

ASSEMBLY, No. 4511

STATE OF NEW JERSEY

221st LEGISLATURE

INTRODUCED JUNE 6, 2024

Sponsored by:

Assemblywoman LUANNE M. PETERPAUL

District 11 (Monmouth)

Assemblyman BENJIE E. WIMBERLY

District 35 (Bergen and Passaic)

Co-Sponsored by:

Assemblywomen Donlon and Morales

SYNOPSIS

Requires health insurance carriers to provide coverage for enrollment of student in recovery high school alternative education program.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 6/13/2024)

1 AN ACT concerning health insurance coverage and amending
2 P.L.1999, c.106 and P.L.1999, c.441.

3

4 **BE IT ENACTED** by the Senate and General Assembly of the State
5 of New Jersey:

6

7 1. Section 1 of P.L.1999, c.106 (C.17:48-6v) is amended to
8 read as follows:

9 1. a. (1) Every individual and group hospital service
10 corporation contract that provides hospital or medical expense
11 benefits and is delivered, issued, executed or renewed in this State
12 pursuant to P.L.1938, c.366 (C.17:48-1 et seq.), or approved for
13 issuance or renewal in this State by the Commissioner of Banking
14 and Insurance, on or after the effective date of this act shall provide
15 coverage for mental health conditions and substance use disorders
16 under the same terms and conditions as provided for any other
17 sickness under the contract and shall meet the requirements of the
18 federal Paul Wellstone and Pete Domenici Mental Health Parity and
19 Addiction Equity Act of 2008, 42 U.S.C. s.18031(j), and any
20 amendments to, and federal guidance or regulations issued under
21 that act, including 45 C.F.R. Parts 146 and 147 and 45 C.F.R.
22 s.156.115(a)(3).

23 Coverage provided pursuant to this section shall include benefits
24 delivered through the psychiatric Collaborative Care Model.

25 Coverage provided pursuant to this section shall include benefits
26 for the enrollment of a student in a recovery high school alternative
27 education program established pursuant to P.L.2015, c.254
28 (C.18A:35-29 et seq.), if placement in the recovery high school
29 alternative education program is determined to be clinically
30 appropriate by a certified alcohol and drug counselor, licensed
31 clinical alcohol and drug counselor, treating physician, treatment
32 facility, or district student assistance counselor using the criteria for
33 substance use disorder or dependency as defined by the most recent
34 Diagnostic and Statistical Manual of Mental Disorders.

35 (2) As used in this section:

36 "Mental health condition" means a condition defined to be
37 consistent with generally recognized independent standards of
38 current medical practice referenced in the current version of the
39 Diagnostic and Statistical Manual of Mental Disorders.

40 "Psychiatric Collaborative Care Model" means the evidence-
41 based, integrated behavioral health service delivery method wherein
42 a primary care provider and a care manager collaborate with a
43 psychiatric consultant to provide care to a patient. "Psychiatric
44 Collaborative Care Model" shall include those benefits that are
45 billed using the following list of Current Procedural Terminology

EXPLANATION – Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

1 (CPT) codes, which list shall be updated by the Commissioner of
2 Banking and Insurance whenever the codes are altered or
3 supplemented:

- 4 (a) 99492 – Initial psychiatric collaborative care management;
- 5 (b) 99493 – Subsequent psychiatric collaborative care
6 management; and
- 7 (c) 99494 – Initial or subsequent psychiatric collaborative care
8 management, additional time.

9 "Same terms and conditions" means that the hospital service
10 corporation cannot apply more restrictive non-quantitative
11 limitations, such as utilization review and other criteria or more
12 quantitative limitations such as copayments, deductibles, aggregate
13 or annual limits or benefit limits to mental health condition and
14 substance use disorder benefits than those applied to substantially
15 all other medical or surgical benefits.

16 "Substance use disorder" means a disorder defined to be
17 consistent with generally recognized independent standards of
18 current medical practice referenced in the most current version of
19 the Diagnostic and Statistical Manual of Mental Disorders.

20 b. (Deleted by amendment, P.L.2019, c.58)

21 c. The provisions of this section shall apply to all contracts in
22 which the hospital service corporation has reserved the right to
23 change the premium.

