

903

2015-2016 Regular Sessions

I N A S S E M B L Y

January 8, 2015

Introduced by M. of A. CYMBROWITZ, COLTON, GALEF, GUNTHER, JAFFEE, ROBINSON, TITONE, ZEBROWSKI, CAHILL, TITUS -- Multi-Sponsored by -- M. of A. BRENNAN, GLICK, GOTTFRIED, HOOPER -- read once and referred to the Committee on Insurance

AN ACT to amend the insurance law, in relation to providing insurance coverage for colorectal cancer early detection

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

1 Section 1. Subsection (l) of section 3221 of the insurance law is
2 amended by adding a new paragraph 12-b to read as follows:
3 (12-B)(A) EVERY POLICY DELIVERED OR ISSUED FOR DELIVERY IN THIS STATE
4 WHICH PROVIDES MEDICAL COVERAGE THAT INCLUDES COVERAGE FOR PHYSICIAN
5 SERVICES IN A PHYSICIAN'S OFFICE AND EVERY POLICY WHICH PROVIDES MAJOR
6 MEDICAL OR SIMILAR COMPREHENSIVE-TYPE COVERAGE SHALL PROVIDE, UPON THE
7 PRESCRIPTION OF A HEALTH CARE PROVIDER LEGALLY AUTHORIZED TO PRESCRIBE
8 UNDER TITLE EIGHT OF THE EDUCATION LAW, THE FOLLOWING COVERAGE FOR DIAG-
9 NOSTIC SCREENING FOR COLORECTAL CANCER:
10 (I) STANDARD DIAGNOSTIC TESTING INCLUDING, BUT NOT LIMITED TO, A COLO-
11 NOSCOPY AND THE MOST RELIABLE, MEDICALLY RECOGNIZED SCREENING TEST
12 AVAILABLE AT ANY AGE FOR ANY PERSON HAVING A PRIOR HISTORY OF COLORECTAL
13 CANCER;
14 (II) AN ANNUAL STANDARD DIAGNOSTIC EXAMINATION INCLUDING, BUT NOT
15 LIMITED TO, A COLONOSCOPY AND THE MOST RELIABLE MEDICALLY RECOGNIZED
16 SCREENING TEST AVAILABLE FOR ANY PERSON AGE FIFTY AND OVER WHO IS ASYMP-
17 TOMATIC AND FOR ANY PERSON AGE FORTY AND OVER WITH A FAMILY HISTORY OF
18 COLORECTAL CANCER OR OTHER COLORECTAL CANCER RISK FACTORS; AND
19 (III) ANY ANCILLARY SERVICE SUCH AS BUT NOT LIMITED TO PATHOLOGY AND
20 ANESTHESIOLOGY THAT THE POLICYHOLDER'S PHYSICIAN DETERMINES TO BE
21 MEDICALLY NECESSARY AND APPROPRIATE.

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

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1 (B) SUCH COVERAGE MAY BE SUBJECT TO ANNUAL DEDUCTIBLES AND COINSURANCE
2 AS MAY BE DEEMED APPROPRIATE BY THE SUPERINTENDENT AND AS ARE CONSISTENT
3 WITH THOSE ESTABLISHED FOR OTHER BENEFITS WITHIN A GIVEN POLICY.

4 S 2. Subsection (i) of section 3216 of the insurance law is amended by
5 adding a new paragraph 32 to read as follows:

6 (32)(A) EVERY POLICY DELIVERED OR ISSUED FOR DELIVERY IN THIS STATE
7 WHICH PROVIDES MEDICAL COVERAGE THAT INCLUDES COVERAGE FOR PHYSICIAN
8 SERVICES IN A PHYSICIAN'S OFFICE AND EVERY POLICY WHICH PROVIDES MAJOR
9 MEDICAL OR SIMILAR COMPREHENSIVE-TYPE COVERAGE SHALL PROVIDE, UPON THE
10 PRESCRIPTION OF A HEALTH CARE PROVIDER LEGALLY AUTHORIZED TO PRESCRIBE
11 UNDER TITLE EIGHT OF THE EDUCATION LAW, THE FOLLOWING COVERAGE FOR DIAG-
12 NOSTIC SCREENING FOR COLORECTAL CANCER:

13 (I) STANDARD DIAGNOSTIC TESTING INCLUDING, BUT NOT LIMITED TO, A COLO-
14 NOSCOPY AND THE MOST RELIABLE, MEDICALLY RECOGNIZED SCREENING TEST
15 AVAILABLE AT ANY AGE FOR ANY PERSON HAVING A PRIOR HISTORY OF COLORECTAL
16 CANCER;

17 (II) AN ANNUAL STANDARD DIAGNOSTIC EXAMINATION INCLUDING, BUT NOT
18 LIMITED TO, A COLONOSCOPY AND THE MOST RELIABLE MEDICALLY RECOGNIZED
19 SCREENING TEST AVAILABLE FOR ANY PERSON AGE FIFTY AND OVER WHO IS ASYMP-
20 TOMATIC AND FOR ANY PERSON AGE FORTY AND OVER WITH A FAMILY HISTORY OF
21 COLORECTAL CANCER OR OTHER COLORECTAL CANCER RISK FACTORS; AND

22 (III) ANY ANCILLARY SERVICE SUCH AS BUT NOT LIMITED TO PATHOLOGY AND
23 ANESTHESIOLOGY THAT THE POLICYHOLDER'S PHYSICIAN DETERMINES TO BE
24 MEDICALLY NECESSARY AND APPROPRIATE.

25 (B) SUCH COVERAGE MAY BE SUBJECT TO ANNUAL DEDUCTIBLES AND COINSURANCE
26 AS MAY BE DEEMED APPROPRIATE BY THE SUPERINTENDENT AND AS ARE CONSISTENT
27 WITH THOSE ESTABLISHED FOR OTHER BENEFITS WITHIN A GIVEN POLICY.

28 S 3. This act shall take effect on the first of January next succeed-
29 ing the date on which it shall have become a law and shall apply to all
30 policies of life, accident and health insurance issued after such date.