## 3734

## 2015-2016 Regular Sessions

IN ASSEMBLY

January 27, 2015

Introduced by M. of A. ROSENTHAL, LAVINE -- Multi-Sponsored by -- M. of A. SKARTADOS -- read once and referred to the Committee on Insurance

AN ACT to amend the public health law and the insurance law, in relation to requiring health care insurers to offer coverage for health care provided by out-of-network providers

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

1 Section 1. Section 4403 of the public health law is amended by adding 2 a new subdivision 9 to read as follows:

9. EVERY HEALTH MAINTENANCE ORGANIZATION SHALL OFFER OUT-OF-NETWORK
COVERAGE AS AN OPTIONAL RIDER TO ANY CONTRACT AND SHALL OFFER AT LEAST
ONE CONTRACT OPTION THAT INCLUDES OUT-OF-NETWORK COVERAGE. THESE OPTIONS
SHALL BE MADE AVAILABLE BOTH WITHIN THE STATEWIDE HEALTH BENEFIT
EXCHANGE AND OUTSIDE OF THE HEALTH BENEFIT EXCHANGE.

8 S 2. Section 3217-e of the insurance law, as added by chapter 219 of 9 the laws of 2011, is amended to read as follows:

10 S 3217-e. Choice of health care provider. (A) An insurer that is subject to this article and requires or provides for designation by an 11 12 insured of a participating primary care provider shall permit the insured to designate any participating primary care provider who is 13 available to accept such individual, and in the case of a child, 14 shall 15 permit the insured to designate a physician (allopathic or osteopathic) 16 who specializes in pediatrics as the child's primary care provider if 17 such provider participates in the network of the insurer.

18 (B) EVERY INSURER THAT OFFERS HEALTH INSURANCE AND IS SUBJECT TO THE 19 PROVISIONS OF THIS ARTICLE, SHALL OFFER OUT-OF-NETWORK COVERAGE AS AN OPTIONAL RIDER TO ANY POLICY AND SHALL OFFER AT LEAST ONE POLICY OPTION 20 THAT INCLUDES OUT-OF-NETWORK COVERAGE. THESE OPTIONS 21 SHALL BE MADE 22 BOTH WITHIN THE STATEWIDE HEALTH BENEFIT EXCHANGE AND OUTSIDE AVAILABLE 23 OF THE HEALTH BENEFIT EXCHANGE.

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

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1 S 3. Section 4306-d of the insurance law, as added by chapter 219 of 2 the laws of 2011, is amended to read as follows:

4306-d. Choice of health care provider. (A) A corporation that is 3 S 4 subject to the provisions of this article and requires or provides for designation by a subscriber of a participating primary care provider shall permit the subscriber to designate any participating primary care 5 6 7 provider who is available to accept such individual, and in the case of a child, shall permit the subscriber to designate a physician (allopath-8 ic or osteopathic) who specializes in pediatrics as the child's primary 9 10 care provider if such provider participates in the network of the corpo-11 ration.

12 (B) EVERY CORPORATION THAT IS SUBJECT TO THE PROVISIONS OF THIS ARTI-13 CLE, SHALL OFFER OUT-OF-NETWORK COVERAGE AS AN OPTIONAL RIDER TO ANY 14 CONTRACT AND SHALL OFFER AT LEAST ONE CONTRACT OPTION THAT INCLUDES 15 OUT-OF-NETWORK COVERAGE. THESE OPTIONS SHALL BE MADE AVAILABLE BOTH 16 WITHIN THE STATEWIDE HEALTH BENEFIT EXCHANGE AND OUTSIDE OF THE HEALTH 17 BENEFIT EXCHANGE.

18 S 4. This act shall take effect on the first of January next succeed-19 ing the date on which it shall have become a law, and shall apply to 20 contracts and policies issued, renewed, modified or amended on or after 21 such date.