24 d. Nothing in this section shall reduce the requirement for a
25 hospital service corporation to provide benefits pursuant to section
26 1 of P.L.2017, c.28 (C.17:48-6nn).

27 (cf: P.L.2022, c.33, s.1)

28

29 2. Section 2 of P.L.1999, c.106 (C.17:48A-7u) is amended to
30 read as follows:

31 2. a. (1) Every individual and group medical service
32 corporation contract that provides hospital or medical expense
33 benefits that is delivered, issued, executed or renewed in this State
34 pursuant to P.L.1940, c.74 (C.17:48A-1 et seq.), or approved for
35 issuance or renewal in this State by the Commissioner of Banking
36 and Insurance, on or after the effective date of this act shall provide
37 coverage for mental health conditions and substance use disorders
38 under the same terms and conditions as provided for any other
39 sickness under the contract and shall meet the requirements of the
40 federal Paul Wellstone and Pete Domenici Mental Health Parity and
41 Addiction Equity Act of 2008, 42 U.S.C. s.18031(j), and any
42 amendments to, and federal guidance or regulations issued under
43 that act, including 45 s.C.F.R. Parts 146 and 147 and 45 C.F.R.
44 s.156.115(a)(3).

45 Coverage provided pursuant to this section shall include benefits
46 delivered through the psychiatric Collaborative Care Model.

47 Coverage provided pursuant to this section shall include benefits
48 for the enrollment of a student in a recovery high school alternative

1 education program established pursuant to P.L.2015, c.254
2 (C.18A:35-29 et seq.), if placement in the recovery high school
3 alternative education program is determined to be clinically
4 appropriate by a certified alcohol and drug counselor, licensed
5 clinical alcohol and drug counselor, treating physician, treatment
6 facility, or district student assistance counselor using the criteria for
7 substance use disorder or dependency as defined by the most recent
8 Diagnostic and Statistical Manual of Mental Disorders.

9 (2) As used in this section:

10 "Mental health condition" means a condition defined to be
11 consistent with generally recognized independent standards of
12 current medical practice referenced in the current version of the
13 Diagnostic and Statistical Manual of Mental Disorders.

14 "Psychiatric Collaborative Care Model" means the evidence-
15 based, integrated behavioral health service delivery method wherein
16 a primary care provider and a care manager collaborate with a
17 psychiatric consultant to provide care to a patient. "Psychiatric
18 Collaborative Care Model" shall include those benefits that are
19 billed using the following list of Current Procedural Terminology
20 (CPT) codes, which list shall be updated by the Commissioner of
21 Banking and Insurance whenever the codes are altered or
22 supplemented:

- 23 (a) 99492 – Initial psychiatric collaborative care management;
24 (b) 99493 – Subsequent psychiatric collaborative care
25 management; and
26 (c) 99494 – Initial or subsequent psychiatric collaborative care
27 management, additional time.

28 "Same terms and conditions" means that the medical service
29 corporation cannot apply more restrictive non-quantitative
30 limitations, such as utilization review and other criteria or more
31 quantitative limitations such as copayments, deductibles, aggregate
32 or annual limits or benefit limits to mental health condition and
33 substance use disorder benefits than those applied to substantially
34 all other medical or surgical benefits.

35 "Substance use disorder" means a disorder defined to be
36 consistent with generally recognized independent standards of
37 current medical practice referenced in the most current version of
38 the Diagnostic and Statistical Manual of Mental Disorders.

39 b. (Deleted by amendment, P.L.2019, c.58)

40 c. The provisions of this section shall apply to all contracts in
41 which the medical service corporation has reserved the right to
42 change the premium.

43 d. Nothing in this section shall reduce the requirement for a
44 medical service corporation to provide benefits pursuant to section
45 2 of P.L.2017, c.28 (C.17:48A-7kk).

