

SENATE COMMITTEE SUBSTITUTE FOR
SENATE, No. 690

STATE OF NEW JERSEY
219th LEGISLATURE

ADOPTED MARCH 9, 2021

Sponsored by:

Senator M. TERESA RUIZ

District 29 (Essex)

Senator JOSEPH F. VITALE

District 19 (Middlesex)

Co-Sponsored by:

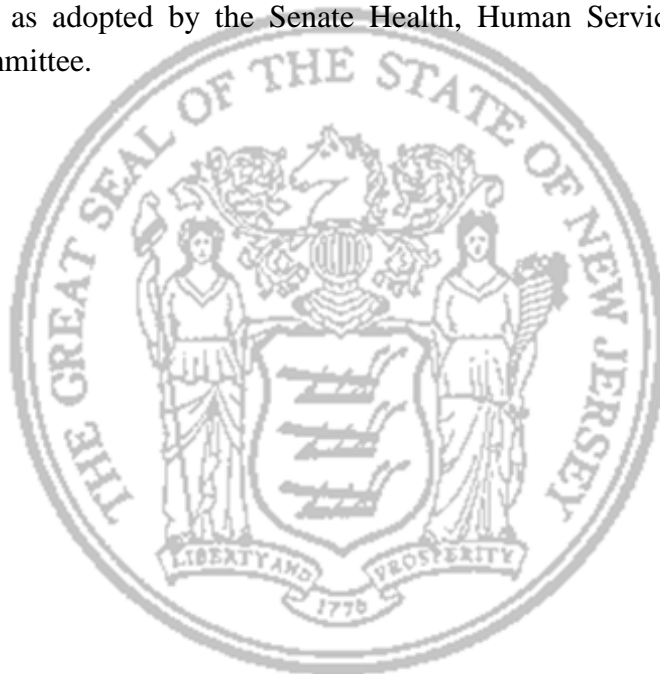
Senators Madden, Codey, Singer, Diegnan and Gopal

SYNOPSIS

Establish Statewide universal newborn home nurse visitation program in DCF.

CURRENT VERSION OF TEXT

Substitute as adopted by the Senate Health, Human Services and Senior Citizens Committee.



(Sponsorship Updated As Of: 5/6/2021)

1 **AN ACT** establishing a newborn home nurse visitation program and
2 supplementing various parts of statutory law.

3

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

6

7 1. The Legislature finds and declares that:

8 a. The weeks following birth are a critical period for the person
9 who has given birth and the infant, setting the stage for long-term
10 health and well-being;

11 b. During this period, the person who has given birth is adapting
12 to multiple physical, social, and psychological changes, while
13 simultaneously recovering from childbirth, adjusting to changing
14 hormones, and learning to feed and care for a newborn;

15 c. Like prenatal care, the postpartum health care visit that
16 typically occurs six weeks after childbirth is considered important
17 to a new parent's health; however, for people who have given birth,
18 the six-week postpartum visit punctuates a period devoid of formal
19 or informal support for a parent who has recently given birth;

20 d. Additionally, according to the American College of
21 Obstetricians and Gynecologists, as many as 40 percent of people
22 who have given birth do not attend a postpartum visit in the United
23 States;

24 e. During the time immediately following delivery, health care
25 providers are uniquely qualified to enable a person who has given
26 birth to access the clinical and social resources the person needs to
27 successfully navigate the transition from pregnancy to parenthood;

28 f. Research also indicates that postpartum education and care
29 lead to lower rates of morbidity and mortality in persons who have
30 given birth, as many of the risk factors for post-delivery
31 complications, such as hemorrhaging or a pulmonary embolism,
32 may not be identifiable before a person who has given birth is
33 discharged following the birth;

34 g. Such data demonstrate the wide ranging benefits to persons
35 who have given birth, children, and families when a person who has
36 given birth and the infant receive support from the medical
37 community within days after delivering a child; and

38 h. It is, therefore, in the public interest for the Legislature to
39 remove barriers regarding access to postpartum care and to establish
40 the infrastructure for people who have given birth in New Jersey to
41 receive one cost-free home nurse visit in which a registered nurse
42 provides the necessary physical, social, and emotional support
43 critical to recovery following childbirth.

44

45 2. a. The Department of Children and Families shall establish a
46 Statewide voluntary universal newborn home nurse visitation
47 program to provide home visitation services to parents of a newborn

1 infant. The purpose of the program shall be to support healthy child
2 development and strengthen families.

