall be delivered, issued, executed or renewed in this State, or approved for issuance or renewal in this State by the Commissioner of Insurance on or after the effective date of this act, unless the policy provides benefits to any named insured or other person covered thereunder for expenses incurred in conducting <sup>1</sup>[a mammogram] one baseline mammogram examination for women who are at least 35 but less than 40 years of age; one mammogram examination every two years, or more frequently if recommended by a physician, for women who are at least 40 but less than 50 years of age; and one mammogram examination every year for women age 50 and over<sup>1</sup>. These benefits shall be provided to the same extent as for any other sickness under the policy.
- 5. No group health insurance policy providing hospital or medical expense benefits shall be delivered, issued, executed or renewed in this State, or approved for issuance or renewal in this State by the Commissioner of Insurance on or after the effective date of this act, unless the policy provides benefits to any named insured or other person covered thereunder for expenses incurred in conducting <sup>1</sup>[a mammogram] one baseline mammogram examination for women who are at least 35 but less than 40 years of age; one mammogram examination every two years, or more frequently if recommended by a physician, for women who are at least 40 but less than 50 years of age; and one mammogram examination every year for women age 50 and over<sup>1</sup>. These benefits shall be provided to the same extent as for any other sickness under the policy.
- 6. Notwithstanding any provision of law to the contrary, a certificate of authority to establish and operate a health maintenance organization in this State shall not be issued or continued by the Commissioner of Health on or after the effective date of this act unless the health maintenance organization provides health care services to any enrollee for the

### A803 [1R]

conduct	of	<sup>1</sup> [a	mamm	ogram]	one	baseli	ne	mamı	mogram
examinat	ion f	or wo	men wh	o are at	least	35 but	less	than 4	40 years
of age; o	ne m	ammo	gram e	xaminat	ion ev	ery tw	о ує	ears, c	or more
frequentl	y if	recom	mended	by a pl	nysiciar	ı, for v	wom	en wh	o are at
least 40	but	less t	han <u>50</u>	years (	of age	and	one	mamı	mogram
examinat	ion (	every	year f	or wom	en age	: 50 a	nd o	<u>over</u> 1.	These
health ca	are s	ervice	s shall	be provi	ded to	the sa	me	exten	t as for
any other	sick	ness.							
7. This	s act	shall t	ake eff	ect on t	he 90th	day a	fter	enact	ment.

#### **INSURANCE**

Requires health insurers to pay for mammograms.

insured or other person covered thereunder for expenses incurred in conducting a mammogram. These benefits shall be provided to the same extent as for any other sickness under the policy.

- 5. No group health insurance policy providing hospital or medical expense benefits shall be delivered, issued, executed or renewed in this State, or approved for issuance or renewal in this State by the Commissioner of Insurance on or after the effective date of this act, unless the policy provides benefits to any named insured or other person covered thereunder for expenses incurred in conducting a mammogram. These benefits shall be provided to the same extent as for any other sickness under the policy.
- 6. Notwithstanding any provision of law to the contrary, a certificate of authority to establish and operate a health maintenance organization in this State shall not be issued or continued by the Commissioner of Health on or after the effective date of this act unless the health maintenance organization provides health care services to any enrollee for the conduct of a mammogram. These health care services shall be provided to the same extent as for any other sickness.
  - 7. This act shall take effect on the 90th day after enactment.

#### **STATEMENT**

 This bill requires hospital service corporations (Blue Cross), medical service corporations (Blue Shield), health service corporations (Blue Cross/Blue Shield), commercial insurers and health maintenance organizations to provide benefits for the conduct of mammograms. The bill is designed to encourage women to take advantage of mammograms which are capable of detecting breast cancer in its early stages.

#### **INSURANCE**

Requires health insurers to pay for mammograms.

#### ASSEMBLY INSURANCE COMMITTEE

STATEMENT TO

## ASSEMBLY, No. 803

with Assembly committee amendments

## STATE OF NEW JERSEY

DATED: SEPTEMBER 10, 1990

The Assembly Insurance Committee reports favorably Assembly Bill No. 803 with committee amendments.