46 (cf: P.L.2022, c.33, s.2)

1 3. Section 3 of P.L.1999, c.106 (C.17:48E-35.20) is amended
2 to read as follows:

3 3. a. (1) Every individual and group health service
4 corporation contract that provides hospital or medical expense
5 benefits and is delivered, issued, executed or renewed in this State
6 pursuant to P.L.1985, c.236 (C.17:48E-1 et seq.), or approved for
7 issuance or renewal in this State by the Commissioner of Banking
8 and Insurance, on or after the effective date of this act shall provide
9 coverage for mental health conditions and substance use disorders
10 under the same terms and conditions as provided for any other
11 sickness under the contract and shall meet the requirements of the
12 federal Paul Wellstone and Pete Domenici Mental Health Parity and
13 Addiction Equity Act of 2008, 42 U.S.C. s.18031(j), and any
14 amendments to, and federal guidance or regulations issued under
15 that act, including 45 C.F.R. Parts 146 and 147 and 45 C.F.R.
16 s.156.115(a)(3).

17 Coverage provided pursuant to this section shall include benefits
18 delivered through the psychiatric Collaborative Care Model.

19 Coverage provided pursuant to this section shall include benefits
20 for the enrollment of a student in a recovery high school alternative
21 education program established pursuant to P.L.2015, c.254
22 (C.18A:35-29 et seq.), if placement in the recovery high school
23 alternative education program is determined to be clinically
24 appropriate by a certified alcohol and drug counselor, licensed
25 clinical alcohol and drug counselor, treating physician, treatment
26 facility, or district student assistance counselor using the criteria for
27 substance use disorder or dependency as defined by the most recent
28 Diagnostic and Statistical Manual of Mental Disorders.

29 (2) As used in this section:

30 "Mental health condition" means a condition defined to be
31 consistent with generally recognized independent standards of
32 current medical practice referenced in the current version of the
33 Diagnostic and Statistical Manual of Mental Disorders.

34 "Psychiatric Collaborative Care Model" means the evidence-
35 based, integrated behavioral health service delivery method wherein
36 a primary care provider and a care manager collaborate with a
37 psychiatric consultant to provide care to a patient. "Psychiatric
38 Collaborative Care Model" shall include those benefits that are
39 billed using the following list of Current Procedural Terminology
40 (CPT) codes, which list shall be updated by the Commissioner of
41 Banking and Insurance whenever the codes are altered or
42 supplemented:

- 43 (a) 99492 – Initial psychiatric collaborative care management;
44 (b) 99493 – Subsequent psychiatric collaborative care
45 management; and
46 (c) 99494 – Initial or subsequent psychiatric collaborative care
47 management, additional time.

1 "Same terms and conditions" means that the health service
2 corporation cannot apply more restrictive non-quantitative
3 limitations, such as utilization review and other criteria or more
4 quantitative limitations such as copayments, deductibles, aggregate
5 or annual limits or benefit limits to mental health condition and
6 substance use disorder benefits than those applied to substantially
7 all other medical or surgical benefits.

8 "Substance use disorder" means a disorder defined to be
9 consistent with generally recognized independent standards of
10 current medical practice referenced in the most current version of
11 the Diagnostic and Statistical Manual of Mental Disorders.

12 b. (Deleted by amendment, P.L.2019, c.58)

13 c. The provisions of this section shall apply to all contracts in
14 which the health service corporation has reserved the right to
15 change the premium.

16 d. Nothing in this section shall reduce the requirement for a
17 health service corporation to provide benefits pursuant to section 3
18 of P.L.2017, c.28 (C.17:48E-35.38).

19 (cf: P.L.2022, c.33, s.3)

20

21 4. Section 4 of P.L.1999, c.106 (C.17B:26-2.1s) is amended to
22 read as follows:

23 4. a. (1) Every individual health insurance policy that
24 provides hospital or medical expense benefits and is delivered,
25 issued, executed or renewed in this State pursuant to chapter 26 of
26 Title 17B of the New Jersey Statutes, or approved for issuance or
27 renewal in this State by the Commissioner of Banking and
28 Insurance, on or after the effective date of this act shall provide
29 coverage for mental health conditions and substance use disorders
30 under the same terms and conditions as provided for any other
31 sickness under the contract and shall meet the requirements of the
32 federal Paul Wellstone and Pete Domenici Mental Health Parity and
33 Addiction Equity Act of 2008, 42 U.S.C. s.18031(j), and any
34 amendments to, and federal guidance or regulations issued under
35 that act, including 45 C.F.R. Parts 146 and 147 and 45 C.F.R.
36 s.156.115(a)(3).

