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

10476

I N A S S E M B L Y

May 27, 2016

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

AN ACT to amend the insurance law and the public health law, in relation to ensuring reproductive health care during auto enrollment

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

Section 1. The insurance law is amended by adding a new section 3242 to read as follows:

S 3242. ENSURING REPRODUCTIVE HEALTH CARE DURING AUTO ENROLLMENT. (A) UPON THE AUTOMATIC ENROLLMENT OF AN INDIVIDUAL BY THE DEPARTMENT INTO A HEALTH INSURANCE PLAN PROVIDED BY A HEALTH INSURANCE COMPANY THAT EXCLUDES COVERAGE FOR REPRODUCTIVE HEALTH CARE SERVICES THAT WERE COVERED BY THE INDIVIDUAL'S PREVIOUS HEALTH INSURANCE PLAN, THE HEALTH INSURANCE COMPANY WHICH PROVIDES THE PLAN IN WHICH THE INDIVIDUAL WAS AUTOMATICALLY ENROLLED SHALL NOTIFY THE INDIVIDUAL OF THE DIFFERENCES BETWEEN EACH OF THE FOLLOWING:

(1) REPRODUCTIVE HEALTH CARE COVERAGE THEY RECEIVED THROUGH THEIR PREVIOUS PLAN;

(2) REPRODUCTIVE HEALTH CARE COVERAGE THEY WOULD RECEIVE UNDER THE PLAN IN WHICH THEY WERE AUTOMATICALLY ENROLLED; AND

(3) THE REQUIREMENTS FOR REPRODUCTIVE HEALTH CARE COVERAGE UNDER THE ESSENTIAL HEALTH BENEFITS PACKAGE.

(B) FOR THE CALENDAR YEAR TWO THOUSAND SIXTEEN, AN INDIVIDUAL WHO WAS AUTOMATICALLY ENROLLED IN A HEALTH INSURANCE PLAN PROVIDED BY A HEALTH INSURANCE COMPANY THAT EXCLUDES COVERAGE FOR REPRODUCTIVE HEALTH CARE SERVICES THAT WERE COVERED BY THEIR PREVIOUS HEALTH INSURANCE PLAN SHALL BE NOTIFIED BY THE HEALTH INSURANCE COMPANY WHICH PROVIDES THE PLAN IN WHICH THE INDIVIDUAL WAS AUTOMATICALLY ENROLLED OF THE DIFFERENCES BETWEEN EACH OF THE FOLLOWING:

(1) REPRODUCTIVE HEALTH CARE COVERAGE THEY RECEIVED THROUGH THEIR PREVIOUS PLAN;

(2) REPRODUCTIVE HEALTH CARE COVERAGE THEY WOULD RECEIVE UNDER THE PLAN IN WHICH THEY WERE AUTOMATICALLY ENROLLED; AND

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

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(3) THE REQUIREMENTS FOR REPRODUCTIVE HEALTH CARE COVERAGE UNDER THE ESSENTIAL HEALTH BENEFITS PACKAGE.

(C) FOR INDIVIDUALS WHO WERE AUTOMATICALLY ENROLLED IN A HEALTH INSURANCE PLAN DURING THE CALENDAR YEAR TWO THOUSAND SIXTEEN PRIOR TO THE EFFECTIVE DATE OF THIS SECTION, THIS INFORMATION SHALL BE DELIVERED TO THEM IN WRITING NO LATER THAN THIRTY DAYS AFTER THE EFFECTIVE DATE OF THIS SECTION; FOR INDIVIDUALS WHO ARE AUTOMATICALLY ENROLLED IN A HEALTH INSURANCE PLAN AFTER THE EFFECTIVE DATE OF THIS SECTION, THIS INFORMATION SHALL BE DELIVERED TO THEM IN WRITING NO LATER THAN THIRTY DAYS AFTER AUTOMATIC ENROLLMENT IN THE PLAN.

S 2. The insurance law is amended by adding a new section 4329 to read as follows:

S 4329. ENSURING REPRODUCTIVE HEALTH CARE DURING AUTO ENROLLMENT. (A) UPON THE AUTOMATIC ENROLLMENT OF AN INDIVIDUAL BY THE DEPARTMENT INTO A HEALTH INSURANCE PLAN PROVIDED BY A HEALTH INSURANCE COMPANY THAT EXCLUDES COVERAGE FOR REPRODUCTIVE HEALTH CARE SERVICES THAT WERE COVERED BY THE INDIVIDUAL'S PREVIOUS HEALTH INSURANCE PLAN, THE HEALTH INSURANCE COMPANY WHICH PROVIDES THE PLAN IN WHICH THE INDIVIDUAL WAS AUTOMATICALLY ENROLLED SHALL NOTIFY THE INDIVIDUAL OF THE DIFFERENCES BETWEEN EACH OF THE FOLLOWING:

(1) REPRODUCTIVE HEALTH CARE COVERAGE THEY RECEIVED THROUGH THEIR PREVIOUS PLAN;

(2) REPRODUCTIVE HEALTH CARE COVERAGE THEY WOULD RECEIVE UNDER THE PLAN IN WHICH THEY WERE AUTOMATICALLY ENROLLED; AND

(3) THE REQUIREMENTS FOR REPRODUCTIVE HEALTH CARE COVERAGE UNDER THE ESSENTIAL HEALTH BENEFITS PACKAGE.

