

STATE OF NEW YORK

5509

2017-2018 Regular Sessions

IN SENATE

April 4, 2017

Introduced by Sens. FUNKE, GALLIVAN, GOLDEN -- read twice and ordered printed, and when printed to be committed to the Committee on Insurance

AN ACT to amend the insurance law, in relation to verification of claims made under the comprehensive motor vehicle insurance reparations act

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

1 Section 1. Section 5106 of the insurance law, subsection (b) as
2 amended and subsection (d) as added by chapter 452 of the laws of 2005,
3 is amended to read as follows:

4 § 5106. Fair claims settlement. (a) Payments of first party benefits
5 and additional first party benefits shall be made as the loss is
6 incurred. Such benefits are overdue if not paid within thirty days
7 after the claimant supplies proof of the fact and amount of loss
8 sustained. If proof is not supplied as to the entire claim, the amount
9 which is supported by proof is overdue if not paid within thirty days
10 after such proof is supplied. All overdue payments shall bear interest
11 at the rate of two percent per month. If a valid claim or portion was
12 overdue, the claimant shall also be entitled to recover his attorney's
13 reasonable fee, for services necessarily performed in connection with
14 securing payment of the overdue claim, subject to limitations promulgat-
15 ed by the superintendent in regulations.

16 (b) The insurer is entitled to receive all items necessary to verify
17 the claim, including medical examination and examination under oath of
18 the injured party or any additional verification required by the insurer
19 to establish proof of claim. The failure of the injured party to appear
20 for a scheduled medical examination or examination under oath or to
21 provide any other additional verification shall neither be a policy
22 violation nor be utilized as the basis for the denial of a claim or
23 disclaimer, provided the injured party submits to the insurer written
24 proof offering either (1) reasonable justification for the failure to

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

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1 comply; or (2) a demonstrable willingness to comply within thirty calen-
2 dar days from the date of the injured party's failure to appear or other
3 verification becomes overdue. If such written proof is not provided
4 within a reasonable time period, the insurer may only deny that portion
5 of the claim for which the requested medical examination, examination
6 under oath or additional verification was required as proof of the fact
7 and amount of loss sustained. In no event shall the failure of the
8 injured party to appear for a scheduled medical examination or examina-
9 tion under oath or to provide any other additional verification serve as
10 the basis for the denial of that portion of a claim relating to emergen-
11 cy medical care provided within forty-eight hours of an accident.

12 (c) Every insurer shall provide a claimant with the option of submit-
13 ting any dispute involving the insurer's liability to pay first party
14 benefits, or additional first party benefits, the amount thereof or any
15 other matter which may arise pursuant to subsection (a) of this section
16 to arbitration pursuant to simplified procedures to be promulgated or
17 approved by the superintendent. Such simplified procedures shall include
18 an expedited eligibility hearing option, when required, to designate the
19 insurer for first party benefits pursuant to subsection ~~(d)~~ (e) of
20 this section. The expedited eligibility hearing option shall be a forum
21 for eligibility disputes only, and shall not include the submission of
22 any particular bill, payment or claim for any specific benefit for adju-
23 dication, nor shall it consider any other defense to payment.

24 ~~(c)~~ (d) An award by an arbitrator shall be binding except where
25 vacated or modified by a master arbitrator in accordance with simplified
26 procedures to be promulgated or approved by the superintendent. The
27 grounds for vacating or modifying an arbitrator's award by a master
28 arbitrator shall not be limited to those grounds for review set forth in
29 article seventy-five of the civil practice law and rules. The award of a
30 master arbitrator shall be binding except for the grounds for review set
31 forth in article seventy-five of the civil practice law and rules, and
32 provided further that where the amount of such master arbitrator's award
33 is five thousand dollars or greater, exclusive of interest and attor-
34 ney's fees, the insurer or the claimant may institute a court action to
35 adjudicate the dispute de novo.

36 ~~(d)~~ (e) Where there is reasonable belief more than one insurer would
37 be the source of first party benefits, the insurers may agree among
38 themselves, if there is a valid basis therefor, that one of them will
39 accept and pay the claim initially. If there is no such agreement, then
40 the first insurer to whom notice of claim is given shall be responsible
41 for payment. Any such dispute shall be resolved in accordance with the
42 arbitration procedures established pursuant to section five thousand one
43 hundred five of this article and regulation as promulgated by the super-
44 intendent, and any insurer paying first-party benefits shall be reim-
45 bursed by other insurers for their proportionate share of the costs of
46 the claim and the allocated expenses of processing the claim, in accord-
47 ance with the provisions entitled "other coverage" contained in regu-
48 lation and the provisions entitled "other sources of first-party bene-
49 fits" contained in regulation. If there is no such insurer and the motor
50 vehicle accident occurs in this state, then an applicant who is a quali-
51 fied person as defined in article fifty-two of this chapter shall insti-
52 tute the claim against motor vehicle accident indemnification corpo-
53 ration.

54 § 2. This act shall take effect immediately.