3 b. (1) In establishing the newborn home nurse visitation
4 program, the department shall:

5 (a) appoint an advisory group of stakeholders, which shall
6 organize no later than 30 days after the date of enactment of P.L. ,
7 c. (C.) (pending before the Legislature as this bill and
8 which shall include at least one representative of each of the
9 following entities: an insurance carrier that offers health benefit
10 plans in the State; a hospital; a birthing facility; a local public
11 health authority; a maternal child health consortium; an early
12 childhood home visitation program; a home health agency; a
13 federally qualified health center; a community-based organization;
14 and a social service agency; and

15 (b) consult, coordinate, and collaborate with the advisory group
16 established pursuant to (a) of this paragraph in the development of
17 the program;

18 (2) have eight months after the date of enactment of P.L. , c.
19 (C.) (pending before the Legislature as this bill) to establish
20 the program throughout the State;

21 (3) in consultation with the Departments of Banking and
22 Insurance and Human Services, establish criteria for the coverage of
23 services provided under the newborn home nurse visitation program
24 by insurance carriers offering a health benefits plan in the State; and

25 (4) ensure that the program meets the needs of the residents in
26 the communities in which the program operates.

27 c. The newborn home nurse visitation program shall:

28 (1) be voluntary and carry no negative consequences for parents
29 with a newborn infant who decline to participate in the program
30 when applying for other services available to pregnant persons and
31 when applying for other services available to all parents of newborn
32 infants;

33 (2) offer home nurse visitation services in every community in
34 the State, and to all parents of a newborn infant residing in the
35 community in which the program operates, including resource
36 family parents, adoptive parents, and parents experiencing a
37 stillbirth;

38 (3) include one home nurse visit in a parent's home within two
39 weeks after the birth of an infant;

40 (4) require that a home nurse visit be conducted by a licensed
41 registered nurse or an advanced practice nurse;

42 (5) improve State outcomes in the areas of maternal health,
43 infant health and development, and parenting skills;

44 (6) include an evidence-based evaluation of the physical,
45 emotional, and social factors affecting a parent and the parent's
46 newborn infant, including, but not limited to, a health and wellness
47 check of the newborn and an assessment of the physical and mental
48 health of a person who has given birth;

1 (7) provide support services to parents of a newborn infant,
2 including, but not limited to, breastfeeding education and assistance
3 to a person who has recently given birth in recognizing the
4 symptoms of, and coping with, perinatal mood disorder;

5 (8) coordinate with each hospital and birthing facility in the
6 State to ensure that a person who has given birth is advised of the
7 benefits of receiving a home nurse visit within two weeks after the
8 birth an infant, and to ensure that the hospital or birthing facility
9 attempts to schedule a home nurse visit prior to the person's
10 discharge from the hospital or facility; and

11 (9) provide information on, and referrals to, services that
12 address the specific needs of parents of a newborn infant, including
13 linking a person who has given birth and the person's infant to a
14 central intake agency for referrals to community resources, support
15 services, community-based organizations or social service agency
16 programs available to persons who have given birth and their
17 infants, and medically necessary follow-up healthcare.

18 d. Nothing in this section shall be construed to require parents of
19 a newborn infant to participate in the newborn home nurse
20 visitation program.

21
22 3. The Department of Children and Families, in consultation
23 with the Department of Health, shall prepare a resource guide that
24 provides information on the newborn home nurse visitation program
25 established pursuant to section 2 of P.L. , c. (C.) (pending
26 before the Legislature as this bill) and the services available to
27 pregnant persons, persons who have recently given birth, and
28 parents of a newborn infant born in this State. The resource guide
29 shall be distributed at the time parents of a newborn infant are
30 informed of the newborn home nurse visitation program and of their
31 right to schedule a home nurse visit.

32
33 4. a. The Department of Children and Families shall collect and
34 analyze data about the newborn home nurse visitation program
35 established pursuant to P.L. , c. (C.) (pending before the
36 Legislature as this act). The data shall be used to evaluate and
37 measure the effectiveness of the program in achieving its purpose of
38 supporting healthy child development and strengthening families.

39 b. The department shall work with other State departments and
40 agencies, health insurance carriers that offer health benefit plans in
41 the State, hospitals and birthing facilities, local public health
42 authorities, maternal child health consortia, early childhood home
43 visitation programs, community-based organizations, and social
44 service providers, to develop protocols concerning the timely
45 sharing of data collected pursuant to subsection a. of this section,
46 including the sharing of data with the primary care providers of
47 parents participating in the newborn home nurse visitation program.

1 5. a. No group or individual hospital 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 covered
7 thereunder for expenses incurred for services provided under the
8 newborn home nurse visitation program established pursuant to
9 section 2 of P.L. , c. (C.) (pending before the Legislature
10 as this bill). The contract shall:

11 (1) provide coverage for the services provided by the newborn
12 home nurse visitation program established pursuant to section 2 of
13 P.L. , c. (C.) (pending before the Legislature as this bill);

14 (2) notify a covered person of the services provided by the
15 newborn home nurse visitation program, upon application by the
16 covered person for coverage of a newborn infant;

17 (3) ensure that the contract does not contain any provision that
18 requires a covered person to receive the services provided by the
19 newborn home nurse visitation program as a condition of coverage,
20 or that denies or limits benefits to the covered person if that person
21 declines the services provided under the program; and

22 (4) have the discretion to determine how best to reimburse for
23 the expenses incurred for services provided under the newborn
24 home nurse visitation program, including, but not limited to,
25 utilizing:

26 (i) a value-based payment methodology;

27 (ii) an invoice claim process;

28 (iii) a capitated payment arrangement;

29 (iv) a payment methodology that takes into account the need for
30 an agency or organization providing services under the program to
31 expand its capacity to provide services and address health
32 disparities; or

33 (v) any other payment arrangement agreed to by the hospital
34 service corporation and an agency or organization providing
35 services under the program.

