

## CHAPTER 369

AN ACT concerning electronic submission of certain automobile insurance claims and supplementing P.L.1972, c.70 (C.39:6A-1 et seq.).

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

C.39:6A-5.3 Definitions relative to electronic submission of certain automobile insurance claims.

1. As used in this act:

“Complete electronic medical bill” means a medical bill that meets all of the following criteria: (1) it is submitted in the correct uniform billing format, with the correct uniform billing code sets, transmitted in compliance with the guidelines; (2) the bill and electronic attachments provide all information required under the guidelines established by this act; and (3) the health care provider or its billing representative has provided all information that the insurance carrier or its third party administrator requested.

“Electronic bill” means a communication between computerized data exchange systems that complies with the guidelines enumerated; or a mutually agreed upon electronic data exchange plan established between health care providers or their billing representatives and insurance companies or their third party administrators.

“Guidelines” means the current version of the ASC X12 005010 format.

“Insurance carrier” means any company underwriting personal injury protection coverage benefits payable under a standard automobile insurance policy pursuant to section 4 of P.L.1972, c.70 (C.34:6A-4); a basic automobile insurance policy pursuant to section 4 of P.L.1998, c.21 (C.39:6A-3.1); or emergency care medical expense benefits payable under a special automobile insurance policy pursuant to section 45 of P.L.2003, c.89 (C.39:6A-3.3), and shall include any managed care organization associated with the carrier.

C.39:6A-5.4 Electronic bills.

2. a. All healthcare providers or their billing representative shall submit electronic bills for payment which shall be completed on standardized forms following the guidelines established pursuant to this act.

b. Insurance carriers, medical management companies, or their third-party administrators shall accept electronic bills and shall comply with the guidelines.

c. Confidentiality of medical information submitted on electronic bills for payment of medical services pursuant to this act shall be maintained.

d. Insurance carriers or their third-party administrators shall acknowledge receipt of a complete electronic medical bill to the party that sent the complete electronic medical bill in compliance with the guidelines.

e. Payment for a complete electronic medical bill deemed compensable by the insurance carrier shall be made in accordance with subsection g. of section 5 of P.L.1972, c.70 (C.39:6A-5), provided, however, that insurance carriers or their third party administrators may establish shorter payment deadlines through contracts or agreements with health care providers or their billing representatives in a non-prescribed format or timeline.

C.39:6A-5.5 Inapplicability.

3. This act shall not apply to any provider that:

a. submits less than 25 medical bills per month to insurance carriers or third-party administrators;

b. furnishes services only outside of the United States;

c. experiences a disruption in electricity and communication connections that are beyond its control; or

d. demonstrates that a specific and unusual circumstance exists that precludes submission of electronic bills.

4. This act shall take effect immediately, except that insurance carriers and third party administrators shall not be required to adopt electronic bill transmission before the first day of the 20th month next following the date of enactment. Nothing in this act shall prevent insurance carriers or their third-party administrators from earlier adoption of electronic bills transmission.

Approved January 16, 2018.