

1 IMPLEMENT A PROGRAM AUTHORIZING THE USE OF BIOMETRIC TECHNOLOGY FOR THE
2 PURPOSES OF PATIENT AND PROVIDER IDENTIFICATION AND FOR USE AS AN ANTI-
3 FRAUD APPLICATION IN THE MEDICAID PROGRAM.

4 2. SUCH REQUEST FOR PROPOSALS SHALL INCLUDE AT A MINIMUM THAT (A)
5 MEDICAID RECIPIENTS AND PROVIDERS SHALL PROVIDE BIOMETRIC PROOF OF THEIR
6 IDENTITY ALONG WITH OTHER INFORMATION DEEMED NECESSARY BY THE COMMIS-
7 SIONER.

8 (B) SUCH PROGRAM WILL BE CAPABLE OF STORING BIOMETRIC MARKERS AND A
9 LOG OF DOCTOR AND PHARMACY VISITS FOR EACH SERVICE BILLED TO THE MEDI-
10 CAID PROGRAM.

11 (C) MEDICAID IDENTIFICATION SHALL BE ISSUED TO AND ACCEPTED BY THE
12 ADMITTING STAFF OF THE HEALTH CARE FACILITY.

13 (D) MEDICAID RECIPIENTS SHALL BE REQUIRED TO PROVIDE BIOMETRIC PROOF
14 OF IDENTITY AT THE TIME OF EACH VISIT TO A DOCTOR'S OFFICE OR CLINIC AT
15 THE POINT OF ACTUALLY BEING SEEN BY THE DOCTOR OR CLINICAL STAFF, AND
16 SHALL AGAIN PROVIDE PROOF OF IDENTITY UPON COMPLETION OF CARE OR
17 SERVICES.

18 (E) PROVISIONS SHALL BE INCLUDED FOR EMERGENCY SERVICES OR
19 PRESCRIPTIONS AND ALTERNATE IDENTIFICATION METHODS FOR MEDICAID RECIPI-
20 ENTS PHYSICALLY OR MENTALLY UNABLE TO PROVIDE BIOMETRIC IDENTIFICATION.

21 (F) FRAUD PREVENTION MARKERS INCORPORATED INTO SOFTWARE WHICH SHALL BE
22 USED TO OPERATE THE HARDWARE COMPONENT OF THE BIOMETRIC TECHNOLOGY SHALL
23 PREVENT AND/OR REJECT THE PAYMENT BY THE MEDICAID PROGRAM AND ALERT THE
24 SERVICE PROVIDER AT POINT OF SERVICE IF FRAUD OR POTENTIAL FRAUD IS
25 IDENTIFIED BY THE BIOMETRIC TECHNOLOGY SYSTEM.

26 (G) PROVISIONS SHALL BE INCLUDED TO ENSURE THAT MEDICAID RECIPIENTS
27 HAVE ACCESS TO EMERGENCY HEALTH SERVICES IN THE CASE OF A BIOMETRIC
28 TECHNOLOGY SYSTEM MALFUNCTION OR FRAUD DETECTION ALARM.

29 (H) EVALUATION AND SELECTION OF AN IDENTITY CREDENTIALING SYSTEM THAT
30 ADDRESSES THE REQUIREMENTS OF MEDICAID BENEFICIARIES AND PROVIDERS SHALL
31 BE BASED ON THE FOLLOWING CRITERIA: SECURITY, PRIVACY, USABILITY,
32 PERFORMANCE, HYGIENE, BIOMETRIC CAPTURE AND STORAGE REQUIREMENTS, AND
33 INTEROPERABILITY.

34 (I) SUCH PROGRAM SHALL BE OPERATIONAL WITHIN TWELVE MONTHS OF PROGRAM
35 APPROVAL AND WILL OPERATE FOR THREE YEARS.

36 3. SUCH REQUEST FOR PROPOSALS SHALL SET FORTH REQUIREMENTS AS TO THE
37 RESULTS AND GOALS TO BE ACHIEVED, RATHER THAN SPECIFIC TECHNICAL METHODS
38 OR SYSTEMS, TO ALLOW CONSIDERATION OF THE WIDEST POSSIBLE CHOICE OF
39 AVAILABLE TECHNOLOGY.

40 4. SUCH REQUEST FOR PROPOSALS SHALL REQUIRE: (A) THAT THE PROGRAM
41 SHALL BE REVENUE NEUTRAL FROM INCEPTION, WHEREBY ANY PROGRAM COSTS ARE
42 AT LEAST OFFSET BY STATE MEDICAID SAVINGS, AND SHALL HAVE AS A PRIMARY
43 GOAL REDUCTION OF MEDICAID EXPENDITURES THROUGH ELIMINATION OF FRAUD AND
44 ABUSE; AND (B) THAT THE PROGRAM SHALL BE COST NEUTRAL TO PROVIDERS FROM
45 INCEPTION, WHEREBY ANY PROVIDER COSTS ARE AT LEAST OFFSET BY PROVIDER
46 SAVINGS, AND SHALL HAVE AS A PRIMARY GOAL PROVIDER SAVINGS THROUGH
47 INCREASED EFFICIENCIES.

