

ASSEMBLY BUDGET COMMITTEE

STATEMENT TO

ASSEMBLY COMMITTEE SUBSTITUTE FOR

ASSEMBLY, No. 4530

STATE OF NEW JERSEY

DATED: JUNE 22, 2021

The Assembly Budget Committee reports favorably an Assembly committee substitute for Assembly Bill No. 4530.

The committee substitute provides that New Jersey residents have access to one cost-free postpartum home nurse visit.

Postpartum home nurse visits provide a person who has given birth with physical, social, and emotional support, can detect complications from birth that are not always apparent in the hours and days immediately following birth, and are associated with improvements in maternal, infant, and child health, child development, parenting skills, school readiness, and economic self-sufficiency.

The committee substitute requires the Department of Children and Families (DCF) to establish a Statewide voluntary universal newborn home nurse visitation program to provide home visitation services to newborn infants and parents of a newborn infant.

The stated purpose of the program will be to support healthy child development and strengthen families.

Under the provisions of the substitute, the DCF will:

(1) appoint an advisory group of stakeholders, which will consult, coordinate, and collaborate with the DCF on the development of the program. The substitute requires the advisory group to organize no later than 30 days following the enactment of the substitute, and include at least one representative of each of the following entities: an insurance carrier that offers health benefit plans in the State; a hospital; a birthing facility; a local public health authority; a maternal child health consortium; an early childhood home visitation program; a home health agency; a federally qualified health center; a community-based organization; and a social service agency;

(2) have the authority to develop a plan for the managed rollout of the newborn home nurse visitation program throughout the State;

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

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

The substitute requires that the newborn home nurse visitation program be operated in a culturally-competent manner and that the program:

(1) is voluntary and carries no negative consequences for parents with a newborn infant who decline to participate in the program when applying for other services available to pregnant persons, and when applying for services available to all parents of newborn infants;

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

(3) includes at least one home nurse visit in the participating newborn infant's home within two weeks after the birth of an infant;

(4) provides the opportunity for no more than two additional visits during the newborn infant's first three months of life, with such additional visits occurring based on the family's choice, as well as need and availability as determined by the program;

(5) ensures that a home nurse visit be conducted by a registered nurse or an advanced practice nurse licensed in this State;

(6) improves State outcomes in areas including maternal health, infant health and development, and parenting skills;

(7) is based on criteria established by the United States Department of Health and Human Services for an evidence-based early childhood home visiting service delivery model;

(8) includes an evidence-based evaluation of the physical, emotional, and social factors affecting a parent or parents and the parent's or parents' newborn infant, including, but not limited to, a health and wellness check of the newborn and an assessment of the physical and mental health of a person who has given birth;

(9) provides support services to the parent or parents of a newborn infant, including, but not limited to, breastfeeding education and assistance to a person who has recently given birth in recognizing the symptoms of, and coping with, perinatal mood disorder;

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

(11) develops a method for providing parents, who elect to have a home birth, information about the program; and

(12) provides information on, and referrals to, services that address the specific needs of newborn infants and parents of a newborn infant.

The DCF may contract with one or more third-party vendors or service providers to assist the department in administering the

program, including hiring and staffing nurses and providing training on the home visiting model utilized by the program.

Under the provisions of the substitute, the DCF, in consultation with the DOH, is required to prepare a resource guide providing information on the newborn home nurse visitation program and the services available to pregnant persons, persons who have recently given birth, and parents of a newborn infant born in this State. The resource guide is to be distributed at the time the parent or parents of a newborn infant are informed of the newborn home nurse visitation program and of their right to schedule a home nurse visit.

The committee substitute requires the DCF to collect and analyze data about the newborn home nurse visitation program, which will be used to evaluate, measure, and improve the effectiveness of the program in achieving its purpose of supporting healthy child development and strengthening families.

The DCF is required to also work with other State departments and agencies, health insurance carriers that offer health benefit plans in the State, hospitals and birthing facilities, local public health authorities, maternal child health consortia, early childhood home visitation programs, community-based organizations, and social service providers, to develop protocols concerning the timely sharing of the data collected pursuant to the substitute, including the sharing of data with the primary care providers of parents participating in the newborn home nurse visitation program.

The Department of Children and Families may contract with a third-party vendor with expertise in the model utilized by the program to assist with the analysis and evaluation of data collected pursuant to this section. In the event of such a contract, the department will facilitate the sharing of data with the third party, in accordance with State and federal law.

The substitute requires health insurers to cover the newborn home nurse visit and provides that the health benefits coverage requirements apply to: health, hospital, and medical service corporations; commercial, individual, and group health insurers; health maintenance organizations; and health benefits plans issued pursuant to the New Jersey Individual Health Coverage and Small Employer Health Benefits Programs. The requirements for coverage will also apply to the State Health Benefits Program, which by law requires similar health benefits coverage under the School Employees' Health Benefits Program, as well as to the State Medicaid program.

The substitute requires that health insurers are to: (1) notify a covered person of the services provided by the newborn home nurse visitation program, upon application by the covered person for coverage of a newborn infant; (2) ensure that contracts or policies do not contain any provision that requires a covered person to receive the services provided by the newborn home nurse visitation program as a condition of coverage, or that denies or limits benefits to the covered

person if that person declines the services provided under the program; (3) have the discretion to determine how best to reimburse for the expenses incurred for services provided under the newborn home nurse visitation program; (4) waive the receipt of any copayment, coinsurance, or deductible that may be required for the home nurse visits and specify that any copayment, coinsurance, or deductible may not be imposed on the coverage required under the substitute; (5) submit a report to either the DOBI, which will share information contained in the report to the DCF, or DCF on the claims submitted for services provided under the newborn home nurse visitation program that will be used by the DCF to assess the newborn home nurse visitation program; and (6) and require that, when applicable, contracts or policies qualifying as a high deductible health plans provide benefits for expenses incurred for services provided under the newborn home nurse visitation program at the lowest deductible and other cost-sharing requirement permitted for high deductible health plans under section 223(c)(2)(A) of the Internal Revenue Code (26 U.S.C. s.223) and catastrophic plans, as defined in 45 C.F.R. s.156.155.

The Commissioner of Banking and Insurance, in consultation with the Commissioner of the Department of Children and Families, will have the authority to permit carriers to use an in-network provider that meets the requirement of the program, or contract with a vendor or provider selected by the program, to provide home visitation services.

The substitute requires the Commissioner of Human Services to apply for any State plan amendments or waivers necessary to implement the provisions of the substitute and to secure federal financial participation for State Medicaid expenditures under the federal Medicaid program.

The substitute appropriates the sum of \$2,750,000 from the General Fund to DCF to implement the provisions of the substitute.

FISCAL IMPACT:

Fiscal information for this bill is currently unavailable.