

SENATE HEALTH, HUMAN SERVICES AND SENIOR  
CITIZENS COMMITTEE

STATEMENT TO

SENATE COMMITTEE SUBSTITUTE FOR  
**SENATE, No. 690**

**STATE OF NEW JERSEY**

DATED: MARCH 9, 2021

The Senate Health, Human Services and Senior Citizens Committee reports favorably a Senate committee substitute for Senate Bill No. 690.

This 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.

Specifically, 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 parents of a newborn infant.

The purpose of the program is to support healthy child development and strengthen families.

Under the provisions of the substitute, the DCF must:

(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) establish the newborn home nurse visitation program throughout the State within eight months after the effective date of the substitute;

(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:

(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) offer home nurse visitation services in every community in the State, and to all 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 one home nurse visit in a parent's home within two weeks after the birth of an infant;

(4) ensure that a home nurse visit be conducted by a licensed registered nurse or an advanced practice nurse;

(5) improve State outcomes in the areas of maternal health, infant health and development, and parenting skills;

(6) include an evidence-based evaluation of the physical, emotional, and social factors affecting a parent and the parent's 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;

(7) provide support services to 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;

(8) coordinate 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 hospital or birthing facility attempts to schedule a home nurse visit prior to the person's discharge from the hospital or facility; and

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

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 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 must be used to evaluate and measure the effectiveness of the program in

achieving its purpose of supporting healthy child development and strengthening families.

The DCF must 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 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 substitute provides the requirements for coverage 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 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 the DCF on the claims submitted for services provided under the newborn home nurse visitation program that must 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).