48 5. (A) SUCH REQUEST FOR PROPOSALS FOR THE IMPLEMENTATION OF A PROGRAM
49 FOR BIOMETRIC TECHNOLOGY USE SHALL BE PUBLISHED ON OR BEFORE JANUARY
50 FIFTEENTH, TWO THOUSAND EIGHTEEN, AND SHALL PROVIDE THAT PROPOSALS SHALL
51 BE OPENED ON OR BEFORE MARCH FIRST, TWO THOUSAND EIGHTEEN.

52 (B) THE COMMISSIONER SHALL REPORT TO THE GOVERNOR, THE TEMPORARY PRES-
53 IDENT OF THE SENATE, THE SPEAKER OF THE ASSEMBLY, AND THE CHAIRS OF THE
54 SENATE AND ASSEMBLY HEALTH COMMITTEES ON OR BEFORE MARCH THIRTIETH, TWO
55 THOUSAND EIGHTEEN WITH REGARD TO THE PROGRESS MADE IN THE DEVELOPMENT OF

1 CRITERIA FOR A PROGRAM OF BIOMETRIC IDENTIFICATION AND OF THE IMPLEMEN-
2 TATION OF SUCH PROGRAM.

3 6. THE COMMISSIONER SHALL, UPON SUBMISSION OF SATISFACTORY EVIDENCE
4 OF COMPLIANCE WITH THE PROVISIONS OF THIS TITLE, APPROVE TWO MEDICAID
5 IDENTIFICATION AND ANTI-FRAUD BIOMETRIC TECHNOLOGY PILOT PROGRAMS, ONE
6 TO BE LOCATED IN AN UPSTATE HOSPITAL AND ONE TO BE LOCATED IN A DOWN-
7 STATE HOSPITAL.

8 7. EACH HOSPITAL WILL BE APPROPRIATED THREE HUNDRED THOUSAND DOLLARS
9 TO ASSIST IN ENABLING THE MEDICAID IDENTIFICATION AND ANTI-FRAUD BIOME-
10 TRIC TECHNOLOGY PILOT PROGRAM.

11 S 293. RULES AND REGULATIONS. THE COMMISSIONER IS AUTHORIZED AND
12 DIRECTED TO PROMULGATE SUCH RULES AND REGULATIONS AS HE OR SHE MAY DEEM
13 NECESSARY OR APPROPRIATE TO EFFECTUATE THE PURPOSES OF THIS ARTICLE.

14 S 2. Subdivision 1 of section 367-b of the social services law, as
15 added by chapter 639 of the laws of 1976, is amended to read as follows:

16 1. The department, IN CONSULTATION WITH THE COMMISSIONER OF HEALTH,
17 shall design and implement a statewide medical assistance information
18 and payments system for the purpose of providing individual and aggre-
19 gate data to social services districts to assist them in making basic
20 management decisions, to the department and other state agencies to
21 assist in the administration of the medical assistance program, and to
22 the governor and the legislature as may be necessary to assist in making
23 major administrative and policy decisions affecting such program. Such
24 system shall be designed so as to be capable of the following:

25 a. receiving and processing information relating to the eligibility of
26 each person applying for medical assistance and of issuing a medical
27 assistance identification card, AND WHEN AVAILABLE UTILIZING THE BIOME-
28 TRIC IDENTIFICATION ISSUED BY THE DEPARTMENT OF HEALTH, CONFORMING TO
29 THE REQUIREMENTS SET FORTH IN THE MEDICAID IDENTIFICATION AND ANTI-FRAUD
30 BIOMETRIC TECHNOLOGY PILOT PROGRAM ESTABLISHED PURSUANT TO ARTICLE TWO-B
31 OF THE PUBLIC HEALTH LAW to persons determined by a social services
32 official to be eligible for such assistance;

33 b. ACTIVATING MEDICAL ASSISTANCE IDENTIFICATION BY REQUIRING AN
34 APPLICANT RECEIVING SUCH IDENTIFICATION FROM THE DEPARTMENT TO HAVE IT
35 VERIFIED AT A SOCIAL SERVICES DISTRICT OFFICE IN THE SOCIAL SERVICES
36 DISTRICT IN WHICH THE APPLICANT RESIDES;

37 C. receiving and processing information relating to each qualified
38 provider of medical assistance furnishing care, services or supplies for
39 which claims for payment are made pursuant to this title;

40 [c.] D. receiving and processing, in a form and manner prescribed by
41 the department, all claims for medical care, services and supplies, and
42 making payments for valid claims to providers of medical care, services
43 and supplies on behalf of social services districts;

44 [d.] E. maintaining information necessary to allow the department,
45 consistent with the powers and duties of the department of health, to
46 review the appropriateness, scope and duration of medical care, services
47 and supplies provided to any eligible person pursuant to this chapter;
48 and

49 [e.] F. initiating implementation of such a system for the district
50 comprising the city of New York, in a manner compatible with expansion
51 of such system to districts other than the district comprising the city
52 of New York.

53 S 3. The sum of six hundred thousand dollars (\$600,000), or so much
54 thereof as may be necessary, is hereby appropriated to the department of
55 health out of any moneys in the state treasury in the general fund to
56 the credit of the Medicaid identification and anti-fraud biometric tech-

1 nology pilot program, not otherwise appropriated, and made immediately
2 available, for the purpose of carrying out the provisions of this act.
3 Such moneys shall be payable on the audit and warrant of the comptroller
4 on vouchers certified or approved by the department of health in the
5 manner prescribed by law.
6 S 4. This act shall take effect immediately.