

ASSEMBLY, No. 2842

STATE OF NEW JERSEY 213th LEGISLATURE

INTRODUCED MAY 22, 2008

Sponsored by:

Assemblywoman PAMELA R. LAMPITT

District 6 (Camden)

Assemblywoman L. GRACE SPENCER

District 29 (Essex and Union)

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District 28 (Essex)

SYNOPSIS

Requires health insurers to provide benefits for magnetic resonance imaging for certain women at high risk for breast cancer.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 6/26/2009)

1 AN ACT health benefits coverage for mammography and magnetic
2 resonance imaging for breast cancer screening examinations and
3 amending various parts of the statutory law.

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

7
8 1. Section 1 of P.L.1991, c.279 (C.17:48-6g) is amended to
9 read as follows:

10 1. **[No group or individual]** a. A hospital service corporation
11 contract providing hospital or medical expense benefits **[shall be]**
12 delivered, issued, executed or renewed in this State 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, **[unless the**
15 contract provides benefits to any subscriber or other person] shall
16 provide benefits to any woman covered thereunder for expenses
17 incurred in conducting:

18 (1) one baseline mammogram examination for women who are
19 at least 35 but less than 40 years of age;

20 **[a]** (2) one mammogram examination and, if deemed medically
21 necessary by the woman's health care provider, a breast
22 examination by magnetic resonance imaging every year for women
23 age 40 and over; and**[,]**

24 (3) in the case of a woman who is under 40 years of age and **[has**
25 a family history of breast cancer or other] at high risk for breast
26 cancer **[risk factors]**, a mammogram examination and breast
27 examination by magnetic resonance imaging at such age and
28 intervals as deemed medically necessary by the woman's health care
29 provider.

30 b. As used in this section, "high risk for breast cancer" means
31 the woman:

32 (1) has a family history of breast cancer; or

33 (2) has a background, ethnicity or coexisting medical condition,
34 or uses medication, that the health care provider believes puts the
35 woman at increased risk for breast cancer.

36 c. These benefits shall be provided to the same extent as for
37 any other **[sickness]** medical condition under the contract.

38 d. The provisions of this section shall apply to all contracts in
39 which the hospital service corporation has reserved the right to
40 change the premium.

41 (cf: P.L. 2004, c.86, s.1)

42
43 2. Section 2 of P.L.1991, c.279 (C.17:48A-7f) is amended to
44 read as follows:

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.

1 2. **【No group or individual】** a. A medical service corporation
2 contract providing hospital or medical expense benefits **【shall be】**
3 delivered, issued, executed or renewed in this State or approved for
4 issuance or renewal in this State by the Commissioner of Banking
5 and Insurance, on or after the effective date of this act, **【unless the**
6 **contract provides benefits to any subscriber or other person】** shall
7 provide benefits to any woman covered thereunder for expenses
8 incurred in conducting:

9 (1) one baseline mammogram examination for women who are at
10 least 35 but less than 40 years of age;

11 **【a】** (2) one mammogram examination and, if deemed medically
12 necessary by the woman's health care provider, a breast
13 examination by magnetic resonance imaging every year for women
14 age 40 and over; and**【,】**

15 (3) in the case of a woman who is under 40 years of age and **【has**
16 **a family history of breast cancer or other】** at high risk for breast
17 cancer **【risk factors】**, a mammogram examination and breast
18 examination by magnetic resonance imaging at such age and
19 intervals as deemed medically necessary by the woman's health care
20 provider.

21 b. As used in this section, "high risk for breast cancer" means the
22 woman:

23 (1) has a family history of breast cancer; or

24 (2) has a background, ethnicity or coexisting medical condition,
25 or uses medication, that the health care provider believes puts the
26 woman at increased risk for breast cancer.

27 c. These benefits shall be provided to the same extent as for
28 any other **【sickness】** medical condition under the contract.

29 d. The provisions of this section shall apply to all contracts in
30 which the medical service corporation has reserved the right to
31 change the premium.

