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

2621

2011-2012 Regular Sessions

I N A S S E M B L Y

January 19, 2011

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

AN ACT to amend the insurance law, in relation to health insurance standard provisions for audiological and speech-language pathology examinations and evaluations

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

Section 1. Paragraph 16 of subsection (i) of section 3216 of the insurance law, as added by chapter 456 of the laws of 1993, is amended to read as follows:

(16) EVERY POLICY WHICH PROVIDES COVERAGE FOR HOSPITAL, SURGICAL OR MEDICAL CARE SHALL PROVIDE COVERAGE FOR AUDIOLOGICAL EXAMINATIONS AND EVALUATIONS, AND SHALL ALSO PROVIDE COVERAGE FOR SPEECH-LANGUAGE PATHOLOGY EXAMINATIONS AND EVALUATIONS WHICH ARE RECOMMENDED BY A LICENSED PHYSICIAN, A LICENSED AUDIOLOGIST OR A LICENSED SPEECH-LANGUAGE PATHOLOGIST AFTER COMPLETION OF AN AUDIOLOGICAL EXAMINATION AND EVALUATION, IN ACCORDANCE WITH THIS PARAGRAPH. SUCH POLICY SHALL PROVIDE COVERAGE FOR SUCH NUMBER OF SPEECH-LANGUAGE PATHOLOGY EXAMINATIONS AND EVALUATIONS AS ARE SO RECOMMENDED. SUCH POLICY SHALL PROVIDE COVERAGE FOR ANNUAL AUDIOLOGICAL TESTING AND EVALUATION BY A LICENSED PHYSICIAN OR LICENSED AUDIOLOGIST AND FOR SUCH ADDITIONAL NUMBER OF AUDIOLOGICAL TESTS AND EVALUATIONS AS ARE REQUIRED BY THE LICENSED PHYSICIAN OR LICENSED AUDIOLOGIST WHO COMPLETED A PRIOR EVALUATION. SUCH COVERAGES MAY BE SUBJECT TO 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. If a policy provides for reimbursement for speech-language pathology or audiology service which is within the lawful scope of practice of a duly licensed speech-language pathologist or audiologist, an insured shall be entitled to reimbursement for such service whether the said service is performed by a physician or duly licensed speech-language pathologist or audiolo-

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

LBD04282-01-1

gist[, provided however, that nothing contained herein shall be construed to impair any terms of such policy which may require said service to be performed pursuant to a medical order, or a similar or related service of a physician, in which case coverage need not be provided for any tests, evaluations or diagnoses if such tests, evaluations or diagnoses have already been provided by or through a physician within twelve months of the referral or order from the physician]. [However, nothing herein] NOTHING IN THIS PARAGRAPH shall be construed as preventing an insurer from covering more than one test or evaluation provided by a speech-language pathologist or audiologist within a twelve-month period where such test or evaluation is ordered by a physician as medically necessary[. Nor shall anything herein be construed as prohibiting the limitation of such services, where covered, to specified settings other than offices, such as hospitals or to services provided by such professionals as part of a home care agency's services] OR WHERE SUCH TEST OR EVALUATION IS ORDERED BY A SPEECH-LANGUAGE PATHOLOGIST OR AUDIOLOGIST WHO CONDUCTED SUCH A TEST OR EVALUATION WITHIN THE TWELVE-MONTH PERIOD.

S 2. Subsection (l) of section 3221 of the insurance law is amended by adding a new paragraph 18 to read as follows:

(18) EVERY INSURER DELIVERING A GROUP OR BLANKET POLICY OR ISSUING A GROUP OR BLANKET POLICY FOR DELIVERY IN THIS STATE WHICH PROVIDES COVERAGE FOR HOSPITAL, SURGICAL OR MEDICAL CARE SHALL PROVIDE COVERAGE FOR AUDIOLOGICAL EXAMINATIONS AND EVALUATIONS, AND SHALL ALSO PROVIDE COVERAGE FOR SPEECH-LANGUAGE PATHOLOGY EXAMINATIONS AND EVALUATIONS WHICH ARE RECOMMENDED BY A LICENSED PHYSICIAN, A LICENSED AUDIOLOGIST OR A LICENSED SPEECH-LANGUAGE PATHOLOGIST AFTER COMPLETION OF AN AUDIOLOGICAL EXAMINATION AND EVALUATION, IN ACCORDANCE WITH THIS PARAGRAPH. SUCH POLICY SHALL PROVIDE COVERAGE FOR SUCH NUMBER OF SPEECH-LANGUAGE PATHOLOGY EXAMINATIONS AND EVALUATIONS AS ARE SO RECOMMENDED. SUCH POLICY SHALL PROVIDE COVERAGE FOR ANNUAL AUDIOLOGICAL TESTING AND EVALUATION BY A LICENSED PHYSICIAN OR LICENSED AUDIOLOGIST AND FOR SUCH ADDITIONAL NUMBER OF AUDIOLOGICAL TESTS AND EVALUATIONS AS ARE REQUIRED BY THE LICENSED PHYSICIAN OR LICENSED AUDIOLOGIST WHO COMPLETED A PRIOR EVALUATION. SUCH COVERAGES MAY BE SUBJECT TO 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. Subparagraph (F) of paragraph 4 of subsection (f) of section 4235 of the insurance law, as added by chapter 456 of the laws of 1993, is amended to read as follows:

(F) any speech-language pathology or audiology service which is within the lawful scope of practice of a duly licensed speech-language pathologist or audiologist, a subscriber to such policy shall be entitled to reimbursement for such service whether the said service is performed by a physician or duly licensed speech-language pathologist or audiologist[, provided however, that nothing contained herein shall be construed to impair any terms of such policy which may require said service to be performed pursuant to a medical order, or a similar or related service of a physician, in which case coverage need not be provided for any tests, evaluations or diagnoses if such tests, evaluations or diagnoses have already been provided by or through a physician within twelve months of the referral or order from the physician]. [However, nothing herein] NOTHING IN THIS SUBPARAGRAPH shall be construed as preventing an insurer from covering more than one test or evaluation provided by a speech-language pathologist or audiologist

within a twelve-month period where such test or evaluation is ordered by a physician as medically necessary[. Nor shall anything herein be construed as prohibiting the limitation of such services, where covered, to specified settings other than offices, such as hospitals or to services provided by such professionals as part of a home care agency's services; and when] OR WHERE SUCH TEST OR EVALUATION IS ORDERED BY A SPEECH-LANGUAGE PATHOLOGIST OR AUDIOLOGIST WHO CONDUCTED SUCH A TEST OR EVALUATION WITHIN THE TWELVE-MONTH PERIOD. WHEN such policy or any certificate issued thereunder is delivered or issued for delivery without the state by an authorized insurer, covered persons residing in this state shall be entitled to reimbursement for speech-language pathology or audiology service as herein provided.

S 4. Subparagraph (I) of paragraph 1 of subsection (b) of section 4301 of the insurance law, as added by chapter 456 of the laws of 1993, is amended to read as follows:

(I) speech-language pathology or audiology services provided through licensed speech-language pathologists or audiologists[, provided however, that nothing contained herein shall be construed to prohibit a contract from requiring said service from being performed pursuant to a medical order or similar or related service of a physician, in which case coverage need not be provided for any tests, evaluations or diagnoses if such tests, evaluations or diagnoses have already been provided by or through a physician within twelve months of the referral or order from the physician]. [However, nothing herein] NOTHING IN THIS SUBPARAGRAPH shall be construed as preventing a corporation from covering more than one test or evaluation provided by a speech-language pathologist or audiologist within a twelve-month period where such [tests] TEST or [evaluations] EVALUATION is ordered by a physician as medically necessary[. Nor shall anything herein be construed as prohibiting the limitation of such services, where covered, to specified settings other than offices, such as hospitals or to services provided by such professionals as part of a home care agency's services] OR WHERE SUCH TEST OR EVALUATION IS ORDERED BY A SPEECH-LANGUAGE PATHOLOGIST OR AUDIOLOGIST WHO CONDUCTED SUCH A TEST OR EVALUATION WITHIN THE TWELVE-MONTH PERIOD,

S 5. Paragraph 3 of subsection (b) of section 4301 of the insurance law, as amended by chapter 593 of the laws of 2000, is amended to read as follows:

(3) Every medical expense indemnity corporation shall be open to the participation of licensed physicians, podiatrists, chiropractors, optometrists, physical and occupational therapists, speech-language pathologists, audiologists, and dentists, certified and registered psychologists without discrimination against schools of medical practice, podiatry practice, chiropractic practice, optometric practice, physical and occupational therapy practice, dental practice, speech-language pathology practice [(subject to the permitted limitations of paragraph one of this subsection)], audiology practice [(subject to the permitted limitations of paragraph one of this subsection)], and psychological training as defined in the education law.

S 6. Section 4303 of the insurance law is amended by adding a new subsection (hh) to read as follows:

(HH) EVERY CONTRACT ISSUED BY A MEDICAL EXPENSE INDEMNITY CORPORATION, A HOSPITAL SERVICE CORPORATION OR A HEALTH SERVICE CORPORATION WHICH PROVIDES COVERAGE FOR HOSPITAL, SURGICAL OR MEDICAL CARE SHALL PROVIDE COVERAGE FOR AUDIOLOGICAL EXAMINATIONS AND EVALUATIONS, AND SHALL ALSO PROVIDE COVERAGE FOR SPEECH-LANGUAGE PATHOLOGY EXAMINATIONS AND EVALUATIONS WHICH ARE RECOMMENDED BY A LICENSED PHYSICIAN, A LICENSED AUDIOL-

OGIST OR A LICENSED SPEECH-LANGUAGE PATHOLOGIST AFTER COMPLETION OF AN AUDIOLOGICAL EXAMINATION AND EVALUATION, IN ACCORDANCE WITH THIS SUBSECTION. SUCH CONTRACT SHALL PROVIDE COVERAGE FOR SUCH NUMBER OF SPEECH-LANGUAGE PATHOLOGY EXAMINATIONS AND EVALUATIONS AS ARE SO RECOMMENDED. SUCH CONTRACT SHALL PROVIDE COVERAGE FOR ANNUAL AUDIOLOGICAL TESTING AND EVALUATION BY A LICENSED PHYSICIAN OR LICENSED AUDIOLOGIST AND FOR SUCH ADDITIONAL NUMBER OF AUDIOLOGICAL TESTS AND EVALUATIONS AS ARE REQUIRED BY THE LICENSED PHYSICIAN OR LICENSED AUDIOLOGIST WHO COMPLETED A PRIOR EVALUATION. SUCH COVERAGES MAY BE SUBJECT TO 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 7. 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.