178:27-30 ET AL.

LEGISLATIVE HISTORY CHECKLIST

NJSA17B:27-30 et al.			
Laws of <u>1976</u> Chapter _	101 (S11	720CR-1974 W/C)	
Bill No			
Sponsor(s) Hughes, Horn & Man	rtindell		
Date Introduced Pre-filed	PV-Ta-Alvinor	_	
Committee: Assembly Commerce	, Banking	& Insurance	
Senate Labor, Inc	dustry & P	rofessions	
Amended during passage	Yڏ s	No	
Date of passage: Assembly Jun	ne 28, 197	<u>6</u>	
Senate Apri	il 26, 197	5	5 7
Date of approvalOct. 7, 1976	6	.	50
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Sponsor statement	Yxe s	No	S management
Committee Statement: Assembly	Yes	Mo	<u> </u>
Senate	Yes	No	
Fiscal Note	Yxe s	llo	Ĕ
Veto message	Yxe s	Йo	
Message on signing	Yes	[No	
Following were printed:			
Reports	YXe.s	No	
Moanings	Yake	No	•

CHAPTER 101 LAWS OF N. J. 19.76 APPROVED 10-7-76

SENATE, No. 930

STATE OF NEW JERSEY

PRE-FILED FOR INTRODUCTION IN THE 1976 SESSION

By Senators HUGHES, HORN and MARTINDELL

An Act concerning insurance relating to dependent coverages under group health and blanket insurance and amending N. J. S. 17B:27-30, P. L. 1964, c. 104 (C. 17:48-6.1), and P. L. 1964, c. 105 (C. 17:48A-7.1).

- 1 Be it enacted by the Senate and General Assembly of the State
- 2 of New Jersey:
- 1 1. N. J. S. 17B:27-30 is amended to read as follows:
- 2 17B:27-30. Benefits of group health insurance, except benefits
- 3 for loss of time on account of disability, may be provided for one or
- 4 more members of the families or one or more dependents of persons
- 5 who may be insured under a group policy referred to in sections
- 6 17B:27-27, 17B:27-28 or 17B:27-29. Any group health insurance
- 7 policy which contains provisions for the payment by the insurer
- 8 of benefits for expenses incurred on account of hospital, nursing,
- 9 medical, or surgical services for members of the family or depen-
- 10 dents of a person in the insured group [may provide for the con-
- 11 tinuation of such benefit provisions, or any part or parts thereof,
- 12 after must, subject to payment of the appropriate premium,
- 13 permit such family members or dependents to have coverage con-
- 14 tinued for at least 180 days after the death of the person in the
- 15 insured group, subject to the policy provision as to termination of
- 16 coverage with respect to family members or dependents for reasons
- 17 other than the death of the person in the insured group.
- All group health insurance policies which provide coverage for a
- 19 family member or dependent of an insured on an expense incurred
- 20 basis shall also provide that the benefits applicable for children
- 21 shall be payable with respect to a newly-born child of that insured
- 22 from the moment of birth. The coverage for newly-born children
- 23 shall consist of coverage of injury or sickness including the nec-

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

essary care and treatment of medically diagnosed congenital defects and birth abnormalities. If payment of a specific premium is required to provide coverage for a child, the policy may require that notification of birth of a newly-born child and payment of the required premium must be furnished to the insurer within 31 days after the date of birth in order to have the coverage continue beyond such 31-day period.

31 All group health insurance policies which provide coverage on 32 an expense incurred basis for the insured but do not provide cover-33 age for a family member or dependent of the insured on an expense incurred basis, except such group policies as provide no dependent 34 35-36 coverage whatsoever for the insured's class, shall nevertheless provide for coverage of newborn children of the insured which 38 shall commence with the moment of birth of each child and shall 39 consist of coverage of injury or sickness including the necessary 40 care and treatment of medically diagnosed congenital defects and 41 birth abnormalities, provided application and payment of the 42 required premium are made to the insurer to include in said policy coverage for a newbly-born child as described in the previous 43 44 paragraph of this section within 31 days from the date of birth of a newborn child. 45

