

**SENATE, No. 3060**

**STATE OF NEW JERSEY**

**221st LEGISLATURE**

INTRODUCED APRIL 8, 2024

**Sponsored by:**

**Senator TROY SINGLETON**

**District 7 (Burlington)**

**Co-Sponsored by:**

**Senator Gopal**

**SYNOPSIS**

Expands requirements for health insurance carriers concerning prostate cancer screening and requires coverage be provided without cost sharing.

**CURRENT VERSION OF TEXT**

As introduced.



**(Sponsorship Updated As Of: 4/8/2024)**

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1 AN ACT concerning health insurance coverage for prostate cancer  
2 screening and amending P.L.1996, c.125 and supplementing  
3 various parts of the statutory law.

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

7  
8 1. Section 1 of P.L.1996, c.125 (C.17:48E-35.13) is amended  
9 to read as follows:.

10 1. a. No health service corporation contract providing hospital  
11 or medical expense benefits **【for groups with greater than 49**  
12 **persons】** shall be delivered, issued, executed or renewed in this  
13 State, or approved for issuance or renewal in this State by the  
14 Commissioner of Insurance on or after the effective date of **【this**  
15 **act】** P.L.1996, c.125 (C.17:48E-35.13 et al.), unless the contract  
16 provides benefits to any named subscriber or other person covered  
17 thereunder for expenses incurred in conducting an annual  
18 **【medically recognized diagnostic examination including, but not**  
19 **limited to, a digital rectal examination and a prostate-specific**  
20 **antigen test for men age 50 and over who are asymptomatic and for**  
21 **men age 40 and over with a family history of prostate cancer or**  
22 **other prostate cancer risk factors】** prostate cancer screening.

23 The benefits shall be provided to the same extent as for any other  
24 medical condition under the contract except that no deductible,  
25 coinsurance, copayment, or any other cost-sharing requirement on  
26 the benefits shall be imposed for men who are between 40 and 75  
27 years of age.

28 This section shall apply to all health service corporation  
29 contracts in which the health service corporation has reserved the  
30 right to change the premium.

31 b. As used in this section:

32 “Prostate cancer screening” means medically viable methods for  
33 the detection and diagnosis of prostate cancer, which includes a  
34 digital rectal exam and the prostate-specific antigen test and  
35 associated laboratory work. “Prostate cancer screening” shall also  
36 include subsequent follow up testing as direct by a health care  
37 provider, including, but not limited to:

38 (1) urinary analysis;

39 (2) serum biomarkers;

40 (3) medical imaging, including, but not limited to, magnetic  
41 resonance imaging.

42 (cf: P.L.1996, c.125, s.1)

43  
44 2. Section 2 of P.L.1996, c.125 (C.17:48-6p) is amended to  
45 read as follows:

**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       2. a. No hospital service corporation contract providing  
2 hospital or medical expense benefits **【for groups with greater than**  
3 **49 persons】** shall be delivered, issued, executed or renewed in this  
4 State, or approved for issuance or renewal in this State by the  
5 Commissioner of Insurance on or after the effective date of **【this**  
6 **act】** P.L.1996, c.125 (C.17:48E-35.13 et al.), unless the contract  
7 provides benefits to any named subscriber or other person covered  
8 thereunder for expenses incurred in conducting an annual  
9 **【medically recognized diagnostic examination including, but not**  
10 **limited to, a digital rectal examination and a prostate-specific**  
11 **antigen test for men age 50 and over who are asymptomatic and for**  
12 **men age 40 and over with a family history of prostate cancer or**  
13 **other prostate cancer risk factors】**prostate cancer screening.

14       The benefits shall be provided to the same extent as for any other  
15 medical condition under the contract except that no deductible,  
16 coinsurance, copayment, or any other cost-sharing requirement on  
17 the benefits shall be imposed for men who are between 40 and 75  
18 years of age.

19       This section shall apply to all hospital service corporation  
20 contracts in which the hospital service corporation has reserved the  
21 right to change the premium.

22       b. As used in this section:

23       “Prostate cancer screening” means medically viable methods for  
24 the detection and diagnosis of prostate cancer, which includes a  
25 digital rectal exam and the prostate-specific antigen test and  
26 associated laboratory work. “Prostate cancer screening” shall also  
27 include subsequent follow up testing as direct by a health care  
28 provider, including, but not limited to:

29       (1) urinary analysis;

30       (2) serum biomarkers;

31       (3) medical imaging, including, but not limited to, magnetic  
32 resonance imaging.

