

**ASSEMBLY, No. 649**

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**STATE OF NEW JERSEY**

**212th LEGISLATURE**

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PRE-FILED FOR INTRODUCTION IN THE 2006 SESSION

**Sponsored by:**

**Assemblyman CHRISTOPHER J. CONNORS**

**District 9 (Atlantic, Burlington and Ocean)**

**Assemblyman BRIAN E. RUMPF**

**District 9 (Atlantic, Burlington and Ocean)**

**SYNOPSIS**

Requires health insurers to cover Lyme disease.

**CURRENT VERSION OF TEXT**

Introduced Pending Technical Review by Legislative Counsel



1 AN ACT requiring health insurance benefits for the treatment of  
2 Lyme disease and supplementing P.L.1938, c.366 (C.17:48-1 et  
3 seq.), P.L.1940, c.74 (C.17:48A-1 et seq.), P.L.1985, c.236  
4 (C.17:48E-1 et seq.), chapter 26 of Title 17B of the New Jersey  
5 Statutes, chapter 27 of Title 17B of the New Jersey Statutes, and  
6 P.L.1973, c.337 (C.26:2J-1 et seq.).  
7

8 **BE IT ENACTED** by the Senate and General Assembly of the State  
9 of New Jersey:  
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11 1. a. No group or individual hospital service corporation  
12 contract providing hospital or medical expense benefits shall be  
13 delivered, issued, executed or renewed in this State, or approved for  
14 issuance or renewal in this State by the Commissioner of Insurance  
15 on or after the effective date of this act, unless the contract provides  
16 benefits as provided by this section to persons covered thereunder  
17 for expenses incurred in the treatment of Lyme disease determined  
18 to be medically necessary by the covered person's physician after  
19 making a written evaluation of that person's symptoms, condition  
20 and response to treatment.

21 b. Treatment otherwise eligible for benefits pursuant to this  
22 section shall not be denied because such treatment may be  
23 characterized as experimental or investigational in nature.

24 c. The provisions of this section shall apply to all contracts in  
25 which the hospital service corporation has reserved the right to  
26 change the premium.  
27

28 2. a. No group or individual medical service corporation  
29 contract providing hospital or medical expense benefits shall be  
30 delivered, issued, executed or renewed in this State, or approved for  
31 issuance or renewal in this State by the Commissioner of Insurance  
32 on or after the effective date of this act, unless the contract provides  
33 benefits as provided by this section to persons covered thereunder  
34 for expenses incurred in the treatment of Lyme disease determined  
35 to be medically necessary by the covered person's physician after  
36 making a written evaluation of that person's symptoms, condition  
37 and response to treatment.

38 b. Treatment otherwise eligible for benefits pursuant to this  
39 section shall not be denied because such treatment may be  
40 characterized as experimental or investigational in nature.

41 c. The provisions of this section shall apply to all contracts in  
42 which the medical service corporation has reserved the right to  
43 change the premium.  
44

45 3. a. No group or individual health service corporation contract  
46 providing hospital or medical expense benefits shall be delivered,  
47 issued, executed or renewed in this State, or approved for issuance  
48 or renewal in this State by the Commissioner of Insurance on or

1 after the effective date of this act, unless the contract provides  
2 benefits as provided by this section to persons covered thereunder  
3 for expenses incurred in the treatment of Lyme disease determined  
4 to be medically necessary by the covered person's physician after  
5 making a written evaluation of that person's symptoms, condition  
6 and response to treatment.

7 b. Treatment otherwise eligible for benefits pursuant to this  
8 section shall not be denied because such treatment may be  
9 characterized as experimental or investigational in nature.

10 c. The provisions of this section shall apply to all contracts in  
11 which the health service corporation has reserved the right to  
12 change the premium.

13

14 4. a. No individual health insurance policy providing hospital or  
15 medical expense benefits shall be delivered, issued, executed or  
16 renewed in this State, or approved for issuance or renewal in this  
17 State by the Commissioner of Insurance on or after the effective  
18 date of this act, unless the policy provides benefits as provided by  
19 this section to persons covered thereunder for expenses incurred in  
20 the treatment of Lyme disease determined to be medically necessary  
21 by the covered person's physician after making a written evaluation  
22 of that person's symptoms, condition and response to treatment.

23 b. Treatment otherwise eligible for benefits pursuant to this  
24 section shall not be denied because such treatment may be  
25 characterized as experimental or investigational in nature.

26 c. The provisions of this section shall apply to all policies in  
27 which the insurer has reserved the right to change the premium.

28

29 5. a. No group health insurance policy providing hospital or  
30 medical expense benefits shall be delivered, issued, executed or  
31 renewed in this State, or approved for issuance or renewal in this  
32 State by the Commissioner of Insurance on or after the effective  
33 date of this act, unless the policy provides benefits as provided by  
34 this section to persons covered thereunder for expenses incurred in  
35 the treatment of Lyme disease determined to be medically necessary  
36 by the covered person's physician after making a written evaluation  
37 of that person's symptoms, condition and response to treatment.

38 b. Treatment otherwise eligible for benefits pursuant to this  
39 section shall not be denied because such treatment may be  
40 characterized as experimental or investigational in nature.

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

43

44 6. a. Notwithstanding any provision of law to the contrary, a  
45 certificate of authority to establish and operate a health maintenance  
46 organization in this State shall not be issued or continued by the  
47 Commissioner of Health on or after the effective date of this act  
48 unless the health maintenance organization provides health care

1 services to every enrollee for the treatment of Lyme Disease as  
2 provided by this section determined to be medically necessary by  
3 the enrollee's physician after making a written evaluation of the  
4 enrollee's symptoms, condition and response to treatment.

5 b. Health care services otherwise eligible for coverage pursuant  
6 to this section shall not be denied because such services may be  
7 characterized as experimental or investigational in nature.

8 c. The provisions of this section shall apply to all contracts for  
9 health care services by health maintenance organizations under  
10 which the right to change the schedule of charges for enrollee  
11 coverage is reserved.

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13 7. This act shall take effect on the 90th day after enactment.

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#### STATEMENT

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18 This bill requires hospital service corporations, medical service  
19 corporations, health service corporations, commercial insurers and  
20 health maintenance organizations to provide benefits for the  
21 treatment of Lyme disease determined to be medically necessary by  
22 the covered person's physician after making a written evaluation of  
23 that person's symptoms, condition and response to treatment.  
24 Treatment otherwise eligible for benefits pursuant to this bill could  
25 not be denied because such treatment may be characterized as  
26 experimental or investigational in nature.