A policy under which coverage of a dependent of an employee 46 47 or other member of the insured group terminates at a specified age shall, with respect to an unmarried child covered by the policy 48 prior to the attainment of age 19, who is incapable of self-sustain-49ing employment by reason of mental retardation or physical handi-50 cap and who became so incapable prior to attainment of age 19 and 51 52who is chiefly dependent upon such employee or member for sup-53 port and maintenance, not so terminate while the insurance of the employee or member remains in force and the dependent remains 54in such condition, if the insured employee or member has within 55 31 days of such dependent's attainment of the termination age 56 57-58 submitted proof of such dependent's incapacity as described herein. The foregoing provision of this paragraph shall not require 59 an insurer to insure a dependent who is a mentally retarded or 60 physically handicapped child of an employee or other member of 6162the insured group where such dependent does not satisfy the conditions of the group policy as to any requirements for evidence of 63 insurability or other provisions as may be stated in the group 64 policy required for coverage thereunder to take effect. In any 65 66 such case the terms of the policy shall apply with regard to the coverage or exclusion from coverage of such dependent.

- 2. Section 2 of P. L. 1964, c. 104 (C. 17:48-6.1) is amended to 2 read as follows:
- 2. A hospital service corporation may issue to a policyholder a group contract, covering at least 10 employees or members at the date of issue, if it conforms to the following description:
- 6 (a) A contract issued to an employer or to the trustees of a fund
 7 established by one or more employers, or issued to a labor union,
 8 or issued to an association formed for purposes other than obtain9 ing such contract, or issued to the trustees of a fund established
 10 by one or more labor unions, or by one or more employers and one
 11 or more labor unions, covering employees and members of associa12 tions or labor unions.
- 13 (b) A contract issued to cover any other group which the Com-14 missioner of Insurance determines may be covered in accordance 15 with sound underwriting principles.
- Benefits may be provided for one or more members of the families or one or more dependents of persons who may be covered under a group contract referred to in (a) or (b) above.
- 19 Family type contracts shall provide that the services applicable 20for children shall be payable with respect to a newly-born child 21of the subscriber, or his or her spouse from the moment of birth. 22The services for newly-born children shall consist of coverage of 23injury or sickness including the necessary care and treatment of 24medically diagnosed congenital defects and abnormalities. If a 25subscription payment is required to provide services for a child, 26 the contract may require that notification of birth of a newly-born 27child and the required payment must be furnished to the service 28corporation within 31 days after the date of birth in order to have 29 the coverage continue beyond such 31-day period. Group contracts 30 which provide for services to the subscriber but not to family members or dependents of that subscriber, other than contracts 31 32which provide no dependent coverage whatsoever for the subscriber's class, shall also provide services to newly-born children of 33 the subscriber which shall commence with the moment of birth of 34 35 each child and shall consist of coverage of injury or sickness including the necessary care and treatment of medically diagnosed con-36genital defects and abnormalities, provided that application there-37 for and payment of the required subscription amount are made to 38 include in said contract the coverage described in the preceding 39 paragraph of this section within 31 days from the date of birth of 40 41 a newborn child.

42 A contract under which coverage of such a dependent terminates **4**3 at a specified age shall, with respect to an unmarried child, covered by the contract prior to attainment of age 19, who is incapable of 4445self-sustaining employment by reason of mental retardation or physical handicap and who became so incapable prior to attainment 46of age 19 and who is chiefly dependent upon the covered employee 47or member for support and maintenance, not so terminate while 48 **4**9 the coverage of the employee or member remains in force and the dependent remains in such conditions, if the employee or member 50 has within 31 days of such dependent's attainment of the termina-51 tion age submitted proof of such dependent's incapacity as de-52 scribed herein. The foregoing provisions of this paragraph shall 53 not apply retrospectively or prospectively to require a hospital 54service corporation to insure as a covered dependent any mentally 55 retarded or physically handicapped child of the applicant where 56 the contract is underwritten on evidence of insurability based on 57 health factors required to be set forth in the application. In such 58 cases any contract heretofore or hereafter issued may specifically 59 exclude such mentally retarded or physically handicapped child 60 from coverage. 61

Any group contract which contains provisions for the payment by the insurer of benefits for members of the family or dependents of a person in the insured group shall provide that, subject to payment of the appropriate premium, such family members or dependents be permitted to have coverage continued for at least 180 days after the death of the person in the insured group.