(B) FOR THE CALENDAR YEAR TWO THOUSAND SIXTEEN, AN INDIVIDUAL WHO WAS AUTOMATICALLY ENROLLED IN A HEALTH INSURANCE PLAN PROVIDED BY A HEALTH INSURANCE COMPANY THAT EXCLUDES COVERAGE FOR REPRODUCTIVE HEALTH CARE SERVICES THAT WERE COVERED BY THEIR PREVIOUS HEALTH INSURANCE PLAN SHALL BE NOTIFIED BY THE HEALTH INSURANCE COMPANY WHICH PROVIDES THE PLAN IN WHICH THE INDIVIDUAL WAS AUTOMATICALLY ENROLLED OF THE DIFFERENCES BETWEEN EACH OF THE FOLLOWING:

(1) REPRODUCTIVE HEALTH CARE COVERAGE THEY RECEIVED THROUGH THEIR PREVIOUS PLAN;

(2) REPRODUCTIVE HEALTH CARE COVERAGE THEY WOULD RECEIVE UNDER THE PLAN IN WHICH THEY WERE AUTOMATICALLY ENROLLED; AND

(3) THE REQUIREMENTS FOR REPRODUCTIVE HEALTH CARE COVERAGE UNDER THE ESSENTIAL HEALTH BENEFITS PACKAGE.

(C) FOR INDIVIDUALS WHO WERE AUTOMATICALLY ENROLLED IN A HEALTH INSURANCE PLAN DURING THE CALENDAR YEAR TWO THOUSAND SIXTEEN PRIOR TO THE EFFECTIVE DATE OF THIS SECTION, THIS INFORMATION SHALL BE DELIVERED TO THEM IN WRITING NO LATER THAN THIRTY DAYS AFTER THE EFFECTIVE DATE OF THIS SECTION; FOR INDIVIDUALS WHO ARE AUTOMATICALLY ENROLLED IN A HEALTH INSURANCE PLAN AFTER THE EFFECTIVE DATE OF THIS SECTION, THIS INFORMATION SHALL BE DELIVERED TO THEM IN WRITING NO LATER THAN THIRTY DAYS AFTER AUTOMATIC ENROLLMENT IN THE PLAN.

S 3. The public health law is amended by adding a new section 4415 to read as follows:

S 4415. ENSURING REPRODUCTIVE HEALTH CARE DURING AUTO ENROLLMENT. 1. UPON THE AUTOMATIC ENROLLMENT OF AN INDIVIDUAL BY THE DEPARTMENT OF FINANCIAL SERVICES INTO A HEALTH INSURANCE PLAN PROVIDED BY A HEALTH MAINTENANCE ORGANIZATION THAT EXCLUDES COVERAGE FOR REPRODUCTIVE HEALTH CARE SERVICES THAT WERE COVERED BY THE INDIVIDUAL'S PREVIOUS HEALTH INSURANCE PLAN, THE HEALTH MAINTENANCE ORGANIZATION WHICH PROVIDES THE

PLAN IN WHICH THE INDIVIDUAL WAS AUTOMATICALLY ENROLLED SHALL NOTIFY THE INDIVIDUAL OF THE DIFFERENCES BETWEEN EACH OF THE FOLLOWING:

(A) REPRODUCTIVE HEALTH CARE COVERAGE THEY RECEIVED THROUGH THEIR PREVIOUS PLAN;

(B) REPRODUCTIVE HEALTH CARE COVERAGE THEY WOULD RECEIVE UNDER THE PLAN IN WHICH THEY WERE AUTOMATICALLY ENROLLED; AND

(C) THE REQUIREMENTS FOR REPRODUCTIVE HEALTH CARE COVERAGE UNDER THE ESSENTIAL HEALTH BENEFITS PACKAGE.

2. FOR THE CALENDAR YEAR TWO THOUSAND SIXTEEN, AN INDIVIDUAL WHO WAS AUTOMATICALLY ENROLLED IN A HEALTH INSURANCE PLAN PROVIDED BY A HEALTH MAINTENANCE ORGANIZATION THAT EXCLUDES COVERAGE FOR REPRODUCTIVE HEALTH CARE SERVICES THAT WERE COVERED BY THEIR PREVIOUS HEALTH INSURANCE PLAN SHALL BE NOTIFIED BY THE HEALTH MAINTENANCE ORGANIZATION WHICH PROVIDES THE PLAN IN WHICH THE INDIVIDUAL WAS AUTOMATICALLY ENROLLED OF THE DIFFERENCES BETWEEN EACH OF THE FOLLOWING:

(A) REPRODUCTIVE HEALTH CARE COVERAGE THEY RECEIVED THROUGH THEIR PREVIOUS PLAN;

(B) REPRODUCTIVE HEALTH CARE COVERAGE THEY WOULD RECEIVE UNDER THE PLAN IN WHICH THEY WERE AUTOMATICALLY ENROLLED; AND

(C) THE REQUIREMENTS FOR REPRODUCTIVE HEALTH CARE COVERAGE UNDER THE ESSENTIAL HEALTH BENEFITS PACKAGE.

3. FOR INDIVIDUALS WHO WERE AUTOMATICALLY ENROLLED IN A HEALTH INSURANCE PLAN DURING THE CALENDAR YEAR TWO THOUSAND SIXTEEN PRIOR TO THE EFFECTIVE DATE OF THIS SECTION, THIS INFORMATION SHALL BE DELIVERED TO THEM IN WRITING NO LATER THAN THIRTY DAYS AFTER THE EFFECTIVE DATE OF THIS SECTION; FOR INDIVIDUALS WHO ARE AUTOMATICALLY ENROLLED IN A HEALTH INSURANCE PLAN AFTER THE EFFECTIVE DATE OF THIS SECTION, THIS INFORMATION SHALL BE DELIVERED TO THEM IN WRITING NO LATER THAN THIRTY DAYS AFTER AUTOMATIC ENROLLMENT IN THE PLAN.

S 4. This act shall take effect immediately.