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

1038

2009-2010 Regular Sessions

I N S E N A T E

January 22, 2009

Introduced by Sens. LARKIN, FLANAGAN, LAVALLE -- 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 the coverage of inpatient hospital care and anesthesia services related to the provision of dental services

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

Section 1. Subsection (i) of section 3216 of the insurance law is amended by adding a new paragraph 26 to read as follows:

(26)(A) EVERY POLICY WHICH PROVIDES COVERAGE FOR INPATIENT HOSPITAL CARE SHALL NOT EXCLUDE COVERAGE FOR INPATIENT HOSPITAL CARE FOR THE PROVISION OF DENTAL SERVICES WHEN SUCH HOSPITAL CARE IS: (I) PROVIDED TO A COVERED PERSON WHO IS SEVERELY DISABLED OR IS UNDER FIVE YEARS OF AGE; AND (II) DETERMINED TO BE MEDICALLY NECESSARY BY THE ATTENDING PHYSICIAN, IN CONSULTATION WITH A LICENSED DENTIST, DUE TO A MEDICAL CONDITION THAT REQUIRES HOSPITALIZATION OF THE COVERED PERSON FOR THE PROVISION OF DENTAL SERVICES.

(B) EVERY POLICY WHICH PROVIDES COVERAGE FOR SURGICAL CARE SHALL NOT EXCLUDE COVERAGE FOR ANESTHESIA SERVICES PROVIDED BY A PHYSICIAN OR DENTIST WHEN SUCH ANESTHESIA SERVICES ARE: (I) PROVIDED TO A COVERED PERSON WHO IS SEVERELY DISABLED OR IS UNDER FIVE YEARS OF AGE; (II) PROVIDED FOR THE PROVISION OF DENTAL SERVICES; AND (III) DETERMINED TO BE MEDICALLY NECESSARY BY THE ATTENDING PHYSICIAN, IN CONSULTATION WITH A LICENSED DENTIST, DUE TO A MEDICAL CONDITION THAT REQUIRES GENERAL ANESTHESIA FOR THE PROVISION OF DENTAL SERVICES.

(C) COVERAGE PROVIDED PURSUANT TO THIS PARAGRAPH SHALL BE SUBJECT TO ALL OTHER TERMS AND CONDITIONS OF COVERAGE, INCLUDING, BUT NOT LIMITED TO REQUIREMENTS FOR PRIOR AUTHORIZATION OF SERVICES AND ANNUAL DEDUCTIBLES AND COINSURANCE AS MAY BE DEEMED APPROPRIATE BY THE SUPERINTENDENT AND AS ARE CONSISTENT WITH THOSE ESTABLISHED FOR OTHER BENEFITS WITHIN A GIVEN POLICY.

S 2. Subsection (k) of section 3221 of the insurance law is amended by adding a new paragraph 15 to read as follows:

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

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(15)(A) EVERY GROUP POLICY ISSUED OR DELIVERED IN THIS STATE WHICH PROVIDES COVERAGE FOR INPATIENT HOSPITAL CARE SHALL NOT EXCLUDE COVERAGE FOR INPATIENT HOSPITAL CARE FOR THE PROVISION OF DENTAL SERVICES WHEN SUCH HOSPITAL CARE IS: (I) PROVIDED TO A COVERED PERSON WHO IS SEVERELY DISABLED OR IS UNDER FIVE YEARS OF AGE; AND (II) DETERMINED TO BE MEDICALLY NECESSARY BY THE ATTENDING PHYSICIAN, IN CONSULTATION WITH A LICENSED DENTIST, DUE TO A MEDICAL CONDITION THAT REQUIRES HOSPITALIZATION OF THE COVERED PERSON FOR THE PROVISION OF DENTAL SERVICES.