36 b. Any copayment, coinsurance, or deductible that may be
37 required pursuant to the contract for such services shall be waived.

38 c. Every hospital service corporation that is subject to the
39 provisions of this section shall submit to the Department of
40 Children and Families, in a form and manner prescribed by the
41 department, a report on the claims submitted for services provided
42 under the newborn home nurse visitation program.

43 The information contained in the report shall be used by the
44 department to assess the newborn home nurse visitation program
45 pursuant to subsection a. of section 4 of P.L. , c. (C.)
46 (pending before the Legislature as this bill).

47 d. (1) Except as provided in paragraph (2) of this subsection,
48 the contract shall specify that no deductible, coinsurance,

1 copayment, or any other cost-sharing requirement may be imposed
2 on the coverage required pursuant to this section.

3 (2) A contract offered by a group or individual hospital service
4 corporation that qualifies as a high deductible health plan shall
5 provide benefits for expenses incurred for services provided under
6 the newborn home nurse visitation program established pursuant to
7 section 2 of P.L. , c. (C.) (pending before the Legislature
8 as this bill) at the lowest deductible and other cost-sharing
9 requirement permitted for a high deductible health plan under
10 section 223(c)(2)(A) of the Internal Revenue Code (26 U.S.C.
11 s.223).

12 e. The provisions of this section shall apply to all contracts in
13 which the hospital service corporation has reserved the right to
14 change the premium.

15
16 6. a. No group or individual medical service corporation
17 contract providing hospital or medical expense benefits shall be
18 delivered, issued, executed, or renewed in this State or approved for
19 issuance or renewal in this State by the Commissioner of Banking
20 and Insurance, on or after the effective date of this act, unless the
21 contract provides benefits to any subscriber or other person covered
22 thereunder for expenses incurred for services provided under the al
23 newborn home nurse visitation program established pursuant to
24 section 2 of P.L. , c. (C.) (pending before the Legislature
25 as this bill). The contract shall:

26 (1) provide coverage for the services provided by the newborn
27 home nurse visitation program established pursuant to section 2 of
28 P.L. , c. (C.) (pending before the Legislature as this bill);

29 (2) notify a covered person of the services provided by the
30 newborn home nurse visitation program, upon application by the
31 covered person for coverage of a newborn infant;

32 (3) ensure that the contract does not contain any provision that
33 requires a covered person to receive the services provided by the
34 newborn home nurse visitation program as a condition of coverage,
35 or that denies or limits benefits to the covered person if that person
36 declines the services provided under the program; and

37 (4) have the discretion to determine how best to reimburse for
38 the expenses incurred for services provided under the newborn
39 home nurse visitation program, including, but not limited to,
40 utilizing:

41 (i) a value-based payment methodology;

42 (ii) an invoice claim process;

43 (iii) a capitated payment arrangement;

44 (iv) a payment methodology that takes into account the need for
45 an agency or organization providing services under the program to
46 expand its capacity to provide services and address health
47 disparities; or

1 (v) any other payment arrangement agreed to by the medical
2 service corporation and an agency or organization providing
3 services under the program.

4 b. Any copayment, coinsurance, or deductible that may be
5 required pursuant to the contract for services covered pursuant to
6 subsection a. of this section shall be waived.

7 c. Every group or individual medical service corporation that is
8 subject to the provisions of this section shall submit to the
9 Department of Children and Families, in a form and manner
10 prescribed by the department, a report on the claims submitted for
11 services provided under the newborn home nurse visitation
12 program.

13 The information contained in the report shall be used by the
14 department to assess the newborn home nurse visitation program
15 pursuant to subsection a. of section 4 of P.L. , c. (C.)
16 (pending before the Legislature as this bill).

17 d. (1) Except as provided in paragraph (2) of this subsection,
18 the contract shall specify that no deductible, coinsurance,
19 copayment, or any other cost-sharing requirement may be imposed
20 on the coverage required pursuant to this section.

21 (2) A contract offered by a group or individual medical service
22 corporation that qualifies as a high deductible health plan shall
23 provide benefits for expenses incurred for services provided under
24 the newborn home nurse visitation program established pursuant to
25 section 2 of P.L. , c. (C.) (pending before the Legislature
26 as this bill) at the lowest deductible and other cost-sharing
27 requirement permitted for a high deductible health plan under
28 section 223(c)(2)(A) of the Internal Revenue Code (26 U.S.C.
29 s.223).