32 (cf: P.L.2004, c.86, s.2)

33
34 3. Section 3 of P.L.1991, c.279 (C.17:48E-35.4) is amended to
35 read as follows:

36 3. **【No group or individual】** a. A health service corporation
37 contract providing hospital or medical expense benefits **【shall be】** ,
38 delivered, issued, executed or renewed in this State or approved for
39 issuance or renewal in this State by the Commissioner of Banking
40 and Insurance, on or after the effective date of this act, **【unless the**
41 **contract provides benefits to any subscriber or other person】** shall
42 provide benefits to any woman covered thereunder for expenses
43 incurred in conducting:

44 (1) one baseline mammogram examination for women who are at
45 least 35 but less than 40 years of age;

1 **[a]** (2) one mammogram examination and, if deemed medically
2 necessary by the woman's health care provider, a breast
3 examination by magnetic resonance imaging every year for women
4 age 40 and over; and**[,]**

5 (3) in the case of a woman who is under 40 years of age and **[has**
6 **a family history of breast cancer or other]** at high risk for breast
7 cancer **[risk factors]**, a mammogram examination and breast
8 examination by magnetic resonance imaging at such age and
9 intervals as deemed medically necessary by the woman's health care
10 provider.

11 **b.** As used in this section, "high risk for breast cancer" means
12 the woman:

13 (1) has a family history of breast cancer; or

14 (2) has a background, ethnicity or coexisting medical condition,
15 or uses medication, that the health care provider believes puts the
16 woman at increased risk for breast cancer.

17 **c.** These benefits shall be provided to the same extent as for
18 any other **[sickness]** medical condition under the contract.

19 **d.** The provisions of this section shall apply to all contracts in
20 which the health service corporation has reserved the right to
21 change the premium.

22 (cf: P.L.2004, c.86, s.3)

23

24 4. Section 4 of P.L.1991, c.279 (C.17B:26-2.1e) is amended to
25 read as follows:

26 4. **[No]** a. An individual health insurance policy providing
27 hospital or medical expense benefits **[shall be]** delivered, issued,
28 executed or renewed in this State or approved for issuance or
29 renewal in this State by the Commissioner of Banking and
30 Insurance, on or after the effective date of this act, **[unless the**
31 **policy provides benefits to any subscriber or other person]** shall
32 provide benefits to any woman covered thereunder for expenses
33 incurred in conducting:

34 (1) one baseline mammogram examination for women who are at
35 least 35 but less than 40 years of age;

36 **[a]** (2) one mammogram examination and, if deemed medically
37 necessary by the woman's health care provider, a breast
38 examination by magnetic resonance imaging every year for women
39 age 40 and over; and**[,]**

40 (3) in the case of a woman who is under 40 years of age and **[has**
41 **a family history of breast cancer or other]** at high risk for breast
42 cancer **[risk factors]**, a mammogram examination and breast
43 examination by magnetic resonance imaging at such age and
44 intervals as deemed medically necessary by the woman's health care
45 provider.

1 **b.** As used in this section, “high risk for breast cancer” means
2 the woman:

3 (1) has a family history of breast cancer; or
4 (2) has a background, ethnicity or coexisting medical condition,
5 or uses medication, that the health care provider believes puts the
6 woman at increased risk for breast cancer.

7 **c.** These benefits shall be provided to the same extent as for
8 any other **[sickness]** medical condition under the policy.

9 **d.** The provisions of this section shall apply to all policies in
10 which the insurer has reserved the right to change the premium.

11 (cf: P.L.2004, c.86, s.4)

12
13 5. Section 5 of P.L.1991, c.279 (C.17B:27-46.1f) is amended to
14 read as follows:

15 5. **[No]** **a.** A group health insurance policy providing hospital
16 or medical expense benefits **[shall be]** delivered, issued, executed
17 or renewed in this State or approved for issuance or renewal in this
18 State by the Commissioner of Banking and Insurance, on or after
19 the effective date of this act, **[unless the policy provides benefits to**
20 **any subscriber or other person]** shall provide benefits to any woman
21 covered thereunder for expenses incurred in conducting:

22 (1) one baseline mammogram examination for women who are at
23 least 35 but less than 40 years of age;

24 **[a]** (2) one mammogram examination and, if deemed medically
25 necessary by the woman’s health care provider, a breast
26 examination by magnetic resonance imaging every year for women
27 age 40 and over; and**[,]**

28 (3) in the case of a woman who is under 40 years of age and **[has**
29 **a family history of breast cancer or other]** at high risk for breast
30 cancer [risk factors], a mammogram examination and breast
31 examination by magnetic resonance imaging at such age and
32 intervals as deemed medically necessary by the woman's health care
33 provider.

