

S T A T E O F N E W Y O R K

8171--A

2009-2010 Regular Sessions

I N A S S E M B L Y

May 6, 2009

Introduced by M. of A. CAHILL, BENEDETTO, PERRY, CAMARA, SCHROEDER, WEISENBERG, GABRYSZAK, SCHIMEL, JAFFEE, GUNTHER, LIFTON, KOON, ENGLE-BRIGHT, GALEF -- Multi-Sponsored by -- M. of A. BARRA, COLTON, CORWIN, CUSICK, ERRIGO, HAWLEY, HEVESI, HYER-SPENCER, LENTOL, LUPARDO, McENE-NY, PRETLOW, SWEENEY, ZEBROWSKI -- read once and referred to the Committee on Insurance -- recommitted to the Committee on Insurance in accordance with Assembly Rule 3, sec. 2 -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee

AN ACT to amend the insurance law, in relation to physical therapy services

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

1 Section 1. Paragraph 23 of subsection (i) of section 3216 of the
2 insurance law, as added by chapter 593 of the laws of 2000, is amended
3 to read as follows:
4 (23) If a policy provides for reimbursement for physical and occupa-
5 tional therapy service which is within the lawful scope of practice of a
6 duly licensed physical or occupational therapist, an insured shall be
7 entitled to reimbursement for such service whether the said service is
8 performed by a physician or through a duly licensed physical or occupa-
9 tional therapist, provided however, that nothing contained herein shall
10 be construed to impair any terms of such policy including appropriate
11 utilization review and the requirement that said service be performed
12 pursuant to a medical order, or a similar or related service of a physi-
13 cian PROVIDED THAT SUCH TERMS SHALL NOT IMPOSE CO-PAYMENTS IN EXCESS OF
14 TWENTY PERCENT OF THE TOTAL REIMBURSEMENT TO THE PROVIDER OF CARE.
15 S 2. Subparagraph (A) of paragraph 1 of subsection (f) of section 4235
16 of the insurance law, as amended by chapter 240 of the laws of 2009, is
17 amended to read as follows:

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

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1 (A) Any policy of group accident, group health or group accident and
2 health insurance may include provisions for the payment by the insurer
3 of benefits for expenses incurred on account of hospital, medical or
4 surgical care or physical and occupational therapy by licensed physical
5 and occupational therapists upon the prescription or referral of a
6 physician for the employee or other member of the insured group, his
7 spouse, his child or children, or other persons chiefly dependent upon
8 him for support and maintenance; provided that a policy under which
9 coverage of a dependent of an employee or other member of the insured
10 group terminates at a specified age shall not so terminate with respect
11 to an unmarried child who is incapable of self-sustaining employment by
12 reason of mental illness, developmental disability, mental retardation,
13 as defined in the mental hygiene law, or physical handicap and who
14 became so incapable prior to attainment of the age at which dependent
15 coverage would otherwise terminate and who is chiefly dependent upon
16 such employee or member for support and maintenance, while the insurance
17 of the employee or member remains in force and the dependent remains in
18 such condition, if the insured employee or member has within thirty-one
19 days of such dependent's attainment of the termination age submitted
20 proof of such dependent's incapacity as described herein. NO POLICY OF
21 GROUP ACCIDENT, GROUP HEALTH OR GROUP ACCIDENT AND HEALTH INSURANCE
22 SHALL IMPOSE CO-PAYMENTS IN EXCESS OF TWENTY PERCENT OF THE TOTAL
23 REIMBURSEMENT TO THE PROVIDER OF CARE.

24 S 3. Subparagraph (A) of paragraph 4 of subsection (f) of section 4235
25 of the insurance law, as amended by chapter 593 of the laws of 2000, is
26 amended to read as follows:

27 (A) any physical and occupational therapy service which is within the
28 lawful scope of practice of a licensed physical and occupational thera-
29 pist, a subscriber to such policy shall be entitled to reimbursement for
30 such service, whether the said service is performed by a physician or
31 licensed physical and occupational therapist pursuant to prescription or
32 referral by a physician; AND A POLICY OF GROUP ACCIDENT, GROUP HEALTH OR
33 GROUP ACCIDENT AND HEALTH INSURANCE SHALL NOT IMPOSE CO-PAYMENTS IN
34 EXCESS OF TWENTY PERCENT OF THE TOTAL REIMBURSEMENT TO THE PROVIDER OF
35 CARE;

36 S 4. Subparagraph (G) of paragraph 1 of subsection (b) of section 4301
37 of the insurance law, as amended by chapter 593 of the laws of 2000, is
38 amended to read as follows:

39 (G) physical and occupational therapy care provided through licensed
40 physical and occupational therapists upon the prescription of a physi-
41 cian AND ANY CO-PAYMENTS RELATED TO REIMBURSEMENT FOR PHYSICAL THERAPY
42 SERVICES SHALL NOT EXCEED TWENTY PERCENT OF THE TOTAL REIMBURSEMENT TO
43 THE PROVIDER OF CARE,

44 S 5. Paragraph 13 of subsection (b) of section 4322 of the insurance
45 law, as added by chapter 504 of the laws of 1995, is amended to read as
46 follows:

47 (13) Outpatient physical therapy up to ninety visits per condition per
48 calendar year AND ANY CO-PAYMENTS RELATED TO REIMBURSEMENT FOR PHYSICAL
49 THERAPY SERVICES SHALL NOT EXCEED TWENTY PERCENT OF THE TOTAL REIMBURSE-
50 MENT TO THE PROVIDER OF CARE.

51 S 6. This act shall take effect on the one hundred eightieth day after
52 it shall have become a law.