30 e. The provisions of this section shall apply to all contracts in
31 which the group or individual medical service corporation has
32 reserved the right to change the premium.

33

34 7. a. No group or individual health service corporation contract
35 providing hospital or medical expense benefits shall be delivered,
36 issued, executed, or renewed in this State or approved for issuance
37 or renewal in this State by the Commissioner of Banking and
38 Insurance, on or after the effective date of this act, unless the
39 contract provides benefits to any subscriber or other person covered
40 thereunder for expenses incurred for services provided under the
41 newborn home nurse visitation program established pursuant to
42 section 2 of P.L. , c. (C.) (pending before the Legislature
43 as this bill). The contract shall:

44 (1) provide coverage for the services provided by the newborn
45 home nurse visitation program established pursuant to section 2 of
46 P.L. , c. (C.) (pending before the Legislature as this bill);

1 (2) notify a covered person of the services provided by the
2 newborn home nurse visitation program, upon application by the
3 covered person for coverage of a newborn infant;

4 (3) ensure that the contract does not contain any provision that
5 requires a covered person to receive the services provided by the
6 newborn home nurse visitation program as a condition of coverage,
7 or that denies or limits benefits to the covered person if that person
8 declines the services provided under the program; and

9 (4) have the discretion to determine how best to reimburse for
10 the expenses incurred for services provided under the newborn
11 home nurse visitation program, including, but not limited to,
12 utilizing:

13 (i) a value-based payment methodology;

14 (ii) an invoice claim process;

15 (iii) a capitated payment arrangement;

16 (iv) a payment methodology that takes into account the need for
17 an agency or organization providing services under the program to
18 expand its capacity to provide services and address health
19 disparities; or

20 (v) any other payment arrangement agreed to by the health
21 service corporation and an agency or organization providing
22 services under the program.

23 b. Any copayment, coinsurance, or deductible that may be
24 required pursuant to the contract for such services shall be waived.

25 c. Every group or individual health service corporation that is
26 subject to the provisions of this section shall submit to the
27 Department of Children and Families, in a form and manner
28 prescribed by the department, a report on the claims submitted for
29 services provided under the newborn home nurse visitation
30 program.

31 The information contained in the report shall be used by the
32 department to assess the newborn home nurse visitation program
33 pursuant to subsection a. of section 4 of P.L. , c. (C.)
34 (pending before the Legislature as this bill).

35 d. (1) Except as provided in paragraph (2) of this subsection, the
36 contract shall specify that no deductible, coinsurance, copayment,
37 or any other cost-sharing requirement may be imposed on the
38 coverage required pursuant to this section.

39 (2) A contract offered by a group or individual health service
40 corporation that qualifies as a high deductible health plan shall
41 provide benefits for expenses incurred for services provided under
42 the newborn home nurse visitation program established pursuant to
43 section 2 of P.L. , c. (C.) (pending before the Legislature
44 as this bill) at the lowest deductible and other cost-sharing
45 requirement permitted for a high deductible health plan under
46 section 223(c)(2)(A) of the Internal Revenue Code (26 U.S.C.
47 s.223).

1 e. The provisions of this section shall apply to all contracts in
2 which the health service corporation has reserved the right to
3 change the premium.

4
5 8. a. No individual health insurance policy providing hospital or
6 medical expense benefits shall be delivered, issued, executed, or
7 renewed in this State or approved for issuance or renewal in this
8 State by the Commissioner of Banking and Insurance, on or after
9 the effective date of this act, unless the policy provides benefits to
10 any named insured or other person covered thereunder for expenses
11 incurred for services provided under the newborn home nurse
12 visitation program established pursuant to section 2 of P.L. , c.
13 (C.) (pending before the Legislature as this bill). The policy
14 shall:

15 (1) provide coverage for the services provided by the newborn
16 home nurse visitation program established pursuant to section 2 of
17 P.L. , c. (C.) (pending before the Legislature as this bill);

18 (2) notify a covered person of the services provided by the
19 newborn home nurse visitation program, upon application by the
20 covered person for coverage of a newborn infant;

21 (3) ensure that the policy does not contain any provision that
22 requires a covered person to receive the services provided by the
23 newborn home nurse visitation program as a condition of coverage,
24 or that denies or limits benefits to the covered person if that person
25 declines the services provided under the program; and

26 (4) have the discretion to determine how best to reimburse for
27 the expenses incurred for services provided under the newborn
28 home nurse visitation program, including, but not limited to,
29 utilizing:

30 (i) a value-based payment methodology;

31 (ii) an invoice claim process;

32 (iii) a capitated payment arrangement;

33 (iv) a payment methodology that takes into account the need for
34 an agency or organization providing services under the program to
35 expand its capacity to provide services and address health
36 disparities; or

37 (v) any other payment arrangement agreed to by the insurer and
38 an agency or organization providing services under the program.