34 **b.** As used in this section, “high risk for breast cancer” means
35 the woman:

36 (1) has a family history of breast cancer; or
37 (2) has a background, ethnicity or coexisting medical condition,
38 or uses medication, that the health care provider believes puts the
39 woman at increased risk for breast cancer.

40 **c.** These benefits shall be provided to the same extent as for
41 any other **[sickness]** medical condition under the policy.

42 **d.** The provisions of this section shall apply to all policies in
43 which the insurer has reserved the right to change the premium.

44 (cf: P.L.2004, c.86, s.5)

45
46 6. Section 6 of P.L.1991, c.279 (C.26:2J-4.4) is amended to
47 read as follows:

1 6. a. Notwithstanding any provision of law to the contrary, a
2 certificate of authority to establish and operate a health maintenance
3 organization in this State shall not be issued or continued by the
4 Commissioner of Health and Senior Services on or after the
5 effective date of this act unless the health maintenance organization
6 provides health care services to any enrollee for the conduct of:

7 (1) one baseline mammogram examination for women who are at
8 least 35 but less than 40 years of age;

9 **[a]** (2) one mammogram examination and, if deemed medically
10 necessary by the woman's health care provider, a breast
11 examination by magnetic resonance imaging every year for women
12 age 40 and over; and[,]

13 (3) in the case of a woman who is under 40 years of age and **[has**
14 **a family history of breast cancer or other]** at high risk for breast
15 cancer [risk factors], a mammogram examination and breast
16 examination by magnetic resonance imaging at such age and
17 intervals as deemed medically necessary by the woman's health care
18 provider.

19 **b.** As used in this section, "high risk for breast cancer" means
20 the woman:

21 (1) has a family history of breast cancer; or

22 (2) has a background, ethnicity or coexisting medical condition,
23 or uses medication, that the health care provider believes puts the
24 woman at increased risk for breast cancer.

25 **c.** These health care services shall be provided to the same
26 extent as for any other **[sickness]** medical condition under the
27 enrollee agreement.

28 **d.** The provisions of this section shall apply to all enrollee
29 agreements in which the health maintenance organization has
30 reserved the right to change the schedule of charges.

31 (cf: P.L.2004, c.86, s.6)

32
33 7. Section 7 of P.L.2004, c.86 (C.17B:27A-7.10) is amended to
34 read as follows:

35 7. **[Every]** a. An individual health benefits plan that is
36 delivered, issued, executed or renewed in this State pursuant to
37 P.L.1992, c.161 (C.17B:27A-2 et seq.) or approved for issuance or
38 renewal in this State, on or after the effective date of this act, shall
39 provide benefits to any woman covered thereunder for expenses
40 incurred in conducting:

41 (1) one baseline mammogram examination for women who are at
42 least 35 but less than 40 years of age;

43 **[a]** (2) one mammogram examination and, if deemed medically
44 necessary by the woman's health care provider, a breast
45 examination by magnetic resonance imaging every year for women
46 age 40 and over; and[,]

1 (3) in the case of a woman who is under 40 years of age and [has
2 a family history of breast cancer or other] at high risk for breast
3 cancer [risk factors], a mammogram examination and breast
4 examination by magnetic resonance imaging at such age and
5 intervals as deemed medically necessary by the woman's health care
6 provider.

7 b. As used in this section, "high risk for breast cancer" means
8 the woman:

9 (1) has a family history of breast cancer; or

10 (2) has a background, ethnicity or coexisting medical condition,
11 or uses medication, that the health care provider believes puts the
12 woman at increased risk for breast cancer.