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The contract may provide that the term "employees" shall 68 include as employees of a single employer the employees of one 69 or more subsidiary corporations and the employees, individual pro-70 prietors and partners of affiliated corporations, proprietorships 71and partnerships if the business of the employer and such corpora-72tions, proprietorships or partnerships is under common control 73 74 through stock ownership, contract or otherwise. The contract may provide that the term "employees" shall include the individual 75 proprietor or partners of an individual proprietorship or a part-76 nership. The contract may provide that the term "employees" 77 shall include retired employees. A contract issued to trustees may 7879 provide that the term "employees" shall include the trustees or their employees, or both, if their duties are principally connected 80 with such trusteeship. A contract issued to the trustees of a fund 81 established by the members of an association of employers may 82 provide that the term "employees" shall include the employees of 83 the association. 84

- 3. Section 1 of P. L. 1964, c. 105 (C. 17:48A-7.1) is amended to 2 read as follows:
- 1. A medical service corporation may issue to a policyholder 4 a group contract, covering at least 10 employees or members at 5 the date of issue, if it conforms to the following description:
- 6 (a) A contract issued to an employer or to the trustees of a fund
 7 established by one or more employers, or issued to a labor union,
 8 or issued to an association formed for purposes other than obtain9 ing such contract, or issued to the trustees of a fund established by
 10 one or more labor unions or by one or more employers and one or
 11 more labor unions, covering employees and members of associations
 12 or labor unions.
- 13 (b) A contract issued to cover any other group which the Com-14 missioner of Insurance (hereinafter called the commissioner) 15 determines may be covered in accordance with sound underwriting 16 principles.
- Benefits may be provided for one or more members of the families or one or more dependents of persons who may be covered under a group contract referred to in (a) or (b) above.
- Family type contracts shall provide that the services applicable 20 for children shall be payable with respect to a newly-born child of 21 the subscriber, or his or her spouse from the moment of birth. The 22 services for newly-born children shall consist of coverage of injury 23or sickness including the necessary care and treatment of medically 24 diagnosed congenital defects and abrnormalities. If a subscription 25 payment is required to provide services for a child, the contract 26 may require that notification of birth of a newly-born child and the 27required payment must be furnished to the service corporation 28 within 31 days after the date of birth in order to have the coverage 29 continue beyond such 31-day period. 30
- Group contracts which provide for services to the subscriber 31 but not to family members or dependents of that subscriber, other 32 than contracts which provide no dependent coverage whatsoever 33 for the subscriber's class, shall also provide services to newly-born 34 children of the subscriber which shall commence with the moment 35 of birth of each child and shall consist of coverage of injury or 36 sickness including the necessary care and treatment of medically 37 diagnosed congenital defects and abnormalities, provided that 38 application therefor and payment of the required subscription 39 amount are made to include in said contract the coverage described 40 in the preceding paragraph of this section within 31 days from the 41 date of birth of a newborn child. 42

A contract under which coverage of such a dependent terminates

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at a specified age shall, with respect to an unmarried child, covered 44 by the contract prior to attainment of age 19, who is incapable 45 of self-sustaining employment by reason of mental retardation or 46 physical handicap and who became so incapable prior to attainment 47of age 19 and who is chiefly dependent upon the covered employee 48 49 or member for support and maintenance, not so terminate while the coverage of the employee or member remains in force and the 50 dependent remains in such condition, if the employee or member 51 has within 31 days of such dependent's attainment of the termina-5253 tion age submitted proof of such dependent's incapacity as described herein. The foregoing provisions of this paragraph shall 54 apply retrospectively or prospectively to require a medical service 55 corporation to insure as a covered dependent any mentally retarded 56 or physically handicapped child of the applicant where the contract 57 is underwritten on evidence of insurability based on health factors 58 required to be set forth in the application. In such cases any con-59 tract heretofore or hereafter issued may specifically exclude such 60 mentally retarded or physically handicapped child from coverage. 61 Any group contract which contains provisions for the payment 62 by the insurer of benefits for members of the family or dependents 63 of a person in the insured group shall, subject to payment of the 64 appropriate premium, provide that such family members or depen-65 dents be permitted to have coverage continued for at least 180 days 66 after the death of the person in the insured group. 67 The contract may provide that the term "employees" shall in-68 clude as employees of a single employer the employees of one or 69 more subsidiary corporations and the employees, individual pro-70 prietors and partners of affiliated corporations, proprietorships 71and partnerships if the business of the employer and such corporations, proprietorships or partnerships is under common control 73 through stock ownership, contract or otherwise. The contract may 74provide that the term "employees" shall include the individual 75 proprietor or partners of an individual proprietorship or a partner-76 ship. The contract may provide that the term "employees" shall 77 include retired employees. A contract issued to trustees may pro-78 vide that the term "employees" shall include the trustees or their 79 employees, or both, if their duties are principally connected with 80 such trusteeship. A contract issued to the trustees of a fund 81 established by the members of an association of employers may 82 provide that the term "employees" shall include the employees 83 of the association. 84