39 b. Any copayment, coinsurance, or deductible that may be
40 required pursuant to the policy for such services shall be waived.

41 c. An individual health insurance policy that is subject to the
42 provisions of this section shall submit to the Department of
43 Children and Families, in a form and manner prescribed by the
44 department, a report on the claims submitted for services provided
45 under the newborn home nurse visitation program.

46 The information contained in the report shall be used by the
47 department to assess the newborn home nurse visitation program

- 1 pursuant to subsection a. of section 4 of P.L. , c. (C.)
2 (pending before the Legislature as this bill).
- 3 d. (1) Except as provided in paragraph (2) of this subsection,
4 the contract shall specify that no deductible, coinsurance,
5 copayment, or any other cost-sharing requirement may be imposed
6 on the coverage required pursuant to this section.
- 7 (2) An individual health insurance policy that qualifies as a high
8 deductible health plan shall provide benefits for expenses incurred
9 for services provided under the newborn home nurse visitation
10 program established pursuant to section 2 of P.L. , c. (C.)
11 (pending before the Legislature as this bill) at the lowest deductible
12 and other cost-sharing requirement permitted for a high deductible
13 health plan under section 223(c)(2)(A) of the Internal Revenue
14 Code (26 U.S.C. s.223).
- 15 e. The provisions of this section shall apply to all policies in
16 which the insurer has reserved the right to change the premium.
17
- 18 9. a. No group health insurance policy providing hospital or
19 medical expense benefits shall be delivered, issued, executed, or
20 renewed in this State or approved for issuance or renewal in this
21 State by the Commissioner of Banking and Insurance, on or after
22 the effective date of this act, unless the policy provides benefits to
23 any named insured or other person covered thereunder for expenses
24 incurred for services provided under the newborn home nurse
25 visitation program established pursuant to section 2 of P.L., c.
26 (C.) (pending before the Legislature as this bill). The policy
27 shall:
- 28 (1) provide coverage for the services provided by the newborn
29 home nurse visitation program established pursuant to section 2 of
30 P.L. , c. (C.) (pending before the Legislature as this bill);
- 31 (2) notify a covered person of the services provided by the
32 newborn home nurse visitation program, upon application by the
33 covered person for coverage of a newborn infant;
- 34 (3) ensure that the policy does not contain any provision that
35 requires a covered person to receive the services provided by the
36 newborn home nurse visitation program as a condition of coverage,
37 or that denies or limits benefits to the covered person if that person
38 declines the services provided under the program; and
- 39 (4) have the discretion to determine how best to reimburse for
40 the expenses incurred for services provided under the newborn
41 home nurse visitation program, including, but not limited to,
42 utilizing:
- 43 (i) a value-based payment methodology;
- 44 (ii) an invoice claim process;
- 45 (iii) a capitated payment arrangement;
- 46 (iv) a payment methodology that takes into account the need for
47 an agency or organization providing services under the program to

1 expand its capacity to provide services and address health
2 disparities; or

3 (v) any other payment arrangement agreed to by the insurer and
4 an agency or organization providing services under the program.

5 b. Any copayment, coinsurance, or deductible that may be
6 required pursuant to the policy for such services shall be waived.

7 c. Every insurer that is subject to the provisions of this section
8 shall submit to the Department of Children and Families, in a form
9 and manner prescribed by the department, a report on the claims
10 submitted for services provided under the newborn home nurse
11 visitation program.

12 The information contained in the report shall be used by the
13 department to assess the newborn home nurse visitation program
14 pursuant to subsection a. of section 4 of P.L. , c. (C.)
15 (pending before the Legislature as this bill).

16 d. (1) Except as provided in paragraph (2) of this subsection,
17 the contract shall specify that no deductible, coinsurance,
18 copayment, or any other cost-sharing requirement may be imposed
19 on the coverage required pursuant to this section.

20 (2) A group health insurance policy that qualifies as a high
21 deductible health plan shall provide benefits for expenses incurred
22 for services provided under the newborn home nurse visitation
23 program established pursuant to section 2 of P.L. , c. (C.)
24 (pending before the Legislature as this bill) at the lowest deductible
25 and other cost-sharing requirement permitted for a high deductible
26 health plan under section 223(c)(2)(A) of the Internal Revenue
27 Code (26 U.S.C. s.223).

28 e. The provisions of this section shall apply to all policies in
29 which the insurer has reserved the right to change the premium.