13 c. The benefits shall be provided to the same extent as for any
14 other medical condition under the health benefits plan.

15 d. The provisions of this section shall apply to all health
16 benefit plans in which the carrier has reserved the right to change
17 the premium.

18 (cf: P.L.2004, c.86, s.7)

19
20 8. Section 8 of P.L.2004, c.86 (C.17B:27A-19.13) is amended
21 to read as follows:

22 8. **[Every]** a. A small employer health benefits plan that is
23 delivered, issued, executed or renewed in this State pursuant to
24 P.L.1992, c.162 (C.17B:27A-17 et seq.) or approved for issuance or
25 renewal in this State, on or after the effective date of this act, shall
26 provide benefits to any woman covered thereunder for expenses
27 incurred in conducting:

28 (1) one baseline mammogram examination for women who are at
29 least 35 but less than 40 years of age;

30 **[a]** (2) one mammogram examination and, if deemed medically
31 necessary by the woman's health care provider, a breast
32 examination by magnetic resonance imaging every year for women
33 age 40 and over; and[,]

34 (3) in the case of a woman who is under 40 years of age and [has
35 a family history of breast cancer or other] at high risk for breast
36 cancer [risk factors], a mammogram examination and breast
37 examination by magnetic resonance imaging at such age and
38 intervals as deemed medically necessary by the woman's health care
39 provider.

40 b. As used in this section, "high risk for breast cancer" means
41 the woman:

42 (1) has a family history of breast cancer; or

43 (2) has a background, ethnicity or coexisting medical condition,
44 or uses medication, that the health care provider believes puts the
45 woman at increased risk for breast cancer.

46 c. The benefits shall be provided to the same extent as for any
47 other medical condition under the health benefits plan.

1 d. The provisions of this section shall apply to all health
2 benefit plans in which the carrier has reserved the right to change
3 the premium.

4 (cf: P.L.2004, c.86, s.8)

5

6 9. Section 9 of P.L.2004, c.86 (C.52:14-17.29i) is amended to
7 read as follows:

8 9. a. The State Health Benefits Commission shall provide
9 benefits to each ~~person~~ woman covered under the State Health
10 Benefits Program for expenses incurred in conducting:

11 (1) one baseline mammogram examination for women who are at
12 least 35 but less than 40 years of age;

13 [a] (2) one mammogram examination and, if deemed medically
14 necessary by the woman's health care provider, a breast
15 examination by magnetic resonance imaging every year for women
16 age 40 and over; and~~[,]~~

17 (3) in the case of a woman who is under 40 years of age and ~~has~~
18 a family history of breast cancer or other ~~at high risk for~~ breast
19 cancer ~~risk factors~~, a mammogram examination and breast
20 examination by magnetic resonance imaging at such age and
21 intervals as deemed medically necessary by the woman's health care
22 provider.

23 b. As used in this section, "high risk for breast cancer" means
24 the woman:

25 (1) has a family history of breast cancer; or

26 (2) has a background, ethnicity or coexisting medical condition,
27 or uses medication, that the health care provider believes puts the
28 woman at increased risk for breast cancer.

29 c. The benefits shall be provided to the same extent as for any
30 other medical condition under the contract.

31 (cf: P.L.2004, c.86, s.9)

32

33 10. This act shall take effect on the 90th day after enactment.

34

35

36

STATEMENT

37

38 This bill requires hospital, medical and health service
39 corporations, individual, small employer and large group
40 commercial health insurers, health maintenance organizations and
41 the State Health Benefits Program to provide benefits for breast
42 examination by magnetic resonance imaging (MRI) for women age
43 40 and over or who are considered to be at high risk for breast
44 cancer at any age, if a MRI is deemed medically necessary by their
45 health care provider. This coverage is in addition to the required
46 baseline and annual mammograms. Recent studies have indicated

- 1 that MRIs provide a valuable means to diagnose breast cancer that
- 2 have been missed in mammograms alone.