

A-2882

Brief Description:

Requires certain health plans to include coverage for treatment at ambulatory surgical centers and surgical practices, and to provide those benefits to the same extent as provided at other health care facilities.

The bill would prohibit the Commissioner of Banking & Insurance from approving any rider that is inconsistent with the requirements of the bill and would eliminate the ability to place out of network caps on these benefits if they were inconsistent with in-network provider benefits.

**Sponsored by: Assemblyman Herb Conaway, Jr.
(Burlington & Camden)**

Reasons to Support:

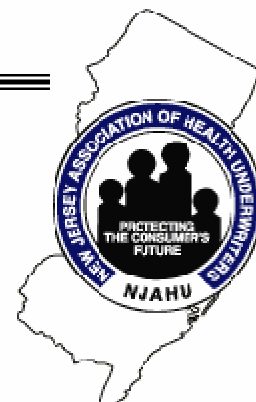
- By reducing member's out-of-pocket exposure for out of network providers, you increase access for participants to a provider base that might not normally be accessible.

Reasons to Oppose:

- Lack of transparency and controls allow for potential of tremendous increase in cost for services performed in the out-of-network setting. These costs are not seen by the patient at time of service and are blended into the overall experience of the rate pool. As insurance simply reflects the cost of care, this bill would contradict a core health reform goal of controlling costs.
- It continues to allow for the abuse of billing practices by providers.
- Increased reimbursement to providers will lead to increased premiums for the consumer.
- There is an abundance of in-network facilities that people can choose from.

NJAHU Position: Oppose

Status: 6/14/2010 Introduced in the Assembly.



Legislative Briefing