

**CHAPTER 22**  
**HEALTH BENEFIT PLANS**

**Authority**

N.J.S.A. 17:1-8.1, 17:1-15e and P.L. 1999, c.339.

**Source and Effective Date**

R.2000 d.452, effective November 6, 2000.  
See: 32 N.J.R. 2860(a), 32 N.J.R. 4014(a).

**Executive Order No. 66(1978) Expiration Date**

Chapter 22, Health Benefit Plans, expires on November 6, 2005.

**Chapter Historical Note**

Chapter 22, Health Benefit Plans, was adopted as R.2000 d.452, effective November 6, 2000. See: Source and Effective Date.

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**SUBCHAPTER 1. (RESERVED)**

**SUBCHAPTER 2. HEALTH WELLNESS PROMOTION PLANS**

**11:22-2.1 Scope**

This subchapter applies to health benefits plans that are delivered, issued, executed or renewed in this State on or after (the effective date of this subchapter).

**11:22-2.2 Definitions**

The following words and terms, when used in this subchapter, shall have the meanings as set forth below, unless the context clearly indicates otherwise:

“Act” means the Health Wellness Promotion Act, P.L. 1993, c.327, as amended by P.L. 1999, c.339.

“Carrier” means an insurance company, health service corporation, hospital service corporation, medical service corporation or health maintenance organization authorized to issue health benefits plans in this State.

“Department” means the Department of Banking and Insurance.

“Health benefits plan” means an individual or group contract issued by a carrier that provides hospital and medical expense benefits or services. Health benefits plan does not include the following types of policies or contracts: health benefit plans subject to N.J.S.A. 17B:27A-2 et seq. (Individual Health Coverage Program) or N.J.S.A. 17B:27A-17 et seq. (Small Employer Health Program); accident only, credit, disability, hospital confinement indemnity, long-term care, vision only, dental only, prescription only, CHAMPUS supplement, Medicare supplement, coverage for Medicare services pursuant to a contract with the United States government, coverage for Medicaid services pursuant to a contract with the State, coverage arising out of a workers’ compensation or similar law, automobile medical payment insurance or other liability-based medical payment insurance, or personal injury protection insurance issued pursuant to N.J.S.A. 39:6A-1 et seq.

“Health care provider” or “provider” means an individual or entity which, acting within the scope of its license or certification, provides a covered service or supply as defined by the health benefits plan. Health care provider includes, but is not limited to, the health professions specified in N.J.S.A. 17B:48E-12, N.J.S.A. 17B:27-50 and N.J.S.A. 17B:27-51.1a.

“Health wellness promotion program” means services or benefits for services rendered by a health care provider, which services or benefits are consistent with this subchapter, and any bulletins and public notices that may be issued in accordance with this subchapter as a supplement to this subchapter.

“Schedule” means the number of times a test, screen or other service must be covered or benefits provided therefor in a specified period.

**11:22-2.3 Provision of a health wellness promotion program**

(a) Every health benefits plan issued by a carrier shall provide benefits for a health wellness promotion program, which shall include, at a minimum, the following tests and services:

1. For all persons 20 years of age and older, annual tests to determine blood hemoglobin, blood pressure, blood glucose level, and blood cholesterol level or, alternatively, low-density lipoprotein (LDL) level and blood high-density lipoprotein (HDL) level;
2. For all persons 35 years of age or older, a glaucoma eye test every five years;
3. For all persons 40 years of age or older, an annual stool examination for presence of blood;

4. For all persons 45 years of age or older, a left-sided colon examination of 35 to 60 centimeters every five years;

5. For all women 20 years of age or older, a pap smear as required by N.J.S.A. 17:48-60, 17:48E-35.12, 17B:27-46.1n, or 26:2J-2.12, as applicable;

6. For all women 40 years of age or older, a mammogram examination as required by N.J.S.A. 17:48-6g, 17:48-7f, 17:48E-35.4, 17B:26-2.1e, 17B:27-46.1f, or 26:2J-4.4, as applicable;

7. For all adults, recommended immunizations according to the latest edition of the Guide for Adult Immunization, third ed., published by the American College of Physicians, 190 N. Independence Mall West, Philadelphia, PA 19106-1572 ([www.acponline.org](http://www.acponline.org)) incorporated herein by reference, as amended and supplemented; and

8. For all persons 20 years of age or older, an annual consultation with a health care provider to discuss lifestyle behaviors that promote health and well-being including, but not limited to, smoking control, nutrition and diet recommendations, exercise plans, lower back protection, weight control, immunization practices, breast self-examination, testicular self-examination and seat belt usage in motor vehicles.

(b) Notwithstanding the provisions of (a) above to the contrary, if a health care provider recommends that it would be medically appropriate for a covered person to receive a different schedule of tests and services than that provided for under this section, the carrier shall provide payment for the tests or services actually provided, within the limits of the amounts provided for in N.J.A.C. 11:22-2.4.

(c) The health benefits plan shall provide, without consideration of a separate deductible, copayment or coinsurance amount, services or benefits at least up to the dollar amounts as specified in accordance with N.J.A.C. 11:22-2.4.

(d) In the event health wellness promotion program benefits are changed or added by the Legislature, health benefit plans issued or renewed after the effective date of the change or addition shall be revised to comply with the law.

**11:22-2.4 Dollar amounts to be provided for services or benefits**

The Department and the Department of Health and Senior Services for HMO's, in consultation with the Department of Treasury, shall calculate the maximum dollar amount of services or benefits to be provided no later than July 1 annually, and shall publish the results of the calculation as a public notice in the New Jersey Register and post it on the web site of each Department.