

**SENATE, No. 2031**

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**STATE OF NEW JERSEY**

**220th LEGISLATURE**

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INTRODUCED MARCH 3, 2022

**Sponsored by:**  
**Senator NELLIE POU**  
**District 35 (Bergen and Passaic)**

**SYNOPSIS**

Establishes process to bar certain health care providers from receiving reimbursement under PIP.

**CURRENT VERSION OF TEXT**

As introduced.



1 AN ACT concerning reimbursement of certain health care providers  
2 under personal injury protection benefits and supplementing  
3 P.L.1972, c.70 (C.39:6A-1 et seq.).  
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5 **BE IT ENACTED** by the Senate and General Assembly of the State  
6 of New Jersey:  
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8 1. a. The Commissioner of Banking and Insurance, in  
9 consultation with the Commissioner of Health and Senior Services  
10 and the Director of the Division of Consumer Affairs in the  
11 Department of Law and Public Safety, shall, by regulation,  
12 promulgate standards and procedures for investigating and  
13 temporarily suspending or barring a health care provider from  
14 demanding, requesting, or receiving reimbursement for services or  
15 equipment for which payment is to be made by an automobile  
16 insurer under personal injury protection coverage pursuant to  
17 P.L.1972, c.70 (C.39:6A-1 et seq.), or by an insurer under medical  
18 expense benefits coverage pursuant to P.L.1991, c.154 (C.17:28-1.5  
19 et seq.), upon findings reached after investigation pursuant to this  
20 section. The regulations adopted pursuant to this section shall  
21 ensure adequate due process protection to health care providers,  
22 including notice and opportunity to be heard, and shall include  
23 provision for notice to all health care providers of the provisions of  
24 this section and regulations promulgated thereunder at least 90 days  
25 in advance of the effective date of those regulations.

26 b. (1) The Commissioner of Banking and Insurance, either by  
27 his own initiative or based on the recommendation of the  
28 Commissioner of Health and Senior Services or the Director of the  
29 Division of Consumer Affairs, may conduct an investigation into  
30 any health care provider who the Commissioner of Banking and  
31 Insurance reasonably believes:

32 (a) may be guilty of professional misconduct, incompetence, or  
33 negligence as provided in section 9 of P.L.1989, c.300 (C.45:9-  
34 19.9);

35 (b) exceeded the limits of his or her professional competence in  
36 rendering medical care or who has knowingly made a false  
37 statement or representation as to a material fact in any medical  
38 report made in connection with any claim under P.L.1972, c.70  
39 (C.39:6A-1 et seq.) or P.L.1991, c.154 (C.17:28-1.5 et seq.);

40 (c) has solicited, or has employed another to solicit for himself  
41 or for another, professional treatment, examination or care of an  
42 injured person in connection with any claim under P.L.1972, c.70  
43 (C.39:6A-1 et seq.) or P.L.1991, c.154 (C.17:28-1.5 et seq.);

44 (d) has refused to appear before, or to answer upon request of,  
45 the Commissioner of Banking and Insurance, the Commissioner of  
46 Health and Senior Services, the Director of the Division of  
47 Consumer Affairs, or any duly authorized officer of the State, any

1 legal question, or to produce any relevant information concerning  
2 his or her conduct in connection with rendering medical services; or

3 (e) has engaged in patterns of billing for services which were  
4 never rendered, are of no diagnostic value, or are medically  
5 unnecessary.

6 (2) The Commissioner of Banking and Insurance shall notify  
7 any health care provider being investigated and provide the health  
8 care provider with adequate notice and opportunity to be heard.

9 (3) The Commissioner of Banking and Insurance shall make a  
10 determination, based on the investigation and the health care  
11 provider's response, whether to bar the health care provider from  
12 receiving reimbursement for services or equipment for which  
13 payment is to be made by an automobile insurer under personal  
14 injury protection coverage pursuant to P.L.1972, c.70 (C.39:6A-  
15 1 et seq.), or by an insurer under medical expense benefits coverage  
16 pursuant to P.L.1991, c.154 (C.17:28-1.5 et seq.).