30

31 10. a. Every individual health benefits plan that is delivered,
32 issued, executed, or renewed in this State pursuant to P.L.1992,
33 c.161 (C.17B:27A-2 et seq.) or approved for issuance or renewal in
34 this State, on or after the effective date of this act, shall provide
35 benefits to any person covered thereunder for expenses incurred for
36 services provided under the newborn home nurse visitation program
37 established pursuant to section 2 of P.L. , c. (C.) (pending
38 before the Legislature as this bill). The plan shall:

39 (1) provide coverage for the services provided by the newborn
40 home nurse visitation program established pursuant to section 2 of
41 P.L. , c. (C.) (pending before the Legislature as this bill);

42 (2) notify a covered person of the services provided by the
43 newborn home nurse visitation program, upon application by the
44 covered person for coverage of a newborn infant;

45 (3) ensure that the plan does not contain any provision that
46 requires a covered person to receive the services provided by the
47 newborn home nurse visitation program as a condition of coverage,

1 or that denies or limits benefits to the covered person if that person
2 declines the services provided under the program; and

3 (4) have the discretion to determine how best to reimburse for
4 the expenses incurred for services provided under the newborn
5 home nurse visitation program, including, but not limited to,
6 utilizing:

7 (i) a value-based payment methodology;

8 (ii) an invoice claim process;

9 (iii) a capitated payment arrangement;

10 (iv) a payment methodology that takes into account the need for
11 an agency or organization providing services under the program to
12 expand its capacity to provide services and address health
13 disparities; or

14 (v) any other payment arrangement agreed to by the carrier and
15 an agency or organization providing services under the program.

16 b. Any copayment, coinsurance, or deductible that may be
17 required pursuant to the health benefits plan for such services shall
18 be waived.

19 c. Every carrier that is subject to the provisions of this section
20 shall submit to the Department of Children and Families, in a form
21 and manner prescribed by the department, a report on the claims
22 submitted for services provided under the newborn home nurse
23 visitation program.

24 The information contained in the report shall be used by the
25 department to assess the newborn home nurse visitation program
26 pursuant to subsection a. of section 4 of P.L. , c. (C.)
27 (pending before the Legislature as this bill).

28 d. (1) Except as provided in paragraph (2) of this subsection, the
29 contract shall specify that no deductible, coinsurance, copayment,
30 or any other cost-sharing requirement may be imposed on the
31 coverage required pursuant to this section.

32 (2) An individual health benefits plan that qualifies as a high
33 deductible health plan shall provide benefits for expenses incurred
34 for services provided under the newborn home nurse visitation
35 program established pursuant to section 2 of P.L. , c. (C.)
36 (pending before the Legislature as this bill) at the lowest deductible
37 and other cost-sharing requirement permitted for a high deductible
38 health plan under section 223(c)(2)(A) of the Internal Revenue
39 Code (26 U.S.C. s.223).

40 e. The provisions of this section shall apply to all health benefit
41 plans in which the carrier has reserved the right to change the
42 premium.

43
44 11. a. Every small employer health benefits plan that is
45 delivered, issued, executed, or renewed in this State pursuant to
46 P.L.1992, c.162 (C.17B:27A-17 et seq.) or approved for issuance or
47 renewal in this State, on or after the effective date of this act, shall
48 provide benefits to any person covered thereunder for expenses for

- 1 services provided under the newborn home nurse visitation program
2 established pursuant to section 2 of P.L. , c. (C.) (pending
3 before the Legislature as this bill). The plan shall:
- 4 (1) provide coverage for the services provided by the newborn
5 home nurse visitation program established pursuant to section 2 of
6 P.L. , c. (C.) (pending before the Legislature as this bill);
- 7 (2) notify a covered person of the services provided by the
8 newborn home nurse visitation program, upon application by the
9 covered person for coverage of a newborn infant;
- 10 (3) ensure that the plan does not contain any provision that
11 requires a covered person to receive the services provided by the
12 newborn home nurse visitation program as a condition of coverage,
13 or that denies or limits benefits to the covered person if that person
14 declines the services provided under the program; and
- 15 (4) have the discretion to determine how best to reimburse for
16 the expenses incurred for services provided under the newborn
17 home nurse visitation program, including, but not limited to,
18 utilizing:
- 19 (i) a value-based payment methodology;
- 20 (ii) an invoice claim process;
- 21 (iii) a capitated payment arrangement;
- 22 (iv) a payment methodology that takes into account the need for
23 an agency or organization providing services under the program to
24 expand its capacity to provide services and address health
25 disparities; or
- 26 (v) any other payment arrangement agreed to by the carrier and
27 an agency or organization providing services under the program.
- 28 b. Any copayment, coinsurance, or deductible that may be
29 required under the health benefits plan for such services shall be
30 waived.
- 31 c. Every carrier that is subject to the provisions of this section
32 shall submit to the Department of Children and Families, in a form
33 and manner prescribed by the department, a report on the claims
34 submitted for services provided under the newborn home nurse
35 visitation program.
- 36 The information contained in the report shall be used by the
37 department to assess the newborn home nurse visitation program
38 pursuant to subsection a. of section 4 of P.L. , c. (C.)
39 (pending before the Legislature as this bill).
- 40 d. (1) Except as provided in paragraph (2) of this subsection,
41 the contract shall specify that no deductible, coinsurance,
42 copayment, or any other cost-sharing requirement may be imposed
43 on the coverage required pursuant to this section.
- 44 (2) A small employer health benefits plan that qualifies as a high
45 deductible health plan shall provide benefits for expenses incurred
46 for services provided under the newborn home nurse visitation
47 program established pursuant to section 2 of P.L. , c. (C.)
48 (pending before the Legislature as this bill) at the lowest deductible

1 and other cost-sharing requirement permitted for a high deductible
2 health plan under section 223(c)(2)(A) of the Internal Revenue
3 Code (26 U.S.C. s.223).