^{4.} This act shall take effect immediately.

ASSEMBLY COMMERCE, BANKING AND INSURANCE COMMITTEE

STATEMENT TO

SENATE, No. 930

STATE OF NEW JERSEY

DATED: MAY 27, 1976

This bill provides for the continuation of group health insurance coverage for the family or dependents of a deceased group member for a period not less than 180 days after the death of a person in the insured group, subject to payment of appropriate premium. The legislation mandates the extension of such coverage by Blue Cross, Blue Shield, and by the commercial carriers. The Assembly Commerce, Banking, and Insurance Committee believes that this extended protection will provide security for the family during a critical time, and will afford them an opportunity to obtain their own health insurance program.

SENATE LABOR, INDUSTRY AND PROFESSIONS COMMITTEE

STATEMENT TO

SENATE, No. 930

STATE OF NEW JERSEY

DATED: MARCH 31, 1976

Senate Bill No. 930 amends the act regulating group life insurance (N. J. S. A. 17B:27-1 et seq.), the act regulating hospital service corporations (N. J. S. A. 17:48-1 et seq.) and the act regulating medical service corporations (N. J. S. A. 17:48A-1 et seq.) and provides that group policies issued pursuant thereto shall continue benefits for family members and dependents for at least 180 days after the death of a person in the insured group.

FOR INDEDIATE RELEASE

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BOB COMSTOCK

Governor Brendan Byrne today signed into law the following bills:

S-1072 - sponsored by Senator William V. Musto (D-Hudson), an amendment to the Waterfront and Airport Commission Act. New York enacted comparable legislation in 1975.

This bill provides that the Waterfront Commission may suspend a license or registration after the licensee or registrant has been charged with a crime equivalent to a felony in New York State or a high misdemeanor in New Jersey; and that such suspension will be terminated upon acquittal or dismissal of the criminal charge. The temporary suspension will be terminated if the commission fails to begin a hearing within 60 days of the suspension or to render a verdict within 30 days of the conclusion of testimony.

"This new law will expedite consideration of charges against waterfront employees," said Byrne. "In some cases, temporary suspensions have continued for more than a year, only to have the employee finally vindicated. That is clearly unfair. This law will assure it does not happen again."

S-545 - sponsored by Senator John J. Horn (D-Camden) provides senior citizens receiving Social Security old age pensions, Railroad Retirement Pensions or other government pensions with a five-day grace period after the first of each month for paying rent due on that date.

Under the bill, landlords may not declare a rent delinquency or imasse a late charge for payments made within the grace period. Violation of the new law by landlords is a disorderly person offense.

"This bill is designed to protect tennants whose social security of Carriers arrive a few days late as often pension checks arrive a few days late as often happens," said the Governors of "Senior citizens should not be forced to pay late charges simply because pension checks are sent out on a schedule that does not exactly coincide with their bent (over) due dates."

S-930 - sponsored by Senator Edward Hughes, (D-Burlington) requires commercial group health insurance policies, including Blue Cross and Blue Shield group contracts, which contain provisions for the payment of benefits to the family and dependents of a member, to continue the coverage for family members and dependents for at least 180 days after the death of the group member.

The continued coverage would be subject to the payment of the appropriate premium.

"This bill will provide the affected family and dependants with the security they need during a critical time, and give them a reasonable opportunity to obtain their own health insurance program," said the Governor.