

2364

2009-2010 Regular Sessions

I N S E N A T E

February 19, 2009

Introduced by Sen. ONORATO -- read twice and ordered printed, and when printed to be committed to the Committee on Labor

AN ACT to amend the workers' compensation law, in relation to permitting any medical provider authorized by the workers' compensation board to treat injured workers

THE PEOPLE OF THE STATE OF NEW YORK, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

1 Section 1. Subdivision 7 of section 13-a of the workers' compensation
2 law, as added by chapter 6 of the laws of 2007, is amended to read as
3 follows:
4 (7)(a) Notwithstanding any other provision of this chapter to the
5 contrary, any insurance carrier authorized to transact the business of
6 workers' compensation insurance in this state, self-insurer or the state
7 insurance fund may contract with a network or networks, legally and
8 properly organized, to perform diagnostic tests, x-ray examinations,
9 magnetic resonance imaging, or other radiological examinations or tests
10 of claimants and may require claimant to obtain or undergo such diagnos-
11 tic test, x-ray examinations, magnetic resonance imaging or other radio-
12 logical examinations or tests with a provider or at a facility that is
13 affiliated with the network or networks with which the carrier
14 contracts, except if a medical emergency occurs requiring an immediate
15 diagnostic test, x-ray examination, magnetic resonance imaging or other
16 radiological examination or test or if the network with which the insur-
17 ance carrier, self-insurer or the state insurance fund contracts does
18 not have a provider or facility able to perform the examination or test
19 within a reasonable distance from the claimant's residence or place of
20 employment, as defined by regulation of the board.
21 (b) ANY MEDICAL PROVIDER AUTHORIZED BY THE WORKERS' COMPENSATION BOARD
22 TO TREAT INJURED WORKERS IS PERMITTED TO PERFORM DIAGNOSTIC TESTING,
23 X-RAY EXAMINATIONS, MAGNETIC RESONANCE IMAGING, OR OTHER RADIOLOGICAL
24 EXAMINATIONS OR TESTS UNDER ALL CIRCUMSTANCES, PROVIDED, HOWEVER, SUCH

EXPLANATION--Matter in *ITALICS* (underscored) is new; matter in brackets
[] is old law to be omitted.

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1 PROVIDER ACCEPTS THE DESIGNATED INSURANCE CARRIER'S PUBLISHED FEE FOR
2 SUCH SERVICES. IF AN INSURANCE CARRIER'S FEE SCHEDULE IS NOT PUBLISHED
3 AND SUBMITTED TO THE CHAIR OF THE WORKERS' COMPENSATION BOARD, THE
4 PREVAILING FEE SCHEDULE SHALL APPLY.

5 (C) Any insurance carrier, self-insurer or the state insurance fund
6 which requires claimants to obtain or undergo diagnostic tests, x-ray
7 examinations, magnetic resonance imaging or other radiological examina-
8 tions or tests with a provider or at a facility affiliated with a
9 network or networks with which it contracts, must notify the claimant of
10 the name and contact information for the network or networks at the same
11 time the written statement of the claimant's rights as required by
12 subdivision two of section one hundred ten of this chapter or immediate-
13 ly after imposing such requirement if the time period within which the
14 written statement of the claimant's rights as required by subdivision
15 two of section one hundred ten of this chapter has expired.

16 [(c)] (D) At the time a request for authorization for special diagnos-
17 tic tests, x-ray examinations, magnetic resonance imaging or other radi-
18 ological examinations or tests costing more than one thousand dollars as
19 required by subdivision five of this section is approved, the insurance
20 carrier, self-insurer or state insurance fund, or if so delegated the
21 network with which the insurance carrier, self-insurer or state insur-
22 ance fund has contracted, shall notify the physician requesting authori-
23 zation of the requirement that the claimant obtain or undergo the
24 special diagnostic test, x-ray examination, magnetic resonance imaging
25 or other radiological examination or test with a provider or at a facil-
26 ity affiliated with the network or networks with which it has
27 contracted, the contact information for the network and a list of the
28 providers and facilities within the claimant's geographic location, as
29 defined by regulation of the board. The claimant, in consultation with
30 the provider who requested the special diagnostic test, x-ray examina-
31 tion, magnetic resonance imaging or other radiological test or exam,
32 will determine the provider or facility from within the network which
33 will perform such diagnostic test, x-ray examination, magnetic resonance
34 imaging or other radiological examination or test.

35 [(d)] (E) The results of the special diagnostic test, x-ray examina-
36 tion, magnetic resonance imaging or other radiological test or exam must
37 be sent to the physician who requested the test or exam immediately upon
38 completion of the report detailing the results.

39 S 2. This act shall take effect immediately.