

**ASSEMBLY, No. 1666**

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**STATE OF NEW JERSEY**

**213th LEGISLATURE**

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PRE-FILED FOR INTRODUCTION IN THE 2008 SESSION

**Sponsored by:**

**Assemblywoman ALISON LITTELL MCHOSE**

**District 24 (Sussex, Hunterdon and Morris)**

**Assemblyman GARY R. CHIUSANO**

**District 24 (Sussex, Hunterdon and Morris)**

**Co-Sponsored by:**

**Assemblyman Rumpf, Assemblywomen Stender and Angelini**

**SYNOPSIS**

Requires insurers and SHBP to provide coverage for expenses incurred in screening for ovarian cancer.

**CURRENT VERSION OF TEXT**

Introduced Pending Technical Review by Legislative Counsel



**(Sponsorship Updated As Of: 10/17/2008)**

1 AN ACT concerning insurance coverage for diagnosis of ovarian  
2 cancer and supplementing Titles 17, 26 and 52 of the Revised  
3 Statutes and Title 17B of the New Jersey Statutes.  
4

5 **BE IT ENACTED** by the Senate and General Assembly of the State  
6 of New Jersey:  
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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 medically necessary  
14 expenses incurred in screening for ovarian cancer for symptomatic  
15 women or women at risk of ovarian cancer, which coverage shall  
16 include, but is not limited to, an annual pelvic examination, an  
17 ultrasound and blood testing for cancer markers.

18 The benefits shall be provided to the same extent as for any other  
19 condition under the contract.

20 This section shall apply to those hospital service corporation  
21 contracts in which the hospital service corporation has reserved the  
22 right to change the premium.  
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24 2. A medical service corporation contract that provides hospital  
25 and medical expense benefits and is delivered, issued, executed or  
26 renewed in this State pursuant to P.L.1940, c.74 (C.17:48A-1 et  
27 seq.), or approved for issuance or renewal in this State by the  
28 Commissioner of Banking and Insurance, on or after the effective  
29 date of this act, shall provide coverage for medically necessary  
30 expenses incurred in screening for ovarian cancer for symptomatic  
31 women or women at risk of ovarian cancer, which coverage shall  
32 include, but is not limited to, an annual pelvic examination, an  
33 ultrasound and blood testing for cancer markers.

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

36 This section shall apply to those medical service corporation  
37 contracts in which the medical service corporation has reserved the  
38 right to change the premium.  
39

40 3. A health service corporation contract that provides hospital  
41 and medical expense benefits and is delivered, issued, executed or  
42 renewed in this State pursuant to P.L.1985, c.236 (C.17:48E-1 et  
43 seq.), or approved for issuance or renewal in this State by the  
44 Commissioner of Banking and Insurance, on or after the effective  
45 date of this act, shall provide coverage for medically necessary  
46 expenses incurred in screening for ovarian cancer for symptomatic  
47 women or women at risk of ovarian cancer, which coverage shall

1 include, but is not limited to, an annual pelvic examination, an  
2 ultrasound and blood testing for cancer markers.

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

5 This section shall apply to those health service corporation  
6 contracts in which the health service corporation has reserved the  
7 right to change the premium.

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9 4. An individual health insurance policy that provides hospital  
10 and medical expense benefits and is delivered, issued, executed or  
11 renewed in this State pursuant to chapter 26 of Title 17B of the New  
12 Jersey Statutes, or approved for issuance or renewal in this State by  
13 the Commissioner of Banking and Insurance, on or after the  
14 effective date of this act, shall provide coverage for medically  
15 necessary expenses incurred in screening for ovarian cancer for  
16 symptomatic women or women at risk of ovarian cancer, which  
17 coverage shall include, but is not limited to, an annual pelvic  
18 examination, an ultrasound and blood testing for cancer markers.

19 The benefits shall be provided to the same extent as for any other  
20 condition under the policy.

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

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24 5. A group health insurance policy that provides hospital and  
25 medical expense benefits and is delivered, issued, executed or  
26 renewed in this State pursuant to chapter 27 of Title 17B of the New  
27 Jersey Statutes, or approved for issuance or renewal in this State by  
28 the Commissioner of Banking and Insurance, on or after the  
29 effective date of this act, shall provide coverage for medically  
30 necessary expenses incurred in screening for ovarian cancer for  
31 symptomatic women or women at risk of ovarian cancer, which  
32 coverage shall include, but is not limited to, an annual pelvic  
33 examination, an ultrasound and blood testing for cancer markers.

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

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 medically necessary expenses incurred in screening for  
44 ovarian cancer for symptomatic women or women at risk of ovarian  
45 cancer, which coverage shall include, but is not limited to, an  
46 annual pelvic examination, an ultrasound and blood testing for  
47 cancer markers.

1       The benefits shall be provided to the same extent as for any other  
2 condition under the health benefits plan.

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

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6       7. A small employer health benefits plan that provides hospital  
7 and medical expense benefits and is delivered, issued, executed or  
8 renewed in this State pursuant to P.L.1992, c.162 (C.17B:27A-17 et  
9 seq.), on or after the effective date of this act, shall provide  
10 coverage for medically necessary expenses incurred in screening for  
11 ovarian cancer for symptomatic women or women at risk of ovarian  
12 cancer, which coverage shall include, but is not limited to, an  
13 annual pelvic examination, an ultrasound and blood testing for  
14 cancer markers.

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

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

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20       8. A health maintenance organization contract for health care  
21 services that is delivered, issued, executed or renewed in this State  
22 pursuant to P.L.1973, c.337 (C.26:2J-1 et seq.), or approved for  
23 issuance or renewal in this State by the Commissioner of Health and  
24 Senior Services, on or after the effective date of this act, shall  
25 provide health care services for medically necessary screening for  
26 ovarian cancer for symptomatic women or women at risk of ovarian  
27 cancer, which health care services shall include, but are not limited  
28 to, an annual pelvic examination, an ultrasound and blood testing  
29 for cancer markers.

30       The health care services shall be provided to the same extent as  
31 for any other condition under the contract.

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

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36       9. The State Health Benefits Commission shall ensure that every  
37 contract purchased by the commission, on or after the effective date  
38 of this act, that provides hospital or medical expense benefits shall  
39 provide coverage for medically necessary expenses incurred in  
40 screening for ovarian cancer for symptomatic women or women at  
41 risk of ovarian cancer, which coverage shall include, but is not  
42 limited to, an annual pelvic examination, an ultrasound and blood  
43 testing for cancer markers.

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45       10. This act shall take effect on the 180th day after enactment  
46 and shall apply to policies or contracts issued or renewed on or after  
47 the effective date.

STATEMENT

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This bill requires hospital, medical and health service corporations, commercial individual, small employer and larger group insurers, health maintenance organizations and the State Health Benefits Program to provide coverage for medically necessary expenses incurred in screening for ovarian cancer for symptomatic women or women at risk of ovarian cancer, which coverage shall include, but is not limited to, an annual pelvic examination, an ultrasound and blood testing for cancer markers, such as CA 125 levels.

Ovarian cancer is the fourth leading cause of cancer death in women in the United States. The provisions of this bill will ensure that women who may have symptoms of ovarian cancer, or are at risk of ovarian cancer because of a family history or other health conditions, are able to receive appropriate and necessary diagnostic screening tests for this deadly disease.