(B) EVERY GROUP POLICY ISSUED OR DELIVERED IN THIS STATE WHICH PROVIDES COVERAGE FOR SURGICAL CARE SHALL NOT EXCLUDE COVERAGE FOR ANESTHESIA SERVICES PROVIDED BY A PHYSICIAN OR DENTIST WHEN SUCH ANESTHESIA SERVICES ARE: (I) PROVIDED TO A COVERED PERSON WHO IS SEVERELY DISABLED OR IS UNDER FIVE YEARS OF AGE; (II) PROVIDED FOR THE PROVISION OF DENTAL SERVICES; AND (III) DETERMINED TO BE MEDICALLY NECESSARY BY THE ATTENDING PHYSICIAN, IN CONSULTATION WITH A LICENSED DENTIST, DUE TO A MEDICAL CONDITION THAT REQUIRES GENERAL ANESTHESIA FOR THE PROVISION OF DENTAL SERVICES.

(C) COVERAGE PROVIDED PURSUANT TO THIS PARAGRAPH SHALL BE SUBJECT TO ALL OTHER TERMS AND CONDITIONS OF COVERAGE, INCLUDING, BUT NOT LIMITED TO REQUIREMENTS FOR PRIOR AUTHORIZATION OF SERVICES OR ANNUAL DEDUCTIBLES AND COINSURANCE AS MAY BE DEEMED APPROPRIATE BY THE SUPERINTENDENT AND AS ARE CONSISTENT WITH THOSE ESTABLISHED FOR OTHER BENEFITS WITHIN A GIVEN POLICY.

S 3. Section 4303 of the insurance law is amended by adding a new subsection (ff) to read as follows:

(FF) (1) EVERY CONTRACT ISSUED BY A HOSPITAL SERVICE CORPORATION OR HEALTH SERVICE CORPORATION WHICH PROVIDES COVERAGE FOR INPATIENT HOSPITAL CARE SHALL NOT EXCLUDE COVERAGE FOR INPATIENT HOSPITAL CARE FOR THE PROVISION OF DENTAL SERVICES WHEN SUCH HOSPITAL CARE IS: (A) PROVIDED TO A COVERED PERSON WHO IS SEVERELY DISABLED OR IS UNDER FIVE YEARS OF AGE; AND (B) DETERMINED TO BE MEDICALLY NECESSARY BY THE ATTENDING PHYSICIAN, IN CONSULTATION WITH A LICENSED DENTIST, DUE TO A MEDICAL CONDITION THAT REQUIRES HOSPITALIZATION OF THE COVERED PERSON FOR THE PROVISION OF DENTAL SERVICES.

(2) EVERY CONTRACT ISSUED BY A MEDICAL EXPENSE INDEMNITY CORPORATION OR A HEALTH SERVICE CORPORATION WHICH PROVIDES COVERAGE FOR SURGICAL CARE SHALL NOT EXCLUDE COVERAGE FOR ANESTHESIA SERVICES PROVIDED BY A PHYSICIAN OR DENTIST WHEN SUCH ANESTHESIA SERVICES ARE: (A) PROVIDED TO A COVERED PERSON WHO IS SEVERELY DISABLED OR IS UNDER FIVE YEARS OF AGE; (B) PROVIDED FOR THE PROVISION OF DENTAL SERVICES; AND (C) DETERMINED TO BE MEDICALLY NECESSARY BY THE ATTENDING PHYSICIAN, IN CONSULTATION WITH A LICENSED DENTIST, DUE TO A MEDICAL CONDITION THAT REQUIRES GENERAL ANESTHESIA FOR THE PROVISION OF DENTAL SERVICES.

(3) COVERAGE PROVIDED PURSUANT TO THIS SUBSECTION SHALL BE SUBJECT TO ALL OTHER TERMS AND CONDITIONS OF COVERAGE, INCLUDING, BUT NOT LIMITED TO REQUIREMENTS FOR PRIOR AUTHORIZATION OF SERVICES OR ANNUAL DEDUCTIBLES AND COINSURANCE AS MAY BE DEEMED APPROPRIATE BY THE SUPERINTENDENT AND AS ARE CONSISTENT WITH THOSE ESTABLISHED FOR OTHER BENEFITS WITHIN A GIVEN POLICY.

S 4. This act shall take effect on the first of January next succeeding the date on which it shall have become a law and shall apply to all policies and contracts issued, renewed, modified, altered or amended on or after such date.