17 (4) The Commissioner of Banking and Insurance shall compile a  
18 list of health care providers who are barred from demanding,  
19 requesting, or collecting reimbursement pursuant to this subsection.

20 c. Health care providers who are barred from collecting  
21 reimbursement pursuant to subsection b. of this section shall not  
22 subsequently treat for remuneration, as a private patient, any person  
23 seeking medical treatment under personal injury protection  
24 coverage pursuant to P.L.1972, c.70 (C.39:6A-1 et seq.), or by an  
25 insurer under medical expense benefits coverage pursuant to  
26 P.L.1991, c.154 (C.17:28-1.5 et seq.). An injured claimant so  
27 treated or examined may raise this as a defense in any action by that  
28 health care provider for payment for treatment rendered at any time  
29 after that health care provider has been barred from demanding,  
30 requesting, or receiving payment for medical services pursuant to  
31 this section.

32 d. The Commissioner of Banking and Insurance, the  
33 Commissioner of Health and Senior Services and the Director of the  
34 Division of Consumer Affairs shall make the list of health care  
35 providers who are barred from reimbursement pursuant to  
36 paragraph (4) of subsection b. of this section available to the public  
37 by means of their respective websites and by a toll free number.

38 e. The Commissioner of Banking and Insurance may, while  
39 conducting an investigation pursuant to this section and, after a  
40 hearing and upon written notice to the provider, temporarily  
41 suspend a health care provider from demanding, requesting, or  
42 receiving any reimbursement for services or equipment for which  
43 payment is to be made by an automobile insurer under personal  
44 injury protection coverage pursuant to P.L.1972, c.70 (C.39:6A-1 et  
45 seq.), or by an insurer under medical expense benefits coverage  
46 pursuant to P.L.1991, c.154 (C.17:28-1.5 et seq.) for up to 90 days  
47 from the date of the written notice.

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1       The bill then requires the commissioner to notify any health care  
2 provider being investigated and provide the health care provider  
3 with adequate notice and opportunity to be heard. Under the bill,  
4 the commissioner is then required to make a determination, based  
5 on the investigation and the health care provider's response,  
6 whether to temporarily suspend or bar the health care provider from  
7 demanding, requesting or receiving reimbursement for services or  
8 equipment for which payment is to be made by an automobile  
9 insurer under PIP coverage.

10       The bill also requires the commissioner to compile a list of those  
11 health care providers who are barred from collecting reimbursement  
12 under the bill. Health care providers who are barred from collecting  
13 reimbursement under the bill are prohibited from subsequently  
14 treating for remuneration, as a private patient, any person seeking  
15 medical treatment under personal injury protection coverage. An  
16 injured claimant so treated or examined is permitted to raise this as  
17 a defense in any action by that health care provider for payment for  
18 treatment rendered at any time after that health care provider has  
19 been barred from demanding or requesting payment for medical  
20 services pursuant to this section.

21       The bill also provides that the commissioner, the Commissioner  
22 of Health and Senior Services and the Director of the Division of  
23 Consumer Affairs shall make the list of health care providers who  
24 are barred from reimbursement under the bill's provisions available  
25 to the public by means of a website and by a toll free number.

26       The bill also permits the commissioner, while conducting an  
27 investigation pursuant to the bill and, after a hearing and upon  
28 written notice to the provider, to temporarily suspend a health care  
29 provider from demanding, requesting or receiving any  
30 reimbursement for services or equipment for medical expense  
31 benefits for which payment is to be made by an automobile insurer  
32 under PIP coverage.

33       The bill is not intended to affect or alter the provisions of  
34 P.L.1989, c.19 (C.45:9-22.4 et seq.), which pertain to referrals of  
35 patients by practitioners.