33       (cf: P.L.1996, c.125, s.2)

34

35       3. Section 3 of P.L.1996, c.125 (C.17:48A-7n) is amended to  
36 read as follows:

37       3. a. No medical service corporation contract providing  
38 hospital or medical expense benefits **【for groups with greater than**  
39 **49 persons】** shall be delivered, issued, executed or renewed in this  
40 State, or approved for issuance or renewal in this State by the  
41 Commissioner of Insurance on or after the effective date of **【this**  
42 **act】** P.L.1996, c.125 (C.17:48E-35.13 et al.), unless the contract  
43 provides benefits to any named subscriber or other person covered  
44 thereunder for expenses incurred in conducting an annual  
45 **【medically recognized diagnostic examination including, but not**  
46 **limited to, a digital rectal examination and a prostate-specific**  
47 **anitgen test for men age 50 and over who are asymptomatic and for**

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1 men age 40 and over with a family history of prostate cancer or  
2 other prostate cancer risk factors **】** prostate cancer screening.

3 The benefits shall be provided to the same extent as for any other  
4 medical condition under the contract except that no deductible,  
5 coinsurance, copayment, or any other cost-sharing requirement on  
6 the benefits shall be imposed for men who are between 40 and 75  
7 years of age.

8 This section shall apply to all medical service corporation  
9 contracts in which the medical service corporation has reserved the  
10 right to change the premium.

11 b. As used in this section:

12 “Prostate cancer screening” means medically viable methods for  
13 the detection and diagnosis of prostate cancer, which includes a  
14 digital rectal exam and the prostate-specific antigen test and  
15 associated laboratory work. “Prostate cancer screening” shall also  
16 include subsequent follow up testing as direct by a health care  
17 provider, including, but not limited to:

18 (1) urinary analysis;

19 (2) serum biomarkers;

20 (3) medical imaging, including, but not limited to, magnetic  
21 resonance imaging.

22 (cf: P.L.1996, c.125, s.3)

23

24 4. Section 4 of P.L.1996, c.125 (C.17B:27-46.1o) is amended  
25 to read as follows:

26 4. a. No group health insurance policy providing hospital or  
27 medical expense benefits **【**for groups with greater than 49 persons**】**  
28 shall be delivered, issued, executed or renewed in this State, or  
29 approved for issuance or renewal in this State by the Commissioner  
30 of Insurance on or after the effective date of **【**this act**】** P.L.1996,  
31 c.125 (C.17:48E-35.13 et al.), unless the policy provides benefits to  
32 any named insured or other person covered thereunder for expenses  
33 incurred in conducting an annual **【**medically recognized diagnostic  
34 examination including, but not limited to, a digital rectal  
35 examination and a prostate-specific antigen test for men age 50 and  
36 over who are asymptomatic and for men age 40 and over with a  
37 family history of prostate cancer or other prostate cancer risk  
38 factors **】** prostate cancer screening.

39 The benefits shall be provided to the same extent as for any other  
40 medical condition under the policy except that no deductible,  
41 coinsurance, copayment, or any other cost-sharing requirement on  
42 the benefits shall be imposed for men who are between 40 and 75  
43 years of age.

44 This section shall apply to all group health insurance policies in  
45 which the health insurer has reserved the right to change the  
46 premium.

47 b. As used in this section:

1       “Prostate cancer screening” means medically viable methods for  
2 the detection and diagnosis of prostate cancer, which includes a  
3 digital rectal exam and the prostate-specific antigen test and  
4 associated laboratory work. “Prostate cancer screening” shall also  
5 include subsequent follow up testing as direct by a health care  
6 provider, including, but not limited to:

7       (1) urinary analysis;

8       (2) serum biomarkers;

9       (3) medical imaging, including, but not limited to, magnetic  
10 resonance imaging.

11 (cf: P.L.1996, c.125, s.4)

12  
13       5. Section 5 of P.L.1996, c.125 (C.26:2J-4.13) is amended to  
14 read as follows:

15       5. a. A certificate of authority to establish and operate a health  
16 maintenance organization in this State shall not be issued or  
17 continued by the Commissioner of Health on or after the effective  
18 date of **【this act】** P.L.1996, c.125 (C.17:48E-35.13 et al.) unless the  
19 health maintenance organization provides health care services to  
20 any enrollee which include an annual **【medically recognized**  
21 **diagnostic examination including, but not limited to, a digital rectal**  
22 **examination and a prostate-specific antigen test for men age 50 and**  
23 **over who are asymptomatic and for men age 40 and over with a**  
24 **family history of prostate cancer or other prostate cancer risk**  
25 **factors】** prostate cancer screening.

