

4870--A

2011-2012 Regular Sessions

I N S E N A T E

April 27, 2011

Introduced by Sens. DeFRANCISCO, AVELLA, BRESLIN, GOLDEN, HUNTLEY, LANZA, MAZIARZ -- read twice and ordered printed, and when printed to be committed to the Committee on Insurance -- recommitted to the Committee on Insurance in accordance with Senate Rule 6, sec. 8 -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee

AN ACT to amend the insurance law, in relation to physical therapy services

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

1 Section 1. Paragraph 23 of subsection (i) of section 3216 of the
2 insurance law, as added by chapter 593 of the laws of 2000, is amended
3 to read as follows:

4 (23) If a policy provides for reimbursement for physical and occupa-
5 tional therapy service which is within the lawful scope of practice of a
6 duly licensed physical or occupational therapist, an insured shall be
7 entitled to reimbursement for such service whether the said service is
8 performed by a physician or through a duly licensed physical or occupa-
9 tional therapist, provided however, that nothing contained herein shall
10 be construed to impair any terms of such policy including appropriate
11 utilization review and the requirement that said service be performed
12 pursuant to a medical order, or a similar or related service of a physi-
13 cian PROVIDED THAT SUCH TERMS SHALL NOT IMPOSE CO-PAYMENTS IN EXCESS OF
14 TWENTY PERCENT OF THE TOTAL REIMBURSEMENT TO THE PROVIDER OF CARE.

15 S 2. Subparagraph (A) of paragraph 1 of subsection (f) of section 4235
16 of the insurance law, as amended by chapter 219 of the laws of 2011, is
17 amended to read as follows:

18 (A) Any policy of group accident, group health or group accident and
19 health insurance may include provisions for the payment by the insurer
20 of benefits for expenses incurred on account of hospital, medical or
21 surgical care or physical and occupational therapy by licensed physical

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

LBD00680-02-2

1 and occupational therapists upon the prescription or referral of a
2 physician for the employee or other member of the insured group, the
3 employee's or member's spouse, the employee's or member's child or chil-
4 dren, or other persons chiefly dependent upon the employee or member for
5 support and maintenance; provided that:

6 (i) a policy of hospital, medical, surgical, or prescription drug
7 expense insurance that provides coverage for children shall provide such
8 coverage to a married or unmarried child until attainment of age twen-
9 ty-six, without regard to financial dependence, residency with the
10 employee or member, student status, or employment, except a policy that
11 is a grandfathered health plan may, for plan years beginning before
12 January first, two thousand fourteen, exclude coverage of an adult child
13 under age twenty-six who is eligible to enroll in an employer-sponsored
14 health plan other than a group health plan of a parent. For purposes of
15 this item, "grandfathered health plan" means coverage provided by an
16 insurer in which an individual was enrolled on March twenty-third, two
17 thousand ten for as long as the coverage maintains grandfathered status
18 in accordance with section 1251(e) of the Affordable Care Act, 42 U.S.C.
19 S 18011(e); and

20 (ii) a policy under which coverage terminates at a specified age shall
21 not so terminate with respect to an unmarried child who is incapable of
22 self-sustaining employment by reason of mental illness, developmental
23 disability, mental retardation, as defined in the mental hygiene law, or
24 physical handicap and who became so incapable prior to attainment of the
25 age at which coverage would otherwise terminate and who is chiefly
26 dependent upon such employee or member for support and maintenance,
27 while the insurance of the employee or member remains in force and the
28 child remains in such condition, if the insured employee or member has
29 within thirty-one days of such child's attainment of the termination age
30 submitted proof of such child's incapacity as described herein. NO
31 POLICY OF GROUP ACCIDENT, GROUP HEALTH OR GROUP ACCIDENT AND HEALTH
32 INSURANCE SHALL IMPOSE CO-PAYMENTS IN EXCESS OF TWENTY PERCENT OF THE
33 TOTAL REIMBURSEMENT TO THE PROVIDER OF CARE.

34 S 3. Subparagraph (A) of paragraph 4 of subsection (f) of section 4235
35 of the insurance law, as amended by chapter 593 of the laws of 2000, is
36 amended to read as follows:

37 (A) any physical and occupational therapy service which is within the
38 lawful scope of practice of a licensed physical and occupational thera-
39 pist, a subscriber to such policy shall be entitled to reimbursement for
40 such service, whether the said service is performed by a physician or
41 licensed physical and occupational therapist pursuant to prescription or
42 referral by a physician; AND A POLICY OF GROUP ACCIDENT, GROUP HEALTH OR
43 GROUP ACCIDENT AND HEALTH INSURANCE SHALL NOT IMPOSE CO-PAYMENTS IN
44 EXCESS OF TWENTY PERCENT OF THE TOTAL REIMBURSEMENT TO THE PROVIDER OF
45 CARE;

46 S 4. Subparagraph (G) of paragraph 1 of subsection (b) of section 4301
47 of the insurance law, as amended by chapter 593 of the laws of 2000, is
48 amended to read as follows:

49 (G) physical and occupational therapy care provided through licensed
50 physical and occupational therapists upon the prescription of a physi-
51 cian AND ANY CO-PAYMENTS RELATED TO REIMBURSEMENT FOR PHYSICAL THERAPY
52 SERVICES SHALL NOT EXCEED TWENTY PERCENT OF THE TOTAL REIMBURSEMENT TO
53 THE PROVIDER OF CARE,

54 S 5. Paragraph 13 of subsection (b) of section 4322 of the insurance
55 law, as added by chapter 504 of the laws of 1995, is amended to read as
56 follows:

1 (13) Outpatient physical therapy up to ninety visits per condition per
2 calendar year AND ANY CO-PAYMENTS RELATED TO REIMBURSEMENT FOR PHYSICAL
3 THERAPY SERVICES SHALL NOT EXCEED TWENTY PERCENT OF THE TOTAL REIMBURSE-
4 MENT TO THE PROVIDER OF CARE.

5 S 6. This act shall take effect on the one hundred eightieth day after
6 it shall have become a law.