

S-358

Brief Description:

Provides in network benefits to a patient with disability for services provided by a non network provider under certain circumstances. Applies to managed care plans with in and out of network benefits when the closest network provider is more than 20 miles from the patient residence.

The covered person shall not be required to pay out of pocket that exceeds in network co-shares.

The non network provider would be required to accept network payment as payment in full.

Sponsored by: Senator L. Weinberg (Bergen) and J.Vitale (Middlesex)

Reasons to Support:

- A disabled person would likely have difficulty traveling far from home.
- The covered person would pay network charges only.
- Emphasizes the ongoing need for more in-network providers
- Increases consumer protection awareness by protecting patients from potential balance billing attempts by providers.

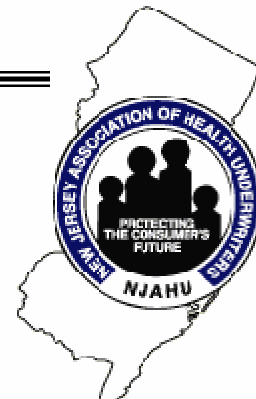
Reasons to Oppose:

- Difficult to understand how non network providers can be forced to accept network dollars.
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NJAHU Position:

Support

Status --1/10/2010 Introduced in the Senate, Referred to Senate Commerce Committee



Legislative Briefing