37 Coverage provided pursuant to this section shall include benefits
38 delivered through the psychiatric Collaborative Care Model.

39 Coverage provided pursuant to this section shall include benefits
40 for the enrollment of a student in a recovery high school alternative
41 education program established pursuant to P.L.2015, c.254
42 (C.18A:35-29 et seq.), if placement in the recovery high school
43 alternative education program is determined to be clinically
44 appropriate by a certified alcohol and drug counselor, licensed
45 clinical alcohol and drug counselor, treating physician, treatment
46 facility, or district student assistance counselor using the criteria for
47 substance use disorder or dependency as defined by the most recent
48 Diagnostic and Statistical Manual of Mental Disorders.

1 (2) As used in this section:

2 "Mental health condition" means a condition defined to be
3 consistent with generally recognized independent standards of
4 current medical practice referenced in the current version of the
5 Diagnostic and Statistical Manual of Mental Disorders.

6 "Psychiatric Collaborative Care Model" means the evidence-
7 based, integrated behavioral health service delivery method wherein
8 a primary care provider and a care manager collaborate with a
9 psychiatric consultant to provide care to a patient. "Psychiatric
10 Collaborative Care Model" shall include those benefits that are
11 billed using the following list of Current Procedural Terminology
12 (CPT) codes, which list shall be updated by the Commissioner of
13 Banking and Insurance whenever the codes are altered or
14 supplemented:

15 (a) 99492 – Initial psychiatric collaborative care management;

16 (b) 99493 – Subsequent psychiatric collaborative care
17 management; and

18 (c) 99494 – Initial or subsequent psychiatric collaborative care
19 management, additional time.

20 "Same terms and conditions" means that the insurer cannot apply
21 more restrictive non-quantitative limitations, such as utilization
22 review and other criteria or more quantitative limitations such as
23 copayments, deductibles, aggregate or annual limits or benefit
24 limits to mental health condition and substance use disorder
25 benefits than those applied to substantially all other medical or
26 surgical benefits.

27 "Substance use disorder" means a disorder defined to be
28 consistent with generally recognized independent standards of
29 current medical practice referenced in the most current version of
30 the Diagnostic and Statistical Manual of Mental Disorders.

31 b. (Deleted by amendment, P.L.2019, c.58)

32 c. The provisions of this section shall apply to all policies in
33 which the insurer has reserved the right to change the premium.

34 d. Nothing in this section shall reduce the requirement for an
35 insurer to provide benefits pursuant to section 4 of P.L.2017, c.28
36 (C.17B:26-2.1hh).

37 (cf: P.L.2022, c.33, s.4)

38

39 5. Section 5 of P.L.1999, c.106 (C.17B:27-46.1v) is amended
40 to read as follows:

41 5. a. (1) Every group health insurance policy that provides
42 hospital or medical expense benefits and is delivered, issued,
43 executed or renewed in this State pursuant to chapter 27 of Title
44 17B of the New Jersey Statutes, or approved for issuance or renewal
45 in this State by the Commissioner of Banking and Insurance, on or
46 after the effective date of this act shall provide benefits for mental
47 health conditions and substance use disorders under the same terms
48 and conditions as provided for any other sickness under the policy

1 and shall meet the requirements of the federal Paul Wellstone and
2 Pete Domenici Mental Health Parity and Addiction Equity Act of
3 2008, 42 U.S.C. s.18031(j), and any amendments to, and federal
4 guidance or regulations issued under that act, including 45 C.F.R.
5 Parts 146 and 147 and 45 C.F.R. s.156.115(a)(3).

6 Coverage provided pursuant to this section shall include benefits
7 delivered through the psychiatric Collaborative Care Model.

8 Coverage provided pursuant to this section shall include benefits
9 for the enrollment of a student in a recovery high school alternative
10 education program established pursuant to P.L.2015, c.254
11 (C.18A:35-29 et seq.), if placement in the recovery high school
12 alternative education program is determined to be clinically
13 appropriate by a certified alcohol and drug counselor, licensed
14 clinical alcohol and drug counselor, treating physician, treatment
15 facility, or district student assistance counselor using the criteria for
16 substance use disorder or dependency as defined by the most recent
17 Diagnostic and Statistical Manual of Mental Disorders.

