

301

Fourth Extraordinary Session

I N S E N A T E

June 25, 2009

Introduced by COMMITTEE ON RULES -- (at request of the Governor) -- read twice and ordered printed, and when printed to be committed to the Committee on Rules

AN ACT to amend the social services law, in relation to the purchase of coverage under family health plus by voluntary employee benefit associations

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

1 Section 1. Subdivision 1 of section 369-ff of the social services law,
2 as added by chapter 95 of the laws of 2007, is amended to read as
3 follows:
4 1. (a) An employer or [Taft-Hartley fund] OTHER DESIGNATED SPONSOR may
5 elect to offer family health plus insurance plans approved under the
6 family health plus program to all employees or members and family
7 members of employees or members. If an employer or [Taft-Hartley fund]
8 OTHER DESIGNATED SPONSOR chooses to offer family health plus insurance
9 plans, the employer or [Taft-Hartley fund] OTHER DESIGNATED SPONSOR
10 shall pay to the commissioner or the commissioner's designee a sum of
11 money equal to at least seventy percent of the premium or a fixed dollar
12 amount, as determined by the commissioner, applicable to each enrolling
13 employee or member. Each employee or member who enrolls shall, through
14 the employer or [Taft-Hartley fund] OTHER DESIGNATED SPONSOR, pay to the
15 commissioner or the commissioner's designee the balance of the premium.
16 If the employee's or member's share of the premium is covered by the
17 employer sponsored health coverage or premium assistance programs set
18 forth in this title, title eleven of this article, or title one-A of
19 article twenty-five of the public health law, then the employee's or
20 member's share of the premium shall be paid under such program. Notwith-
21 standing any provision of law, rule or regulation to the contrary, the
22 commissioner may, for children under the age of twenty-one, require

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

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1 family health plus insurance plans to cover all benefits covered under
2 title one-A of article twenty-five of the public health law.

3 (b) Where an employer or [Taft-Hartley fund] OTHER DESIGNATED SPONSOR
4 chooses to offer family health plus insurance plans under this section,
5 such employer or [Taft-Hartley fund] OTHER DESIGNATED SPONSOR shall
6 disseminate to all employees or members information regarding employer
7 sponsored health coverage or premium assistance programs set forth in
8 this title, title eleven of this article, or title one-A of article
9 twenty-five of the public health law. The information shall be provided
10 by the commissioner to employers or [Taft-Hartley funds] OTHER DESIG-
11 NATED SPONSORS offering family health insurance plans and disseminated
12 by employers or [Taft-Hartley funds] OTHER DESIGNATED SPONSORS to
13 employees or members in a form and manner specified by the commissioner.

14 (c) Subject to federal approval, an employer or [Taft-Hartley fund]
15 OTHER DESIGNATED SPONSOR choosing to offer family health plus insurance
16 plans in accordance with paragraph (a) of this subdivision which (i) did
17 not previously offer health insurance to its employees or members or
18 (ii) currently offers health insurance to its employees or members but
19 the employer's or [Taft-Hartley fund's] OTHER DESIGNATED SPONSOR'S abil-
20 ity to continue to offer such coverage is in jeopardy, as determined by
21 the commissioner, may be eligible for state subsidies towards the cost
22 of its share of the premium only for employees or members who otherwise
23 may be eligible for family health plus, child health plus or medical
24 assistance under this title, title one-A of article twenty-five of the
25 public health law or title eleven of this article, respectively. An
26 employee or member identified as potentially eligible for family health
27 plus, child health plus or medical assistance through a process speci-
28 fied by the commissioner shall apply to the appropriate program for an
29 eligibility determination. The availability and amount of state subsi-
30 dies provided pursuant to this paragraph and eligibility criteria for
31 such subsidies shall be determined by the commissioner. State subsidies
32 pursuant to this paragraph shall be cost effective relative to payments
33 made under the family health plus, child health plus and medical assist-
34 ance programs, whichever program is applicable.

35 (d) All moneys paid to the commissioner under this section shall be
36 deposited by the commissioner in the family health plus employer part-
37 nership account established under section ninety-one-g of the state
38 finance law. Notwithstanding any provision of law, rule or regulation to
39 the contrary, the commissioner may issue a request for proposals and
40 enter into one or more contracts to administer the billing and
41 collection of premiums due under this section.

42 (e) The commissioner or the commissioner's designee is authorized to
43 act as a health plan coordinator between employers or [Taft-Hartley
44 funds] OTHER DESIGNATED SPONSORS and health plans if the commissioner
45 determines that a health plan coordinator will be helpful in the effec-
46 tive implementation of this section or in facilitating the offering of
47 multiple health plans by employers or [Taft-Hartley funds] OTHER DESIG-
48 NATED SPONSORS to their employees or members. The commissioner is also
49 authorized to amend existing facilitated enrollment contracts if neces-
50 sary to implement this section.

51 (F) FOR PURPOSES OF THIS SECTION, THE TERM "OTHER DESIGNATED SPONSOR"
52 MEANS: A TAFT-HARTLEY FUND OR A VOLUNTARY EMPLOYEE BENEFIT ASSOCIATION
53 ESTABLISHED IN ACCORDANCE WITH THE REQUIREMENTS OF SECTION 501(C)(9) OF
54 THE FEDERAL INTERNAL REVENUE CODE.

55 S 2. This act shall take effect immediately.