INSURANCE

DEPARTMENT OF BANKING AND INSURANCE

DIVISION OF INSURANCE

Notice of Readoption

Managed Care Plans

Readoption with Technical Changes: N.J.A.C. 11:24C


Authorized By: Richard J. Badolato, Acting Commissioner, Department of Banking and Insurance.

Effective Date: April 15, 2016.

New Expiration Date: April 15, 2023.

Take notice that pursuant to the provisions of N.J.S.A. 52:14B-5.1, the rules at N.J.A.C. 11:24C will expire on May 20, 2016. The rules set forth in this chapter govern Managed Care Plans. The chapter includes rules at N.J.A.C. 11:24C-1 implementing P.L. 2001, c. 88 (codified at N.J.S.A. 26:2S-7.1 through 7.3), which mandate that carriers offering managed care plans accept a universal application form and renewal form developed by the Commissioner of the Department of Banking and Insurance (Commissioner) for credentialing physicians who are seeking to participate in a carrier’s provider network. The rules also define the words and terms used in the subchapter. Additionally, the rules set forth the physician credentialing and recredentialing standards, establish alternative, acceptable means for such credentialing and recredentialing, and provide for the right of a carrier to request additional information necessary
for credentialing or recredentialing. The rules also authorize the Department of Banking and Insurance (Department) to impose remedies to enforce the provisions of these rules. Additionally, New Jersey Universal Physician Applications for credentialing and recredentialing are provided in an Appendix.

The chapter also contains rules at N.J.A.C. 11:24C-2 and 3 implementing P.L. 2000, c. 121 (principally codified at N.J.S.A. 26:2S-10.1 through 10.3). The rules at N.J.A.C. 11:24C-2 establish certain standards for carriers’ provision of benefits or coverage of services for hemophilia treatment and for all persons desiring to contract with carriers for the provision of home treatment services for bleeding episodes associated with hemophilia. The rules also define the words and terms used in this subchapter. Additionally, the rules specifically set forth requirements for carriers to use designated health care providers for home treatments. This subchapter also establishes a process for health care providers to become designated to provide hemophilia treatment, sets forth the standards and procedures to be utilized during the application process of such designation, sets forth the minimum standards for designation during the Department’s review of the application, and outlines the procedures and requirements for such designated health care providers to submit an annual report to the Department. The rules further establish the standards for handling treatment when a health care provider loses the designation or when the provider’s contract with a carrier terminates. The rules establish that designated health care providers have an affirmative obligation to notify the Department of material changes in the information provided to the Department on which designation was based. The rules also require that the Department maintain a written list of designated home treatment health care providers. Further, the Application for Designation as a Hemophilia Home Treatment Health Care Provider is attached in the chapter appendix.
The rules at N.J.A.C. 11:24C-3 require that carriers’ managed care plans provide certain benefits or services for hemophilia treatment, including benefits or services for the home treatment of bleeding episodes associated with hemophilia. The rules also define the words and terms used in this subchapter. The rules further set forth requirements for the carriers to follow upon loss of a health care provider’s designated status or termination of the agreement for services and supplies for home treatment of bleeding episodes associated with hemophilia. The rules also require the Department to maintain a list of designated home treatment health care providers and State-recognized outpatient regional hemophilia care centers. Additionally, the rules set forth standards for the treatment of hemophilia by clinical laboratories at State-recognized outpatient regional hemophilia care centers. The rules further implement Bulletin OMC 2001-04, in which the Department of Health provided guidance for carriers attempting to comply with P.L. 2000, c. 121, which was enacted and took effect September 14, 2000. Bulletin OMC 2001-04 requires that health maintenance organizations (HMOs), insurers, health service corporations, hospital service corporations, and medical service corporations that offer managed care plans that provide benefits or health care services for the home treatment of bleeding episodes associated with hemophilia, comply with certain standards in the provision of those benefits or services. Those standards are set forth in Subchapter 3. The rules also set forth that a carrier shall be subject to fines and penalties pursuant to N.J.S.A. 26:2S-16 for violations of this subchapter with the exception of those provisions that require contracting with and referral to designated health care providers if there are no designated health care providers in New Jersey on the date that services for the home treatment of bleeding episodes related to hemophilia are sought by or for a covered person.
The rules at N.J.A.C. 11:24C-4 set forth requirements for provider networks and establish standards relating to any agreements entered into between carriers and health care providers. The rules also define the words and terms used in this subchapter. Moreover, these rules establish standards for provider reimbursement, the content and availability of provider network directories, and the standards for accuracy of provider directory information.