18 (2) As used in this section:

19 "Mental health condition" means a condition defined to be
20 consistent with generally recognized independent standards of
21 current medical practice referenced in the current version of the
22 Diagnostic and Statistical Manual of Mental Disorders.

23 "Psychiatric Collaborative Care Model" means the evidence-
24 based, integrated behavioral health service delivery method wherein
25 a primary care provider and a care manager collaborate with a
26 psychiatric consultant to provide care to a patient. "Psychiatric
27 Collaborative Care Model" shall include those benefits that are
28 billed using the following list of Current Procedural Terminology
29 (CPT) codes, which list shall be updated by the Commissioner of
30 Banking and Insurance whenever the codes are altered or
31 supplemented:

32 (a) 99492 – Initial psychiatric collaborative care management;

33 (b) 99493 – Subsequent psychiatric collaborative care
34 management; and

35 (c) 99494 – Initial or subsequent psychiatric collaborative care
36 management, additional time.

37 "Same terms and conditions" means that the insurer cannot apply
38 more restrictive non-quantitative limitations, such as utilization
39 review and other criteria or more quantitative limitations such as
40 copayments, deductibles, aggregate or annual limits or benefit
41 limits to mental health condition and substance use disorder
42 benefits than those applied to substantially all other medical or
43 surgical benefits.

44 "Substance use disorder" means a disorder defined to be consistent
45 with generally recognized independent standards of current medical
46 practice referenced in the most current version of the Diagnostic
47 and Statistical Manual of Mental Disorders.

48 b. (Deleted by amendment, P.L.2019, c.59)

1 c. The provisions of this section shall apply to all policies in
2 which the insurer has reserved the right to change the premium.

3 d. Nothing in this section shall reduce the requirement for an
4 insurer to provide benefits pursuant to section 5 of P.L.2017, c.28
5 (C.17B:27-46.1nn).

6 (cf: P.L.2022, c.33, s.5)

7

8 6. Section 6 of P.L.1999, c.106 (C.17B:27A-7.5) is amended to
9 read as follows:

10 6. a. (1) Every individual health benefits plan that provides
11 hospital or medical expense benefits and is delivered, issued,
12 executed or renewed in this State pursuant to P.L.1992, c.161
13 (C.17B:27A-2 et seq.) or approved for issuance or renewal in this
14 State on or after the effective date of this act shall provide benefits
15 for mental health conditions and substance use disorders under the
16 same terms and conditions as provided for any other sickness under
17 the health benefits plan and shall meet the requirements of the
18 federal Paul Wellstone and Pete Domenici Mental Health Parity and
19 Addiction Equity Act of 2008, 42 U.S.C. s.18031(j), and any
20 amendments to, and federal guidance or regulations issued under
21 that act, including 45 C.F.R. Parts 146 and 147 and 45 C.F.R.
22 s.156.115(a)(3).

23 Coverage provided pursuant to this section shall include benefits
24 delivered through the psychiatric Collaborative Care Model.

25 Coverage provided pursuant to this section shall include benefits
26 for the enrollment of a student in a recovery high school alternative
27 education program established pursuant to P.L.2015, c.254
28 (C.18A:35-29 et seq.), if placement in the recovery high school
29 alternative education program is determined to be clinically
30 appropriate by a certified alcohol and drug counselor, licensed
31 clinical alcohol and drug counselor, treating physician, treatment
32 facility, or district student assistance counselor using the criteria for
33 substance use disorder or dependency as defined by the most recent
34 Diagnostic and Statistical Manual of Mental Disorders.

35 (2) As used in this section:

36 "Mental health condition" means a condition defined to be
37 consistent with generally recognized independent standards of
38 current medical practice referenced in the current version of the
39 Diagnostic and Statistical Manual of Mental Disorders.

