

A-3378 amended proposal

Brief Description:

Clarifies out-of-network payment responsibilities under health benefits plans; requires certain coverage and procedure disclosures to consumers; revises procedures for changes to managed care plan contracts.

Sponsored by: Assemblypersons G. Schaer (D-Passaic) and G. Spencer (D-Essex).

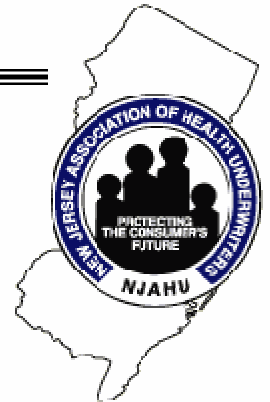
Reasons to Support:

- Requires a website providing quality ranking.
- Includes self funded plans
- Requires provider to collect patient cost sharing responsibilities. Can only assume they will have to inquire to the carrier.
- Provider must disclose network status
- Provider must disclose an estimate for the cost of services in the person's primary language ? If mandated in writing, we support.
- Requires providers to retain records for seven years and be open to DoBI inspection. Should include patient inspection.

Reasons to Oppose:

- Prohibits carrier from making provider contract changes more than once per year.
- Waiver of patient cost sharing waived if "medical or financial hardship". Who and how is this determination made ?
- Provider must disclose cost sharing responsibilities. How will a provider know the amount of deductible already satisfied?
- Providing information in the patient's primary language is not reasonable.
- Provider must make a "good faith effort" to collect. Who defines that "term" ?
- The bill should include clearly defined e.g. UCR on out of network charges.

NJAHU Position: Conditionally Support (11-26-2010)



Legislative Briefing

Status

10/7/2010 Introduced, Referred to Assembly Financial
Institutions and Insurance Committee