This bill requires hospital service corporations (Blue Cross), medical service corporations (Blue Shield), health service corporations (Blue Cross/Blue Shield), commercial insurers and health maintenance organizations to provide benefits for the conduct of mammograms. The bill is designed to encourage women to take advantage of mammograms which are capable of detecting breast cancer in its early stages.

The bill was amended to include the schedule for coverage that is suggested by the American Cancer Society guidelines for asymptomatic women.

This bill was pre-filed for introduction in the 1990 session pending technical review. As reported the bill includes the changes required by technical review which has been performed.

#### LEGISLATIVE FISCAL ESTIMATE TO

# [FIRST REPRINT] ASSEMBLY, No. 803

## STATE OF NEW JERSEY

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DATED: January 7, 1991

Assembly Bill No. 803 (1R) of 1990 would require hospital service corporations, medical service corporations, health service corporations, commercial insurers and health maintenance organizations to provide health benefits for the conduct of mammograms. Under the provisions of the bill, benefits will be provided for conducting the following examinations: one baseline mammogram examination for women who are at least 35 but less than 40 years of age; one mammogram examination every two years, or more frequently if recommended by a physician, for women who are at least 40 but less than 50 years of age; and one mammogram examination every year for women age 50 and over.

According to the Division of Pensions within the Department of the Treasury, enactment of this legislation will have no fiscal impact on State health benefits because it does not amend the State health benefits statutes and, therefore, the State would not be required to implement the bill's provisions in its health benefits program.

The Office of Legislative Services notes, however, that the State Health Benefits Commission has, in the past, implemented benefit policies resulting from enacted legislation that did not amend the State health benefits statutes. Furthermore, although the bill does not specifically require the State to provide such coverage, the carriers that have contracted to provide State health benefits would be subject to the bill and therefore would be required to provide benefits for the conduct of mammograms according to the terms of the bill. The Division of Pensions has not provided any information as to potential increases in State health benefit costs associated with such an implementation. OLS notes, however, that the State Traditional Benefit Plan does not cover preventative examinations of this nature. According to the Prudential Insurance Company, only diagnostic examinations are currently covered. As a result, the enactment of this bill could possibly result in an increase in the cost of the State health benefits program. It is very difficult, however, to determine the number of women who would have these examinations.

This legislative fiscal estimate has been produced by the Office of Legislative Services due to the failure of the Executive Branch to respond to our request for a fiscal note.

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

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## OFFICE OF THE GOVERNOR **NEWS RELEASE**

**CN-001** 

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Release: MONDAY

SEPT. 16, 1991

Gov. Florio Signs Measure to Help Fight Breast Cancer;

Requires Health Insurers to Cover Cost of Early **Detection Test** 

NORTH BRUNSWICK -- In what is hoped will be a further encouragement for women to be tested for breast cancer, Gov. Jim Florio today signed into law a measure that requires health insurers to cover the costs of mammograms.

"This is a day of great hope," Gov. Florio said at a bill-signing ceremony at the offices of the American Cancer Society. "We are commiting ourselves to the health of the women of this state."

"There's a lot we don't know about breast cancer. But there's one thing we do know: mammograms save lives."

Mammograms can find tumors years before they are detectable to the touch or the naked eye. That valuable time can make the difference between life and death. About 6,800 women will be diagnosed with breast cancer this year in New Jersey.

The legislation (A-803/S-2183) was sponsored by Assembly members Stephanie Bush and James McGreevey, and Sen. Henry McNamara. It requires hospital and medical service corporations, commercial insurers and health maintenance organizations (HMOs) to provide coverage for mammograms. Benefits will be provided for:

• Conducting one exam for women between 35 and 40 years old

(over)

- One exam every two years for women between 40-49, or more frequently if recommended by a physician
  - Annual exams for women 50 or older

Some 1,700 women in New Jersey die each year from breast cancer. The centers for Disease Control have cited New Jersey as having the third highest mortality rate in the nation from this disease. The American Cancer Society says that 91 percent of women diagnosed with localized breast cancer are alive five years after the diagnosis.

Mammograms cost in the area of \$75 to \$250. "No child should be robbed of his or her mother for such a paltry sum," Gov. Florio said.

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