LEGISLATIVE FISCAL ESTIMATE
ASSEMBLY, No. 2236
STATE OF NEW JERSEY
222nd LEGISLATURE

DATED: NOVEMBER 5, 2026

SUMMARY

Synopsis: Requires automatic issuance of credential to provide services in carrier provider network for physicians in good standing in New Jersey.

Types of Impact: Potential annual State and local government expenditure impacts and potential annual State revenue impact.

Agencies Affected: Department of the Treasury, Department of Human Services, Department of Children and Families, and local governments.

Office of Legislative Services Estimate	
Potential Annual State Expenditure Impact	Indeterminate
Potential Annual State Revenue Impact	Indeterminate
Potential Annual Local Expenditure Impact	Indeterminate

- The Office of Legislative Services (OLS) notes that the bill may potentially alter: a) the annual expenditures of the State and local governments for employee and retiree health benefits coverage; and b) the annual State expenditures and State cost reimbursements from the federal government under NJ FamilyCare (Medicaid/Children's Health Insurance Program).

- The bill's automatic provider network admittance requirement for physicians in good standing with the State Board of Medical Examiners would limit the ability of health insurance carriers to manage their provider networks for considerations such as the quality and cost-effectiveness of medical treatments dispensed. The OLS, however, lacks the informational basis to model the effects the "any willing provider" requirement would have on health coverage-related expenditures by the State and local governments.

BILL DESCRIPTION

This bill would require health insurance carriers to automatically approve applications by physicians to join or renew membership in a carrier's network of medical service providers if the applicant's medical license is in good standing with the State Board of Medical Examiners.

FISCAL ANALYSIS

EXECUTIVE BRANCH

None received.

OFFICE OF LEGISLATIVE SERVICES

The OLS notes that the bill may potentially alter: a) the annual expenditures of the State and local governments for employee and retiree health benefits coverage; and b) the annual State expenditures and State cost reimbursements from the federal government under NJ FamilyCare (Medicaid/Children's Health Insurance Program).

The bill's automatic provider network admittance requirement for physicians in good standing with the State Board of Medical Examiners would limit the ability of health insurance carriers to manage their provider networks for considerations such as the quality and cost-effectiveness of medical treatments dispensed. The OLS, however, lacks the informational basis to model the effects the "any willing provider" requirement would have on health coverage-related expenditures by the State and local governments.

Section: *Legislative Budget and Finance Office*

Analyst: *Thomas Koenig*
Legislative Budget and Finance Officer

Approved: *Thomas Koenig*
Legislative Budget and Finance Officer

This legislative fiscal estimate has been produced by the Office of Legislative Services due to the failure of the Executive Branch to respond to our request for a fiscal note.

This fiscal estimate has been prepared pursuant to P.L.1980, c.67 (C.52:13B-6 et seq.).