

ASSEMBLY, No. 135

STATE OF NEW JERSEY

Introduced Pending Technical Review by Legislative Counsel

PRE-FILED FOR INTRODUCTION IN THE 1996 SESSION

By Assemblyman JONES

1 AN ACT requiring health insurance benefits for testing for prostate
2 cancer and supplementing Title 17 of the Revised Statutes and Title
3 17B of the New Jersey Statutes.

4

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

7

8 1. No health service corporation contract providing hospital or
9 medical expense benefits for groups with greater than 49 persons shall
10 be delivered, issued, executed or renewed in this State, or approved
11 for issuance or renewal in this State by the Commissioner of Insurance
12 on or after the effective date of this act, unless the contract provides
13 benefits to any named subscriber or other person covered thereunder
14 for expenses incurred in conducting a prostate-specific antigen, or
15 PSA, blood test. The benefits shall be provided to the same extent as
16 for any other medical condition under the contract.

17 This section shall apply to all health service corporation contracts
18 in which the health service corporation has reserved the right to
19 change the premium.

20

21 2. No hospital service corporation contract providing hospital or
22 medical expense benefits for groups with greater than 49 persons shall
23 be delivered, issued, executed or renewed in this State, or approved
24 for issuance or renewal in this State by the Commissioner of Insurance
25 on or after the effective date of this act, unless the contract provides
26 benefits to any named subscriber or other person covered thereunder
27 for expenses incurred in conducting a prostate-specific antigen, or
28 PSA, blood test. The benefits shall be provided to the same extent as
29 for any other medical condition under the contract.

30 This section shall apply to all hospital service corporation contracts
31 in which the hospital service corporation has reserved the right to
32 change the premium.

33

34 3. No medical service corporation contract providing hospital or
35 medical expense benefits for groups with greater than 49 persons shall

1 be delivered, issued, executed or renewed in this State, or approved
2 for issuance or renewal in this State by the Commissioner of Insurance
3 on or after the effective date of this act, unless the contract provides
4 benefits to any named subscriber or other person covered thereunder
5 for expenses incurred in conducting a prostate-specific antigen, or
6 PSA, blood test. The benefits shall be provided to the same extent as
7 for any other medical condition under the contract.

8 This section shall apply to all medical service corporation contracts
9 in which the medical service corporation has reserved the right to
10 change the premium.

11
12 4. No group health insurance policy providing hospital or medical
13 expense benefits for groups with greater than 49 persons shall be
14 delivered, issued, executed or renewed in this State, or approved for
15 issuance or renewal in this State by the Commissioner of Insurance on
16 or after the effective date of this act, unless the policy provides
17 benefits to any named insured or other person covered thereunder for
18 expenses incurred in conducting a prostate-specific antigen, or PSA,
19 blood test. The benefits shall be provided to the same extent as for
20 any other medical condition under the policy.

21 This section shall apply to all group health insurance policies in
22 which the health insurer has reserved the right to change the premium.

23
24 5. A certificate of authority to establish and operate a health
25 maintenance organization in this State shall not be issued or continued
26 by the Commissioner of Health on or after the effective date of this act
27 unless the health maintenance organization offers health care services
28 to any enrollee which include a prostate-specific antigen, or PSA,
29 blood test. The health care services shall be provided to the same
30 extent as for any other medical condition under the contract.

31 The provisions of this section shall apply to all contracts for health
32 care services by health maintenance organizations under which the
33 right to change the schedule of charges for enrollee coverage is
34 reserved.

35
36 6. This act shall take effect on the 30th day after enactment.

37
38
39 STATEMENT

40
41 This bill requires all health insurers which cover groups with 50 or
42 more persons and health maintenance organizations to provide benefits
43 for prostate-specific antigen, or PSA, blood tests. The PSA blood test
44 was recently approved by the federal Food and Drug Administration
45 to help detect prostate cancer in men 50 years of age and older when
46 used in conjunction with a digital rectal examination.

1 Prostate cancer is the second leading cause of cancer death in men,
2 with an estimated 38,000 deaths in 1994 in the United States. An
3 estimated 200,000 new cases in the United States will be detected in
4 1994. Between 1980 and 1990, prostate cancer incidence rates
5 increased 50%, largely due to improved detection. It is expected that
6 there will be further increases in the incidence of this disease with
7 widespread use of PSA blood tests.

8

9

10

11

12 Requires insurers to provide coverage for prostate-specific antigen
13 blood test for prostate cancer.