

ASSEMBLY, No. 539

STATE OF NEW JERSEY

Introduced Pending Technical Review by Legislative Counsel

PRE-FILED FOR INTRODUCTION IN THE 1996 SESSION

By Assemblywoman CRECCO

1 AN ACT concerning primary and preventive obstetrical and
2 gynecological care provided by health maintenance organizations
3 and supplementing P.L.1973, c.337 (C.26:2J-1 et seq.).
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5 **BE IT ENACTED** by the Senate and General Assembly of the State
6 of New Jersey:

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8 1. a. A health maintenance organization shall not limit a female
9 enrollee's direct access to primary and preventive obstetrical and
10 gynecological services provided by a qualified provider of these
11 services of her choice who has a contract with the health maintenance
12 organization to less than two examinations annually for these services
13 or to any care related to a pregnancy. In addition, a health
14 maintenance organization shall not limit direct access to primary and
15 preventive obstetrical and gynecological services required as a result
16 of the two examinations or as a result of an acute gynecological
17 condition, except that the qualified provider shall discuss the services
18 and treatment plan for the female enrollee with the enrollee's primary
19 care practitioner in accordance with the requirements established by
20 the health maintenance organization.

21 b. A health maintenance organization shall notify each of its female
22 enrollees of the provisions of this act in writing no later than the 30th
23 day after the effective date of this act.
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25 2. This act shall take effect on the 180th day after the date of
26 enactment.
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29 STATEMENT

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31 This bill prohibits a health maintenance organization (HMO) from
32 limiting a female enrollee's direct access to primary and preventive
33 obstetrical and gynecological services provided by a qualified provider
34 of these services of her choice who has a contract with the HMO to
35 less than two examinations annually for these services or to any care

1 related to a pregnancy. In addition, an HMO is prohibited from
2 limiting direct access to primary and preventive obstetrical and
3 gynecological services required as a result of the two examinations or
4 as a result of an acute gynecological condition, except that the
5 qualified provider is required to discuss the services and treatment plan
6 for the female enrollee with the enrollee's primary care practitioner in
7 accordance with the requirements established by the HMO.

8 The bill further requires that an HMO notify each of its female
9 enrollees of its provisions in writing within 30 days after the effective
10 date of the bill.

11 This bill is intended to ensure that a female HMO enrollee is able to
12 receive the following primary and preventive services directly from an
13 obstetrician/gynecologist (without a referral by a "gatekeeper"): all
14 maternity care, two visits annually for examinations, follow-up
15 services resulting from the two examinations, and acute gynecological
16 care.

17 The bill is based on a recently enacted New York State law which
18 conforms to the recommendations of the American College of
19 Obstetricians and Gynecologists (ACOG). The ACOG
20 recommendations reflect the fact that for most women,
21 obstetrician/gynecologists serve as the primary care physician, and that
22 these providers therefore serve a significant role in the provision of
23 primary health care services to women. These services include
24 periodic health screening, evaluation and counseling about health and
25 lifestyle risk behaviors, and immunizations.

26 The bill takes effect on the 180th day after the date of enactment.

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31 Prohibits HMO from limiting a female enrollee's direct access to an
32 obstetrician/gynecologist.