

7071

I N S E N A T E

April 23, 2014

Introduced by Sen. BALL -- 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 requiring health insurance coverage of inpatient treatment of opioid addiction

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

1 Section 1. Subsection (i) of section 3216 of the insurance law is
2 amended by adding a new paragraph 30 to read as follows:

3 (30)(A) EVERY POLICY DELIVERED OR ISSUED FOR DELIVERY IN THIS STATE
4 WHICH PROVIDES MEDICAL, MAJOR MEDICAL OR SIMILAR COMPREHENSIVE-TYPE
5 COVERAGE SHALL INCLUDE COVERAGE FOR BOTH INPATIENT AND OUTPATIENT OPIOID
6 ADDICTION SERVICES THAT ARE PROVIDED BY A QUALIFIED HEALTH PROFESSIONAL,
7 AS DEFINED IN THE REGULATIONS OF THE COMMISSIONER OF ALCOHOLISM AND
8 SUBSTANCE ABUSE SERVICES.

9 (B) THE ONLY PREREQUISITE FOR THE COVERAGE OF HOSPITAL OR NON-HOSPITAL
10 BASED OPIOID ADDICTION SERVICES, INCLUDING MEDICALLY MANAGED, MEDICALLY
11 SUPERVISED AND MEDICALLY MONITORED WITHDRAWAL, OR INPATIENT OR INTENSIVE
12 RESIDENTIAL REHABILITATION, OR INTENSIVE OR ROUTINE OUTPATIENT TREAT-
13 MENT, SHALL BE THAT A COVERED PERSON BE CERTIFIED AND REFERRED BY A
14 QUALIFIED HEALTH PROFESSIONAL. SUCH CERTIFICATION AND REFERRAL SHALL
15 CONTROL BOTH THE NATURE AND DURATION OF COVERED TREATMENT; PROVIDED,
16 HOWEVER, THAT SUCH COVERAGE SHALL BE TERMINATED WHEN THE ADMITTING OR
17 ATTENDING PHYSICIAN, OR A PHYSICIAN ASSISTANT OR NURSE PRACTITIONER
18 ACTING UNDER THE SUPERVISION OF A PHYSICIAN, PROVIDING OPIOID ADDICTION
19 SERVICES, REHABILITATION OR OUTPATIENT TREATMENT CERTIFIES THAT ADMIS-
20 SION OF THE COVERED PERSON IS NOT NECESSARY, EARLY DISCHARGE IS APPRO-
21 PRIATE OR ADDITIONAL INPATIENT DAYS OR SESSIONS ARE NECESSARY.

22 S 2. Subsection (l) of section 3221 of the insurance law is amended by
23 adding a new paragraph 19 to read as follows:

24 (19) (A) EVERY GROUP OR BLANKET POLICY DELIVERED OR ISSUED FOR DELIV-
25 ERY IN THIS STATE WHICH PROVIDES MEDICAL, MAJOR MEDICAL OR SIMILAR
26 COMPREHENSIVE-TYPE COVERAGE SHALL INCLUDE COVERAGE FOR BOTH INPATIENT
27 AND OUTPATIENT OPIOID ADDICTION SERVICES THAT ARE PROVIDED BY A QUALI-

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

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1 FIED HEALTH PROFESSIONAL, AS DEFINED IN THE REGULATIONS OF THE COMMIS-
2 SIONER OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES.

3 (B) THE ONLY PREREQUISITE FOR THE COVERAGE OF HOSPITAL OR NON-HOSPITAL
4 BASED OPIOID ADDICTION SERVICES, INCLUDING MEDICALLY MANAGED, MEDICALLY
5 SUPERVISED AND MEDICALLY MONITORED WITHDRAWAL, OR INPATIENT OR INTENSIVE
6 RESIDENTIAL REHABILITATION, OR INTENSIVE OR ROUTINE OUTPATIENT TREAT-
7 MENT, SHALL BE THAT A COVERED PERSON BE CERTIFIED AND REFERRED BY A
8 QUALIFIED HEALTH PROFESSIONAL. SUCH CERTIFICATION AND REFERRAL SHALL
9 CONTROL BOTH THE NATURE AND DURATION OF COVERED TREATMENT; PROVIDED,
10 HOWEVER, THAT SUCH COVERAGE SHALL BE TERMINATED WHEN THE ADMITTING OR
11 ATTENDING PHYSICIAN, OR A PHYSICIAN ASSISTANT OR NURSE PRACTITIONER
12 ACTING UNDER THE SUPERVISION OF A PHYSICIAN, PROVIDING OPIOID ADDICTION
13 SERVICES, REHABILITATION OR OUTPATIENT TREATMENT CERTIFIES THAT ADMIS-
14 SION OF THE COVERED PERSON IS NOT NECESSARY, EARLY DISCHARGE IS APPRO-
15 PRIATE OR ADDITIONAL INPATIENT DAYS OR SESSIONS ARE NECESSARY.

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

18 (OO) (1) EVERY CONTRACT ISSUED BY A HOSPITAL SERVICE COMPANY OR HEALTH
19 SERVICE CORPORATION WHICH PROVIDES MEDICAL, MAJOR MEDICAL OR SIMILAR
20 COMPREHENSIVE-TYPE COVERAGE SHALL INCLUDE COVERAGE FOR BOTH INPATIENT
21 AND OUTPATIENT OPIOID ADDICTION SERVICES THAT ARE PROVIDED BY A QUALI-
22 FIED HEALTH PROFESSIONAL, AS DEFINED IN THE REGULATIONS OF THE COMMIS-
23 SIONER OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES.

24 (2) THE ONLY PREREQUISITE FOR THE COVERAGE OF HOSPITAL OR NON-HOSPITAL
25 BASED OPIOID ADDICTION SERVICES, INCLUDING MEDICALLY MANAGED, MEDICALLY
26 SUPERVISED AND MEDICALLY MONITORED WITHDRAWAL, OR INPATIENT OR INTENSIVE
27 RESIDENTIAL REHABILITATION, OR INTENSIVE OR ROUTINE OUTPATIENT TREAT-
28 MENT, SHALL BE THAT A COVERED PERSON BE CERTIFIED AND REFERRED BY A
29 QUALIFIED HEALTH PROFESSIONAL. SUCH CERTIFICATION AND REFERRAL SHALL
30 CONTROL BOTH THE NATURE AND DURATION OF COVERED TREATMENT, PROVIDED,
31 HOWEVER, THAT SUCH COVERAGE SHALL BE TERMINATED WHEN THE ADMITTING OR
32 ATTENDING PHYSICIAN, OR A PHYSICIAN ASSISTANT OR NURSE PRACTITIONER
33 ACTING UNDER THE SUPERVISION OF A PHYSICIAN, PROVIDING OPIOID ADDICTION
34 SERVICES, REHABILITATION OR OUTPATIENT TREATMENT CERTIFIES THAT ADMIS-
35 SION OF THE COVERED PERSON IS NOT NECESSARY, EARLY DISCHARGE IS APPRO-
36 PRIATE OR ADDITIONAL INPATIENT DAYS OR SESSIONS ARE NECESSARY.

37 S 4. This act shall take effect on the thirtieth day after it shall
38 have become a law.