26       The health care services shall be provided to the same extent as  
27 for any other medical condition under the contract except that no  
28 deductible, coinsurance, copayment, or any other cost-sharing  
29 requirement on the services shall be imposed for men who are  
30 between 40 and 75 years of age.

31       The provisions of this section shall apply to all contracts for  
32 health care services by health maintenance organizations under  
33 which the right to change the schedule of charges for enrollee  
34 coverage is reserved.

35       b. As used in this section:

36       “Prostate cancer screening” means medically viable methods for  
37 the detection and diagnosis of prostate cancer, which includes a  
38 digital rectal exam and the prostate-specific antigen test and  
39 associated laboratory work. “Prostate cancer screening” shall also  
40 include subsequent follow up testing as directed by a health care  
41 provider, including, but not limited to:

42       (1) urinary analysis;

43       (2) serum biomarkers;

44       (3) medical imaging, including, but not limited to, magnetic  
45 resonance imaging.

46 (cf: P.L.1996, c.125, s.5)

1       6. (New section) a. Every individual health insurance policy  
2 that provides hospital or medical expense benefits and is delivered,  
3 issued, executed or renewed in this State pursuant to chapter 26 of  
4 Title 17B of the New Jersey Statutes, or approved for issuance or  
5 renewal in this State by the Commissioner of Banking and  
6 Insurance, on or after the effective date of this act shall provide  
7 coverage for an annual prostate cancer screening.

8       The benefits shall be provided to the same extent as for any other  
9 medical condition under the contract except that no deductible,  
10 coinsurance, copayment, or any other cost-sharing requirement on  
11 the services shall be imposed for men who are between 40 and 75  
12 years of age.

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

15       b. As used in this section:

16       “Prostate cancer screening” means medically viable methods for  
17 the detection and diagnosis of prostate cancer, which includes a  
18 digital rectal exam and the prostate-specific antigen test and  
19 associated laboratory work. “Prostate cancer screening” shall also  
20 include subsequent follow up testing as direct by a health care  
21 provider, including, but not limited to:

22       (1) urinary analysis;

23       (2) serum biomarkers;

24       (3) medical imaging, including, but not limited to, magnetic  
25 resonance imaging.

26  
27       7. (New section) a. Every individual health benefits plan that  
28 provides hospital or medical expense benefits and is delivered,  
29 issued, executed or renewed in this State pursuant to P.L.1992,  
30 c.161 (C.17B:27A-2 et seq.) or approved for issuance or renewal in  
31 this State on or after the effective date of this act shall provide  
32 benefits for an annual prostate cancer screening.

33       The benefits shall be provided to the same extent as for any other  
34 medical condition under the contract except that no deductible,  
35 coinsurance, copayment, or any other cost-sharing requirement on  
36 the services shall be imposed for men who are between 40 and 75  
37 years of age.

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

41       b. As used in this section:

42       “Prostate cancer screening” means medically viable methods for  
43 the detection and diagnosis of prostate cancer, which includes a  
44 digital rectal exam and the prostate-specific antigen test and  
45 associated laboratory work. “Prostate cancer screening” shall also  
46 include subsequent follow up testing as direct by a health care  
47 provider, including, but not limited to:

48       (1) urinary analysis;

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- 1 (2) serum biomarkers;
- 2 (3) medical imaging, including, but not limited to, magnetic
- 3 resonance imaging.

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5 8. (New section) a. Every small employer health benefits plan

6 that provides hospital or medical expense benefits and is delivered,

7 issued, executed or renewed in this State pursuant to P.L.1992,

8 c.162 (C.17B:27A-17 et seq.) or approved for issuance or renewal

9 in this State on or after the effective date of this act shall provide

10 benefits for an annual prostate cancer screening.

11 The benefits shall be provided to the same extent as for any other

12 medical condition under the contract except that no deductible,

13 coinsurance, copayment, or any other cost-sharing requirement on

14 the services shall be imposed for men who are between 40 and 75

15 years of age.