40 "Psychiatric Collaborative Care Model" means the evidence-
41 based, integrated behavioral health service delivery method wherein
42 a primary care provider and a care manager collaborate with a
43 psychiatric consultant to provide care to a patient. "Psychiatric
44 Collaborative Care Model" shall include those benefits that are
45 billed using the following list of Current Procedural Terminology
46 (CPT) codes, which list shall be updated by the Commissioner of
47 Banking and Insurance whenever the codes are altered or
48 supplemented:

- 1 (a) 99492 – Initial psychiatric collaborative care management;
2 (b) 99493 – Subsequent psychiatric collaborative care
3 management; and
4 (c) 99494 – Initial or subsequent psychiatric collaborative care
5 management, additional time.

6 "Same terms and conditions" means that the plan cannot apply
7 more restrictive non-quantitative limitations, such as utilization
8 review and other criteria or more quantitative limitations such as
9 copayments, deductibles, aggregate or annual limits or benefit
10 limits to mental health condition and substance use disorder
11 benefits than those applied to substantially all other medical or
12 surgical benefits.

13 "Substance use disorder" means a disorder defined to be
14 consistent with generally recognized independent standards of
15 current medical practice referenced in the most current version of
16 the Diagnostic and Statistical Manual of Mental Disorders.

17 b. (Deleted by amendment, P.L.2019, c.58)

18 c. The provisions of this section shall apply to all health
19 benefits plans in which the carrier has reserved the right to change
20 the premium.

21 d. Nothing in this section shall reduce the requirement for a
22 plan to provide benefits pursuant to section 6 of P.L.2017, c.28
23 (C.17B:27A-7.21).

24 (cf: P.L.2022, c.33, s.6)

25

26 7. Section 7 of P.L.1999, c.106 (C.17B:27A-19.7) is amended
27 to read as follows:

28 7. a. (1) Every small employer health benefits plan that
29 provides hospital or medical expense benefits and is delivered,
30 issued, executed or renewed in this State pursuant to
31 P.L.1992, c.162 (C.17B:27A-17 et seq.) or approved for issuance or
32 renewal in this State on or after the effective date of this act shall
33 provide benefits for mental health conditions and substance use
34 disorders under the same terms and conditions as provided for any
35 other sickness under the health benefits plan and shall meet the
36 requirements of the federal Paul Wellstone and Pete Domenici
37 Mental Health Parity and Addiction Equity Act of 2008, 42 U.S.C.
38 s.18031(j), and any amendments to, and federal guidance or
39 regulations issued under that act, including 45 C.F.R. Parts 146 and
40 147 and 45 C.F.R. s.156.115(a)(3).

41 Coverage provided pursuant to this section shall include benefits
42 delivered through the psychiatric Collaborative Care Model.

43 Coverage provided pursuant to this section shall include benefits
44 for the enrollment of a student in a recovery high school alternative
45 education program established pursuant to P.L.2015, c.254
46 (C.18A:35-29 et seq.), if placement in the recovery high school
47 alternative education program is determined to be clinically
48 appropriate by a certified alcohol and drug counselor, licensed

1 clinical alcohol and drug counselor, treating physician, treatment
2 facility, or district student assistance counselor using the criteria for
3 substance use disorder or dependency as defined by the most recent
4 Diagnostic and Statistical Manual of Mental Disorders.

5 (2) As used in this section:

6 "Mental health condition" means a condition defined to be
7 consistent with generally recognized independent standards of
8 current medical practice referenced in the current version of the
9 Diagnostic and Statistical Manual of Mental Disorders.

10 "Psychiatric Collaborative Care Model" means the evidence-
11 based, integrated behavioral health service delivery method wherein
12 a primary care provider and a care manager collaborate with a
13 psychiatric consultant to provide care to a patient. "Psychiatric
14 Collaborative Care Model" shall include those benefits that are
15 billed using the following list of Current Procedural Terminology
16 (CPT) codes, which list shall be updated by the Commissioner of
17 Banking and Insurance whenever the codes are altered or
18 supplemented:

19 (a) 99492 – Initial psychiatric collaborative care management;

20 (b) 99493 – Subsequent psychiatric collaborative care
21 management; and

22 (c) 99494 – Initial or subsequent psychiatric collaborative care
23 management, additional time.

