ASSEMBLY, No. 5215 STATE OF NEW JERSEY 219th LEGISLATURE

INTRODUCED JANUARY 7, 2021

Sponsored by: Assemblyman HERB CONAWAY, JR. District 7 (Burlington) Assemblyman ERIK PETERSON District 23 (Hunterdon, Somerset and Warren)

SYNOPSIS

Requires Medicaid Fraud Division to enter into data sharing agreement upon request of county to provide access to third party insurance liability data regarding certain COVID-19 related health claims.

CURRENT VERSION OF TEXT

As introduced.



A5215 CONAWAY, PETERSON

2

AN ACT concerning data sharing agreements between the Medicaid Fraud Division and counties, and supplementing Title 52 of the Revised Statutes.

3 4

5

1

2

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

6 7

8 1. a. The Medicaid Fraud Division in the Office of the State 9 Comptroller shall enter into a data sharing agreement with a county, 10 upon the county's request, for the purposes of providing the county 11 with access to third party insurance liability data utilized by the 12 division's Third Party Liability Unit, and any private entity 13 contracted by the division, to determine whether Medicaid 14 beneficiaries have other insurance. Under the data sharing 15 agreement, the division shall provide all available data, in a manner that complies with federal and State laws and regulations, which 16 17 will assist the county in:

(1) examining the claims or documentation submitted by
individuals to the county upon the provision of publicly-funded
health-related services provided in connection with the coronavirus
disease 2019 (COVID-19), including, but not limited to, testing,
diagnosis, and treatment, administered at any point since the
Governor's declared public health emergency regarding COVID-19,
to determine whether the individuals are insured; and

(2) if any individual is determined to be insured, identifying the
carrier under which the individual is a covered person so that the
county may properly bill the carrier for any health-related services
provided to that individual in connection with COVID-19 that are
covered by the carrier.

b. As used in this section, "carrier" means an insurance
company, health service corporation, hospital service corporation,
medical service corporation, or health maintenance organization
authorized to issue health benefits plans in this State, and shall
include the State Health Benefits Program and the School
Employees' Health Benefits Program.

- 36 37
- 2. This act shall take effect immediately.
- 38 39
- 40
- 41

STATEMENT

This bill requires the Medicaid Fraud Division in the Office of the State Comptroller to enter into a data sharing agreement with a county, upon the county's request, for the purposes of providing the county access to third party insurance liability data utilized by the division's Third Party Liability Unit, and any private entity contracted by the division, to determine whether Medicaid beneficiaries have other insurance. Under the data sharing agreement, the division is required to provide all available data, in a
 manner that complies with federal and State laws and regulations,
 which will assist the county in:

1) examining the claims or documentation submitted by
individuals to the county upon the provision of publicly-funded
health-related services provided in connection with the coronavirus
disease 2019 (COVID-19), including, but not limited to, testing,
diagnosis, and treatment, administered at any point since the
Governor's declared public health emergency regarding COVID-19,
to determine whether the individuals are insured; and

1) 2) if any individual is determined to be insured, identifying the 12 carrier under which the individual is a covered person so that the 13 county may properly bill the carrier for any health-related services 14 provided to that individual in connection with COVID-19 that are 15 covered by the carrier.

As defined under the bill, "carrier" means an insurance company, health service corporation, hospital service corporation, medical service corporation, or health maintenance organization authorized to issue health benefits plans in this State, and shall include the State Health Benefits Program and the School Employees' Health Benefits Program.

22 States are required under federal Medicaid statute to have laws 23 that compel health insurers in the state to provide at least four data 24 elements to support identification of third party liability: the 25 insured's name, address, group or member ID number, and periods 26 of coverage. It is the sponsor's goal that allowing counties to 27 access this information to determine third party liability for COVID-19 health services will protect the limited amount of public 28 29 funds that have been made available to counties to offer those 30 services.