

ASSEMBLY, No. 1047

STATE OF NEW JERSEY

Introduced Pending Technical Review by Legislative Counsel

PRE-FILED FOR INTRODUCTION IN THE 1996 SESSION

By Assemblyman DORIA

1 AN ACT concerning the health care services provided by health
2 maintenance organizations and amending and supplementing
3 P.L.1973, c.337.

4

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

7

8 1. Section 2 of P.L.1973, c.337 (C.26:2J-2) is amended to read as
9 follows:

10 2. As used in P.L.1973, c.337 (C.26:2J-1 et seq.):

11 a. "Commissioner" means the [State] Commissioner of Health.

12 b. "Basic health care services" means those services, including but
13 not limited to emergency care, inpatient hospital and physician care,
14 [and] outpatient medical services, and services of a licensed
15 chiropractor, as designated by regulations promulgated by the
16 commissioner.

17 c. "Health care services" includes basic health care services and any
18 additional services, including services of a licensed chiropractor, as
19 designated by regulations promulgated by the commissioner.

20 d. "Enrollee" means an individual who has been enrolled with a
21 health maintenance organization.

22 e. "Evidence of coverage" means any booklet, certificate,
23 agreement, or contract issued to an enrollee setting out the services
24 and other benefits to which he is entitled.

25 f. "Health maintenance organization" means any person which
26 directly or through contracts with providers furnishes at least basic
27 comprehensive health care services on a prepaid basis to enrollees in
28 a designated geographical area.

29 g. "Person" means any natural or artificial person including but not
30 limited to individuals, partnerships, associations, trusts, or
31 corporations.

32 h. "Provider" means any physician, chiropractor, hospital, or other

EXPLANATION - Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and intended to be omitted in the law.

Matter underlined thus is new matter.

1 person which is licensed or otherwise authorized in this State to
2 furnish health care services.

3 i. "Health care facility" means the facility or institution whether
4 public or private, engaged in providing services for health maintenance
5 organizations, diagnosis or treatment of human disease, pain, injury,
6 deformity or physical condition, including, but not limited to, a general
7 hospital, special hospital, mental hospital, public health center,
8 diagnostic center, treatment center, rehabilitation center, extended
9 care facility, skilled nursing home, nursing home, intermediate care
10 facility, tuberculosis hospital, chronic disease hospital, maternity
11 hospital, outpatient clinic, dispensary, home health care agency,
12 boarding home or other home for the sheltered care of adult persons
13 and bio-analytical laboratory or central services facility serving one or
14 more such institutions but excluding institutions that provide healing
15 solely by prayer.

16 (cf: P.L.1973, c.337, s.2)

17

18 2. (New section) Every health maintenance organization for which
19 a certificate of authority has been issued or continued shall provide
20 that a sufficient number of licensed chiropractors are associated with
21 or available to the health maintenance organization to assure that
22 enrollees may choose to have health care services provided by a
23 licensed chiropractor. Furthermore, the health maintenance
24 organization shall make available to enrollees direct access to
25 chiropractic services without the necessity of any medical referral. For
26 purposes of this provision, one chiropractor for every two-thousand
27 enrollees shall be deemed to be sufficient.

28

29 3. (New section) Whenever a health maintenance organization
30 provides for reimbursement for any health care service which is within
31 the lawful scope of practice of a chiropractor, the enrollee or the
32 chiropractor rendering that service shall be entitled to reimbursement
33 for that service.

34

35 4. (New section) The Commissioner of Health shall revise the
36 rules and regulations promulgated under the "Health Maintenance
37 Organizations Act," P.L.1973, c.337 (C.26:2J-1 et seq.), as are
38 necessary to effectuate the amendments and supplements made thereto
39 by this act, within 180 days of the effective date of this section in
40 accordance with the "Administrative Procedure Act," P.L.1968, c.410
41 (C.52:14B-1 et seq.).

42

43 5. This act shall take effect on the 180th day following the date of
44 enactment, except that section 4 shall take effect immediately.

STATEMENT

1
2
3 This bill amends and supplements the "Health Maintenance
4 Organizations Act," P.L.1973, c.337 (C.26:2J-1 et seq.), to make it
5 clear that chiropractic services shall be included among the health care
6 services which must be provided to enrollees of a health maintenance
7 organization (HMO). The bill further provides that HMO's must make
8 available to enrollees direct access to chiropractic services without the
9 necessity of any medical referral and provide a sufficient number of
10 licensed chiropractors so that they may choose to have health care
11 services provided by a licensed chiropractor. Under the bill's
12 provisions, one chiropractor for every two-thousand enrollees is
13 deemed sufficient. The bill also provides that whenever a health
14 maintenance organization provides for reimbursement for any health
15 care service which is within the lawful scope of practice of a
16 chiropractor, the enrollee or the chiropractor rendering that service
17 shall be entitled to reimbursement for that service. Finally, the bill
18 requires the Commissioner of Health to revise the regulations
19 promulgated with respect to HMO's to reflect these provisions.

20

21

22

23

24 Provides that chiropractic services must be provided by HMOs.