24 "Same terms and conditions" means that the plan cannot apply
25 more restrictive non-quantitative limitations, such as utilization
26 review and other criteria or more quantitative limitations such as
27 copayments, deductibles, aggregate or annual limits or benefit
28 limits to mental health condition and substance use disorder
29 benefits than those applied to substantially all other medical or
30 surgical benefits.

31 "Substance use disorder" means a disorder defined to be
32 consistent with generally recognized independent standards of
33 current medical practice referenced in the most current version of
34 the Diagnostic and Statistical Manual of Mental Disorders.

35 b. (Deleted by amendment, P.L.2019, c.58)

36 c. The provisions of this section shall apply to all health
37 benefits plans in which the carrier has reserved the right to change
38 the premium.

39 d. Nothing in this section shall reduce the requirement for a
40 plan to provide benefits pursuant to section 7 of P.L.2017, c.28
41 (C.17B:27A-19.25).

42 (cf: P.L.2022, c.33, s.7)

43

44 8. Section 8 of P.L.1999, c.106 (C.26:2J-4.20) is amended to
45 read as follows:

46 8. a. (1) Every enrollee agreement delivered, issued,
47 executed, or renewed in this State pursuant to P.L.1973, c.337
48 (C.26:2J-1 et seq.) or approved for issuance or renewal in this State

1 by the Commissioner of Banking and Insurance, on or after the
2 effective date of this act shall provide health care services for
3 mental health conditions and substance use disorders under the
4 same terms and conditions as provided for any other sickness under
5 the agreement and shall meet the requirements of the federal Paul
6 Wellstone and Pete Domenici Mental Health Parity and Addiction
7 Equity Act of 2008, 42 U.S.C. s.18031(j), and any amendments to,
8 and federal guidance or regulations issued under that act, including
9 45 C.F.R. Parts 146 and 147 and 45 C.F.R. s.156.115(a)(3).

10 Coverage provided pursuant to this section shall include benefits
11 delivered through the psychiatric Collaborative Care Model.

12 Coverage provided pursuant to this section shall include benefits
13 for the enrollment of a student in a recovery high school alternative
14 education program established pursuant to P.L.2015, c.254
15 (C.18A:35-29 et seq.), if placement in the recovery high school
16 alternative education program is determined to be clinically
17 appropriate by a certified alcohol and drug counselor, licensed
18 clinical alcohol and drug counselor, treating physician, treatment
19 facility, or district student assistance counselor using the criteria for
20 substance use disorder or dependency as defined by the most recent
21 Diagnostic and Statistical Manual of Mental Disorders.

22 (2) As used in this section:

23 "Mental health condition" means a condition defined to be
24 consistent with generally recognized independent standards of
25 current medical practice referenced in the current version of the
26 Diagnostic and Statistical Manual of Mental Disorders.

27 "Psychiatric Collaborative Care Model" means the evidence-
28 based, integrated behavioral health service delivery method wherein
29 a primary care provider and a care manager collaborate with a
30 psychiatric consultant to provide care to a patient. "Psychiatric
31 Collaborative Care Model" shall include those benefits that are
32 billed using the following list of Current Procedural Terminology
33 (CPT) codes, which list shall be updated by the Commissioner of
34 Banking and Insurance whenever the codes are altered or
35 supplemented:

36 (a) 99492 – Initial psychiatric collaborative care management;

37 (b) 99493 – Subsequent psychiatric collaborative care
38 management; and

39 (c) 99494 – Initial or subsequent psychiatric collaborative care
40 management, additional time.

41 "Same terms and conditions" means that the health maintenance
42 organization cannot apply more restrictive non-quantitative
43 limitations, such as utilization review and other criteria or more
44 quantitative limitations such as copayments, deductibles,, aggregate
45 or annual limits or health care services limits to mental health
46 condition and substance use disorder services than those applied to
47 substantially all other medical or surgical health care services.

1 "Substance use disorder" means a disorder defined to be
2 consistent with generally recognized independent standards of
3 current medical practice referenced in the most current version of
4 the Diagnostic and Statistical Manual of Mental Disorders.

5 b. (Deleted by amendment, P.L.2019, c.58)

6 c. The provisions of this section shall apply to enrollee
7 agreements in which the health maintenance organization has
8 reserved the right to change the premium.