16 The provisions of this section shall apply to all health benefits

17 plans in which the carrier has reserved the right to change the

18 premium.

19 b. As used in this section:

20 "Prostate cancer screening" means medically viable methods for

21 the detection and diagnosis of prostate cancer, which includes a

22 digital rectal exam and the prostate-specific antigen test and

23 associated laboratory work. "Prostate cancer screening" shall also

24 include subsequent follow up testing as direct by a physician,

25 including, but not limited to:

- 26 (1) urinary analysis;
- 27 (2) serum biomarkers;
- 28 (3) medical imaging, including, but not limited to, magnetic
- 29 resonance imaging.

30

31 9. (New section) a. The State Health Benefits Commission

32 shall ensure that every contract purchased by the commission on or

33 after the effective date of this act that provides hospital or medical

34 expense benefits shall provide coverage for an annual prostate

35 cancer screening.

36 The benefits shall be provided to the same extent as for any other

37 medical condition under the contract except that no deductible,

38 coinsurance, copayment, or any other cost-sharing requirement on

39 the services shall be imposed for men who are between 40 and 75

40 years of age.

41 b. As used in this section:

42 "Prostate cancer screening" means medically viable methods for

43 the detection and diagnosis of prostate cancer, which includes a

44 digital rectal exam and the prostate-specific antigen test and

45 associated laboratory work. "Prostate cancer screening" shall also

46 include subsequent follow up testing as direct by a health care

47 provider, including, but not limited to:

- 1 (1) urinary analysis;  
2 (2) serum biomarkers;  
3 (3) medical imaging, including, but not limited to, magnetic  
4 resonance imaging.

5  
6 10. (New section) a. The School Employees' Health Benefits  
7 Commission shall ensure that every contract purchased by the  
8 commission on or after the effective date of this act that provides  
9 hospital or medical expense benefits shall provide coverage for an  
10 annual prostate cancer screening.

11 The benefits shall be provided to the same extent as for any other  
12 medical condition under the contract except that no deductible,  
13 coinsurance, copayment, or any other cost-sharing requirement on  
14 the services shall be imposed for men who are between 40 and 75  
15 years of age.

16 b. As used in this section:

17 "Prostate cancer screening" means medically viable methods for  
18 the detection and diagnosis of prostate cancer, which includes a  
19 digital rectal exam and the prostate-specific antigen test and  
20 associated laboratory work. "Prostate cancer screening" shall also  
21 include subsequent follow up testing as direct by a health care  
22 provider, including, but not limited to:

- 23 (1) urinary analysis;  
24 (2) serum biomarkers;  
25 (3) medical imaging, including, but not limited to, magnetic  
26 resonance imaging.

27  
28 11. This act shall take effect on the 90th day next following the  
29 date of enactment and shall apply to all contracts and policies  
30 delivered, issued, executed, or renewed on or after that date.

31  
32

33 STATEMENT

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35 As amended, this bill requires health, hospital, and medical  
36 service corporations, health maintenance organizations, and  
37 commercial group health insurers to provide coverage for an annual  
38 prostate cancer screening without cost sharing for men who are  
39 between 40 and 75 years of age. Under current law, these health  
40 insurance carriers are required only to provide coverage for an  
41 annual medically recognized diagnostic examination including, but  
42 not limited to, a digital rectal examination and a prostate-specific  
43 antigen test for men age 50 and over who are asymptomatic and for  
44 men age 40 and over with a family history of prostate cancer or  
45 other prostate cancer risk factors. The bill expands the definition of  
46 "prostate cancer screening" to mean medically viable methods for  
47 the detection and diagnosis of prostate cancer, which includes a  
48 digital rectal exam and the prostate-specific antigen test and



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1 associated laboratory work. "Prostate cancer screening" shall also  
2 include subsequent follow up testing as direct by a physician,  
3 including, but not limited to:

4 (1) urinary analysis;

5 (2) serum biomarkers;

6 (3) medical imaging, including, but not limited to, magnetic  
7 resonance imaging.

8 The bill also extends the prostate cancer screening requirements  
9 to commercial individual health insurers, health benefits plans  
10 issued pursuant to the New Jersey Individual Health Coverage and  
11 Small Employer Health Benefits Programs, the State Health  
12 Benefits Program, and the School Employees' Health Benefits  
13 Program, which are not required to provide this coverage under  
14 current law.