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

10066

I N A S S E M B L Y

May 10, 2016

Introduced by M. of A. RICHARDSON, GOTTFRIED -- read once and referred to the Committee on Health

AN ACT to amend the public health law and the insurance law, in relation to maternal depression screening and referral performed by a provider of pediatric services

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

Section 1. Legislative intent. The purpose of this act is to clarify that where a maternal depression screening is performed by the pediatric provider, the "patient" is the child; no new patient record needs to be created for the mother as patient; and the pediatric provider is covered if he or she is in the child's health plan network, regardless of whether he or she is in the mother's health plan network. In the traditional situation where the mother's health care provider is providing a maternal depression screening, the mother is the patient.

S 2. Section 4406-f of the public health law, as added by chapter 199 of the laws of 2014, is amended to read as follows:

S 4406-f. Maternal depression screenings. To the extent a plan provides coverage for maternal depression screening, no health maintenance organization subject to this article shall by contract, written policy or procedure limit a patient enrollee's direct access to screening and referral for maternal depression, as defined in subdivision one of section twenty-five hundred-k of this chapter, from a provider of obstetrical, gynecologic, or pediatric services of her choice; provided that: (A) the patient enrollee's access to such services, coverage and choice of provider is otherwise subject to the terms and conditions of the plan under which the patient enrollee is covered; (B) WHERE MATERNAL DEPRESSION SCREENING OR REFERRAL IS PERFORMED BY A PROVIDER OF PEDIATRIC SERVICES, THE CHILD OF THE MOTHER SHALL BE DEEMED TO BE THE PATIENT AND THE MATERNAL DEPRESSION SCREENING AND REFERRAL SHALL BE DEEMED TO BE A SERVICE PROVIDED TO THE CHILD; AND (C) OTHERWISE, THE MOTHER SHALL BE DEEMED TO BE THE PATIENT AND THE MATERNAL DEPRESSION SCREENING AND REFERRAL SHALL BE DEEMED TO BE A SERVICE PROVIDED TO THE MOTHER.

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

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S 3. Section 3217-g of the insurance law, as added by chapter 199 of the laws of 2014, is amended to read as follows:

S 3217-g. Maternal depression screenings. To the extent a policy provides coverage for maternal depression screening, no insurer subject to this article shall by contract, written policy or procedure limit a patient insured's direct access to screening and referral for maternal depression, as defined in subdivision one of section twenty-five hundred-k of the public health law, from a provider of obstetrical, gynecologic, or pediatric services of her choice; provided that: (A) the patient insured's access to such services, coverage and choice of provider is otherwise subject to the terms and conditions of the policy under which the patient insured is covered; (B) WHERE MATERNAL DEPRESSION SCREENING OR REFERRAL IS PERFORMED BY A PROVIDER OF PEDIATRIC SERVICES, THE CHILD OF THE MOTHER SHALL BE DEEMED TO BE THE PATIENT AND THE MATERNAL DEPRESSION SCREENING AND REFERRAL SHALL BE DEEMED TO BE A SERVICE PROVIDED TO THE CHILD; AND (C) OTHERWISE, THE MOTHER SHALL BE DEEMED TO BE THE PATIENT AND THE MATERNAL DEPRESSION SCREENING AND REFERRAL SHALL BE DEEMED TO BE A SERVICE PROVIDED TO THE MOTHER.

S 4. Section 4306-f of the insurance law, as added by chapter 199 of the laws of 2014, is amended to read as follows:

S 4306-f. Maternal depression screenings. To the extent a contract provides coverage for maternal depression screening, no corporation subject to this article shall by contract, written policy or procedure limit a patient insured's direct access to screening and referral for maternal depression, as defined in subdivision one of section twenty-five hundred-k of the public health law, from a provider of obstetrical, gynecologic, or pediatric services of her choice; provided that: (A) the patient insured's access to such services, coverage and choice of provider is otherwise subject to the terms and conditions of the contract under which the patient insured is covered; (B) WHERE MATERNAL DEPRESSION SCREENING OR REFERRAL IS PERFORMED BY A PROVIDER OF PEDIATRIC SERVICES, THE CHILD OF THE MOTHER SHALL BE DEEMED TO BE THE PATIENT AND THE MATERNAL DEPRESSION SCREENING AND REFERRAL SHALL BE DEEMED TO BE A SERVICE PROVIDED TO THE CHILD; AND (C) OTHERWISE, THE MOTHER SHALL BE DEEMED TO BE THE PATIENT AND THE MATERNAL DEPRESSION SCREENING AND REFERRAL SHALL BE DEEMED TO BE A SERVICE PROVIDED TO THE MOTHER.

S 5. 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, amended or delivered on or after such date; provided, however, that effective immediately, the addition, amendment and/or repeal of any rule or regulation necessary for the implementation of this act on its effective date are authorized and directed to be made and completed on or before such effective date.