The rules contained within N.J.A.C. 11:24C continue to be necessary, reasonable, and proper for the purposes for which they were originally promulgated. Therefore, pursuant to N.J.S.A. 52:14B-5.1.c(1), these rules are readopted and shall continue in effect for a seven-year period, with the following technical changes: at N.J.A.C. 11:24C-1.4(d)1, to change the incorrect reference to N.J.A.C. 11:24C-1.3(c) to properly reference N.J.A.C. 11:24C-1.3(e), which sets forth the requirements for using a national credentialing database; to correct the citation in the definition of “health care service firm” at N.J.A.C. 11:24C-2.2 and “health care provider” at N.J.A.C. 11:24C-3.2 by replacing the reference to “N.J.A.C. 13:45B-14.2” with “N.J.A.C. 13:45B-13.2” to reflect the proper citation wherein the term “health care service firm” is defined; to correct the reference to the website for the Centers for Disease Control (CDC) in N.J.A.C. 11:24C-3.6(d) from http://www.cdc.gov/ncidod/dastlr/hemotology/htc to http://www.cdc.gov/ncbddd/hemophilia/HTC.html; and to update the address to which a provider shall submit an application to become designated as a health care provider in both N.J.A.C. 11:24C-2.4 and N.J.A.C. 11:24C-2 Appendix.

Full text of the technical changes follows (additions indicted in boldface thus; deletions indicated in brackets [thus]):

SUBCHAPTER 1. PHYSICIAN CREDENTIALING
11:24C-1.4 Recredentialing standards

(a) – (c) (No change.)

(d) As an alternative to using the recredentialing form set forth in (a) above or a prepopulated form as set forth in (b) above, carriers may utilize update and recredentialing information obtained from a national credentialing database, data bank, or repository of health care providers.

1. The election by the carrier to use a national credentialing database, data bank, or other repository of health care providers shall be subject to the conditions set forth at N.J.A.C. 11:24C-1.3[(c)](e).

SUBCHAPTER 2. DESIGNATION OF HEMOPHILIA HEALTH CARE PROVIDERS

11:24C-2.2 Definitions

For the purposes of this subchapter, the words and terms set forth below shall have the following meanings, unless the context clearly indicates otherwise:

…

"Health care service firm" means health care service firm as that term is defined at N.J.A.C. 13:45B-[14.2]13.2.

…

11:24C-2.4 Application: procedure to become a designated health care provider of home treatment services

(a) A person seeking to become a designated health care provider shall submit to the Department an original and at least one copy of an application at the following address:
[Attn: Hemophilia Treatment Designation Application

Valuation Bureau

NJ Department of Banking and Insurance

20 West State Street

PO Box 325

Trenton, NJ 08625-0325]

**Mailing Address (U.S. Postal Service):**

NJ Department of Banking and Insurance

Consumer Protection Services

Office of Managed Care

Attention: Hemophilia Treatment Designation Application

PO Box 329

Trenton, NJ 08625-0329

**Overnight Services (UPS, FedEx, Airborne):**

NJ Department of Banking and Insurance

Consumer Protection Services

Office of Managed Care

Attention: Hemophilia Treatment Designation Application

20 West State Street

9th Floor

Trenton, NJ 08625-0329

(b) - (d) (No change.)
(Agency Note: The text of the proposed amendments to N.J.A.C. 11:24C-2 Appendix appear with italicized boldface indicated proposed new text; those portions of the appendix indicated in boldface indicate permanent boldface in the appendix.)

APPENDIX

APPLICATION FOR DESIGNATION AS A HEMOPHILIA HOME TREATMENT HEALTH CARE PROVIDER--INSTRUCTIONS AND CHECKLISTS

INSTRUCTIONS: Applications must be complete. If a question or requirement does not apply to an applicant's particular circumstances, the applicant must so indicate that, rather than ignoring the question or requirement.

PART A: Form

The following checklist is provided to help applicants complete their applications properly. However, completion of the checklist shall not result in an application being deemed complete or approved. Applicants shall refer to N.J.A.C. 11:24C-2 for details.

... [ ] The application is being sent to:

[Hemophilia Treatment Designation Application Valuation Bureau NJ Department of Banking and Insurance PO Box 325 Trenton, NJ 08625-0325 (if by other than U.S. Postal, 20 West State Street substitutes for PO Box 325)]

Mailing Address (U.S. Postal Service):
PART B: Content

(No change.)

SUBCHAPTER 3. BENEFITS OR COVERAGE OF SERVICE FOR HEMOPHILIA TREATMENT

11:24C-3.2 Definitions

For the purposes of this subchapter, the words and terms set forth below shall have the following meanings, unless the context clearly indicates otherwise.

…
“Health care provider" means a person licensed to deliver one or more health care services pursuant to Title 45 or Title 26 of the New Jersey Statutes, or a health care service firm as that term is defined at N.J.A.C. 13:45B-[14.2][13.2].

11:24C-3.6 List of designated home treatment health care providers and State-recognized outpatient regional hemophilia care centers

(a) – (c) (No change.)

(d) The Department adopts and incorporates herein the standards and procedures used by the United States Department of Health and Human Services to designate regional hemophilia treatment centers in accordance with Federal laws.

1. Information regarding the Federally funded regional hemophilia centers (and grants therefor) may be obtained by contacting the Maternal and Child Health Bureau of the Health Resources and Services Administration within the United States Department of Health and Human Services, or a list of hemophilia treatment centers by state currently is available through the Centers for Disease Control at [www.cdc.gov/ncidod/dastlr/hemotology/htc_list.htm]