9 d. Nothing in this section shall reduce the requirement for a
10 health maintenance organization to provide benefits pursuant to
11 section 8 of P.L.2017, c.28 (C.26:2J-4.39).

12 (cf: P.L.2022, c.33, s.8)

13
14 9. Section 2 of P.L.1999, c.441 (C.52:14-17.29e) is amended to
15 read as follows:

16 2. a. The State Health Benefits Commission shall ensure that
17 every contract purchased by the commission on or after the
18 effective date of this act that provides hospital or medical expense
19 benefits shall provide coverage for mental health conditions and
20 substance use disorders under the same terms and conditions as
21 provided for any other sickness under the contract and shall meet
22 the requirements of the federal Paul Wellstone and Pete Domenici
23 Mental Health Parity and Addiction Equity Act of 2008, 42 U.S.C.
24 s.18031(j), and any amendments to, and federal guidance or
25 regulations issued under that act, including 45 C.F.R. Parts 146 and
26 147 and 45 C.F.R. s.156.115(a)(3).

27 Coverage provided pursuant to this section shall include benefits
28 delivered through the psychiatric Collaborative Care Model.

29 Coverage provided pursuant to this section shall include benefits
30 for the enrollment of a student in a recovery high school alternative
31 education program established pursuant to P.L.2015, c.254
32 (C.18A:35-29 et seq.), if placement in the recovery high school
33 alternative education program is determined to be clinically
34 appropriate by a certified alcohol and drug counselor, licensed
35 clinical alcohol and drug counselor, treating physician, treatment
36 facility, or district student assistance counselor using the criteria for
37 substance use disorder or dependency as defined by the most recent
38 Diagnostic and Statistical Manual of Mental Disorders.

39 b. The commission shall provide notice to employees regarding
40 the coverage required by this section in accordance with this
41 subsection and regulations promulgated by the Commissioner of
42 Health pursuant to the "Administrative Procedure Act,"
43 P.L.1968, c.410 (C.52:14B-1 et seq.). The notice shall be in writing
44 and prominently positioned in any literature or correspondence and
45 shall be transmitted at the earliest of: (1) the next mailing to the
46 employee; (2) the yearly informational packet sent to the employee;
47 or (3) July 1, 2000. The commission shall also ensure that the
48 carrier under contract with the commission, upon receipt of

1 information that a covered person is receiving treatment for a
2 mental health condition or substance use disorder, shall promptly
3 notify that person of the coverage required by this section.

4 c. Nothing in this section shall reduce the requirement for a
5 carrier to provide benefits pursuant to section 9 of P.L.2017, c.28
6 (C.52:14-17.29u).
7 (cf: P.L.2022, c.33, s.10)

8
9 10. This act shall take effect on the 60th day after enactment and
10 shall apply to all contracts and policies delivered, issued, executed,
11 or renewed on or after that date.

12

13

14 STATEMENT

15

16 This bill requires hospital, medical and health service
17 corporations, commercial insurers, health maintenance
18 organizations, health benefits plans issued pursuant to the New
19 Jersey Individual Health Coverage and Small Employer Health
20 Benefits Programs, the State Health Benefits Program, and the
21 School Employees' Health Benefits Program, to provide coverage
22 for benefits for the enrollment of a student in a recovery high school
23 alternative education program established pursuant to State law.
24 The bill requires health insurance coverage only if placement in the
25 recovery high school alternative education program is determined to
26 be clinically appropriate by a certified alcohol and drug counselor,
27 licensed clinical alcohol and drug counselor, treating physician,
28 treatment facility, or district student assistance counselor using the
29 criteria for substance use disorder or dependency as defined by the
30 most recent Diagnostic and Statistical Manual of Mental Disorders.

31 Under current law, a "recovery high school alternative education
32 program" means an alternative education program that serves
33 students diagnosed with substance use disorder or dependency as
34 defined by the most recent Diagnostic and Statistical Manual of
35 Mental Disorders, and that provides a comprehensive four-year high
36 school education in an alternative public school setting and a
37 structured plan of recovery that is aligned with the national
38 framework of evidence-based practices for recovery high schools.