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

8498

2011-2012 Regular Sessions

I N A S S E M B L Y

June 19, 2011

Introduced by M. of A. MORELLE -- read once and referred to the Committee on Insurance

AN ACT to amend the insurance law, in relation to payments to certain providers of ambulance services

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

Section 1. Subsection (i) of section 3224-a of the insurance law, as added by a chapter of the laws of 2011 amending the insurance law relating to payments to prehospital emergency medical services providers, as proposed in legislative bills numbers S.2714-B and A.4093-B, is amended to read as follows:

(i) Payments to nonparticipating or nonpreferred providers of ambulance services licensed under article thirty of the public health law (EXCLUDING PAYMENTS FOR SERVICES RELATED TO AIR TRANSPORT). (1) Whenever an insurer or an organization, or corporation licensed or certified pursuant to article forty-three or forty-seven of this chapter or article forty-four of the public health law provides that any health care claims submitted under contracts or agreements issued or entered into pursuant to this article or articles forty-two, forty-three or forty-seven of this chapter and article forty-four of the public health law INCLUDING AMBULANCE SERVICES PROVIDED BY A MUNICIPALLY OWNED AND OPERATED PROVIDER OF AMBULANCE SERVICES IN A CITY WITH A POPULATION OF ONE MILLION OR MORE are payable to a participating or preferred provider of ambulance services for services rendered, the insurer, organization, or corporation licensed or certified pursuant to article forty-three or forty-seven of this chapter or article forty-four of the public health law shall be required to pay such benefits either directly to any similarly licensed nonparticipating or nonpreferred provider [at the usual and customary charge, which shall not be excessive or unreasonable,] when the provider has rendered such services, has a written assignment of benefits, and has caused written notice of such assignment to be

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

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given to the insurer, organization, or corporation licensed or certified pursuant to article forty-three or forty-seven of this chapter or article forty-four of the public health law or jointly to such nonparticipating or nonpreferred provider and to the insured, subscriber, or other covered person; provided, however, that in either case the insurer, organization, or corporation licensed or certified pursuant to article forty-three or forty-seven of this chapter or article forty-four of the public health law shall be required to send such benefit payments directly to the provider who has the written assignment. When payment is made directly to a provider of ambulance services as authorized by this section, the insurer, organization, or corporation licensed or certified pursuant to article forty-three or forty-seven of this chapter or article forty-four of the public health law shall give written notice of such payment to the insured, subscriber, or other covered person.

(2) [An insurer shall provide reimbursement for those services prescribed by this section at rates negotiated between the insurer and the provider of such services. In the absence of agreed upon rates, an insurer shall pay for such services at the usual and customary charge, which shall not be excessive or unreasonable] EXCEPT FOR AMBULANCE SERVICES PROVIDED BY A MUNICIPALLY OWNED AND OPERATED PROVIDER OF AMBULANCE SERVICES IN A CITY WITH A POPULATION OF ONE MILLION OR MORE, NO INSURER SHALL BE OBLIGATED TO REIMBURSE THE NONPARTICIPATING OR NONPREFERRED PROVIDER AT AN AMOUNT GREATER THAN IT WOULD HAVE PAID FOR THE SAME SERVICE IF PROVIDED BY A PARTICIPATING OR PREFERRED PROVIDER.

(3) FOR AMBULANCE SERVICES PROVIDED BY A MUNICIPALLY OWNED AND OPERATED PROVIDER OF AMBULANCE SERVICES IN A CITY WITH A POPULATION OF ONE MILLION OR MORE, AN INSURER SHALL PAY FOR SUCH SERVICES AS DETERMINED PURSUANT TO A PUBLIC RATEMAKING HEARING THAT INCLUDES AN OPPORTUNITY FOR PUBLIC COMMENT.

(4) Nothing contained in this section shall be deemed to prohibit the payment of different levels of benefits or from having differences in coinsurance percentages applicable to benefit levels for services provided by participating or preferred providers and nonparticipating or nonpreferred providers AS DEEMED APPROPRIATE BY THE SUPERINTENDENT.

[The provisions of this section shall not apply to policies that do not include coverage for ambulance services.]

S 2. This act shall take effect on the same date and in the same manner as a chapter of the laws of 2011 amending the insurance law relating to payments to prehospital emergency medical services providers, as proposed in legislative bills numbers S.2714-B and A.4093-B, takes effect.