4 e. The provisions of this section shall apply to all health benefit
5 plans in which the carrier has reserved the right to change the
6 premium.

7
8 12. a. Notwithstanding any provision of law to the contrary, a
9 certificate of authority to establish and operate a health maintenance
10 organization in this State shall not be issued or continued by the
11 Commissioner of Banking and Insurance on or after the effective
12 date of this act unless the health maintenance organization provides
13 health care services to any enrollee for expenses incurred for
14 services provided under the newborn home nurse visitation program
15 established pursuant to section 2 of P.L. , c. (C.) (pending
16 before the Legislature as this bill). The benefits shall:

17 (1) provide coverage for the services provided by the newborn
18 home nurse visitation program established pursuant to section 2 of
19 P.L. , c. (C.) (pending before the Legislature as this bill);

20 (2) notify a covered person of the services provided by the
21 newborn home nurse visitation program, upon application by the
22 covered person for coverage of a newborn infant;

23 (3) ensure that the plan does not contain any provision that
24 requires a covered person to receive the services provided by the
25 newborn home nurse visitation program as a condition of coverage,
26 or that denies or limits benefits to the covered person if that person
27 declines the services provided under the program; and

28 (4) have the discretion to determine how best to reimburse for
29 the expenses incurred for services provided under the newborn
30 home nurse visitation program, including, but not limited to,
31 utilizing:

32 (i) a value-based payment methodology;

33 (ii) an invoice claim process;

34 (iii) a capitated payment arrangement;

35 (iv) a payment methodology that takes into account the need for
36 an agency or organization providing services under the program to
37 expand its capacity to provide services and address health
38 disparities; or

39 (v) any other payment arrangement agreed to by the carrier and
40 an agency or organization providing services under the program.

41 b. Any copayment, coinsurance, or deductible that may be
42 required pursuant to the health benefits plan for such services shall
43 be waived.

44 c. Every health maintenance organization that is subject to the
45 provisions of this sections hall submit to the Department of
46 Children and Families, in a form and manner prescribed by the
47 department, a report on the claims submitted for services provided
48 under the newborn home nurse visitation program.

1 The information contained in the report shall be used by the
2 department to assess the newborn home nurse visitation program
3 pursuant to subsection a. of section 4 of P.L. , c. (C.)
4 (pending before the Legislature as this bill).

5 d. (1) Except as provided in paragraph (2) of this subsection,
6 the contract shall specify that no deductible, coinsurance,
7 copayment, or any other cost-sharing requirement may be imposed
8 on the coverage required pursuant to this section.

9 (2) A contract offered by a health maintenance organization that
10 qualifies as a high deductible health plan shall provide benefits for
11 expenses incurred for services provided under the newborn home
12 nurse visitation program established pursuant to section 2 of P.L. ,
13 c. (C.) (pending before the Legislature as this bill) at the
14 lowest deductible and other cost-sharing requirement permitted for
15 a high deductible health plan under section 223(c)(2)(A) of the
16 Internal Revenue Code (26 U.S.C. s.223).

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

19
20 13. a. Notwithstanding any State law or regulation to the
21 contrary, the Department of Human Services shall, contingent on
22 maintaining or receiving necessary federal approvals, ensure that
23 expenses incurred for services provided under the newborn home
24 nurse visitation program established pursuant to section 2 of P.L. ,
25 c. (C.) (pending before the Legislature as this bill) shall be
26 provided with no cost-sharing to eligible persons under the
27 Medicaid program, established pursuant to P.L.1968, c.413
28 (C.30:4D-1 et seq.). The coverage provided under this section
29 shall:

30 (1) provide coverage for the services provided by the newborn
31 home nurse visitation program established pursuant to section 2 of
32 P.L. , c. (C.) (pending before the Legislature as this bill);

33 (2) notify a covered person of the services provided by the
34 newborn home nurse visitation program, upon application by the
35 covered person for coverage of a newborn infant;

36 (3) ensure that the plan does not contain any provision that
37 requires a covered person to receive the services provided by the
38 newborn home nurse visitation program as a condition of coverage,
39 or that denies or limits benefits to the covered person if that person
40 declines the services provided under the program; and

41 (4) have the discretion to determine how best to reimburse for
42 the expenses incurred for services provided under the newborn
43 home nurse visitation program, including, but not limited to,
44 utilizing:

45 (i) a value-based payment methodology;

46 (ii) an invoice claim process;

47 (iii) a capitated payment arrangement;

1 (iv) a payment methodology that takes into account the need for
2 an agency or organization providing services under the program to
3 expand its capacity to provide services and address health
4 disparities; or

5 (v) any other payment arrangement agreed to by the carrier and
6 an agency or organization providing services under the program.

