

# STATE OF NEW YORK

9103

2025-2026 Regular Sessions

## IN ASSEMBLY

September 12, 2025

Introduced by M. of A. FORREST, EACHUS, SIMON, SAYEGH, TAYLOR, SEAWRIGHT  
-- read once and referred to the Committee on Insurance

AN ACT to amend the insurance law and the public health law, in relation  
to enacting the "health insurance preauthorization disclosure act"

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

1 Section 1. Short title. This act shall be known and may be cited as  
2 the "health insurance preauthorization disclosure act".

3 § 2. The insurance law is amended by adding a new section 4242 to read  
4 as follows:

5 § 4242. Health insurance companies; preauthorization for health care  
6 services. Every health care insurance company shall be required to  
7 provide participating physicians and health care providers, as defined  
8 in subdivision seven of section twenty-nine hundred eighty of the public  
9 health law, with an updated list of health care treatments and services  
10 that require preauthorization or precertification from such health care  
11 insurance company. Such list shall be developed based upon consultation  
12 with medical guidelines developed by the relevant medical specialty  
13 organization and in consultation with appropriately trained physicians  
14 practicing within the region the health care insurance company serves.  
15 Such list shall be updated annually or more frequently as appropriate.  
16 Only those health care services which are contained on such list shall  
17 be subject to pre-authorization or precertification by the health care  
18 insurance company. No health care treatment or service shall be added to  
19 the list of services requiring pre-authorization or precertification  
20 unless the health care insurance company provides a minimum of ninety  
21 days notice to participating physicians and health care providers.

22 § 3. The public health law is amended by adding a new section 4905-a  
23 to read as follows:

24 § 4905-a. Pre-authorized services. Every health care plan shall be  
25 required to develop and provide to participating health care providers a

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

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1 list of health care services that require pre-authorization or precer-  
2 tification from such health care plan. Such list shall be developed  
3 based upon consultation with medical guidelines developed by the rele-  
4 vant medical specialty organization and in consultation with appropri-  
5 ately trained physicians practicing within the region the health care  
6 plan serves. Such list shall be updated annually or more frequently as  
7 appropriate. Only those health care services which are contained on such  
8 list shall be subject to pre-authorization or precertification by the  
9 health care plan. No health care service shall be added to the list of  
10 services requiring pre-authorization or precertification unless the  
11 health care plan provides a minimum of ninety days notice to participat-  
12 ing health care providers.

13 § 4. The insurance law is amended by adding a new section 4905-a to  
14 read as follows:

15 § 4905-a. Pre-authorized services. Every health care plan shall be  
16 required to develop and provide to participating health care providers a  
17 list of health care services that require pre-authorization or precer-  
18 tification from such health care plan. Such list shall be developed  
19 based upon consultation with medical guidelines developed by the rele-  
20 vant medical specialty organization and in consultation with appropri-  
21 ately trained physicians practicing within the region the health care  
22 plan serves. Such list shall be updated annually or more frequently as  
23 appropriate. Only those health care services which are contained on such  
24 list shall be subject to pre-authorization or precertification by the  
25 health care plan. No health care service shall be added to the list of  
26 services requiring pre-authorization or precertification unless the  
27 health care plan provides a minimum of ninety days notice to participat-  
28 ing health care providers.

29 § 5. This act shall take effect on the sixtieth day after it shall  
30 have become a law. Effective immediately the superintendent of financial  
31 services is hereby authorized to promulgate all rules and regulations  
32 and take any other measures necessary to implement this act on such  
33 effective date.