7 b. Any copayment, coinsurance, or deductible that may be
8 required pursuant to the contract for services covered pursuant to
9 subsection a. of this section shall be waived.

10 c. The Assistant Commissioner of Human Services shall submit
11 to the Department of Children and Families, in a form and manner
12 prescribed by the department, a report on the claims submitted for
13 services provided under the newborn home nurse visitation
14 program.

15 The information contained in the report shall be used by the
16 department to assess the newborn home nurse visitation program
17 pursuant to subsection a. of section 4 of P.L. , c. (C.)
18 (pending before the Legislature as this bill).

19 d. Except as provided in paragraph (2) of this subsection, the
20 contract shall specify that no deductible, coinsurance, copayment,
21 or any other cost-sharing requirement may be imposed on the
22 coverage required pursuant to this section.

23 e. The benefits shall be provided to the same extent as for any
24 other medical condition under the contract.

25
26 14. a. The State Health Benefits Commission shall provide
27 benefits to each person covered under the State Health Benefits
28 Program for expenses incurred for services provided under the
29 newborn home nurse visitation program established pursuant to
30 section 2 of P.L. , c. (C.) (pending before the Legislature
31 as this bill). The benefits shall:

32 (1) provide coverage for the services provided by the newborn
33 home nurse visitation program established pursuant to section 2 of
34 P.L. , c. (C.) (pending before the Legislature as this bill);

35 (2) notify a covered person of the services provided by the
36 newborn home nurse visitation program, upon application by the
37 covered person for coverage of a newborn infant;

38 (3) ensure that the plan does not contain any provision that
39 requires a covered person to receive the services provided by the
40 newborn home nurse visitation program as a condition of coverage,
41 or that denies or limits benefits to the covered person if that person
42 declines the services provided under the program; and

43 (4) have the discretion to determine how best to reimburse for
44 the expenses incurred for services provided under the newborn
45 home nurse visitation program, including, but not limited to,
46 utilizing:

47 (i) a value-based payment methodology;

48 (ii) an invoice claim process;

- 1 (iii) a capitated payment arrangement;
- 2 (iv) a payment methodology that takes into account the need for
- 3 an agency or organization providing services under the program to
- 4 expand its capacity to provide services and address health
- 5 disparities; or
- 6 (v) any other payment arrangement agreed to by the carrier and
- 7 an agency or organization providing services under the program.
- 8 b. Any copayment, coinsurance, or deductible that may be
- 9 required under the contract for such services shall be waived.
- 10 c. The State Health Benefits Commission shall submit to the
- 11 Department of Children and Families, in a form and manner
- 12 prescribed by the department, a report on the claims submitted for
- 13 services provided under the newborn home nurse visitation
- 14 program.
- 15 The information contained in the report shall be used by the
- 16 department to assess the newborn home nurse visitation program
- 17 pursuant to subsection a. of section 4 of P.L. , c. (C.)
- 18 (pending before the Legislature as this bill).
- 19 d. (1) Except as provided in paragraph (2) of this subsection,
- 20 the contract shall specify that no deductible, coinsurance,
- 21 copayment, or any other cost-sharing requirement may be imposed
- 22 on the coverage required pursuant to this section.
- 23 (2) A contract provided by the State Health Benefits
- 24 Commission that qualifies as a high deductible health plan shall
- 25 provide benefits for expenses incurred for services provided under
- 26 the newborn home nurse visitation program established pursuant to
- 27 section 2 of P.L. , c. (C.) (pending before the Legislature
- 28 as this bill) at the lowest deductible and other cost-sharing
- 29 requirement permitted for a high deductible health plan under
- 30 section 223(c)(2)(A) of the Internal Revenue Code (26 U.S.C.
- 31 s.223).
- 32 e. The benefits shall be provided to the same extent as for any
- 33 other medical condition under the contract.
- 34
- 35 15. The Departments of Banking and Insurance, Children and
- 36 Families, and Human Services, pursuant to the "Administrative
- 37 Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt
- 38 rules and regulations as shall be necessary to implement the
- 39 provisions of this act.
- 40
- 41 16. The Commissioners of Banking and Insurance and Human
- 42 Services shall apply for such State plan amendments or waivers as
- 43 may be necessary to implement the provisions of section 13 of this
- 44 act and to secure federal financial participation for State Medicaid
- 45 expenditures under the federal Medicaid program.
- 46
- 47 17. This act shall take effect immediately.