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

1847

2015-2016 Regular Sessions

I N S E N A T E

January 15, 2015

Introduced by Sen. HANNON -- read twice and ordered printed, and when printed to be committed to the Committee on Health

AN ACT to amend the public health law and the insurance law, in relation to allowing health care insurers to offer out-of-network coverage

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

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

9. NOTWITHSTANDING ANY RULE OR REGULATION TO THE CONTRARY, EVERY HEALTH MAINTENANCE ORGANIZATION MAY OFFER, PURSUANT TO OTHER PROVISIONS OF LAW, OUT-OF-NETWORK COVERAGE OUTSIDE OF THE HEALTH BENEFIT EXCHANGE REGARDLESS OF WHETHER SUCH COVERAGE IS MADE AVAILABLE WITHIN THE HEALTH BENEFIT EXCHANGE.

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

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 insured of a participating primary care provider shall permit the insured to designate any participating primary care provider who is available to accept such individual, and in the case of a child, shall permit the insured to designate a physician (allopathic or osteopathic) who specializes in pediatrics as the child's primary care provider if such provider participates in the network of the insurer.

(B) NOTWITHSTANDING ANY RULE OR REGULATION TO THE CONTRARY, EVERY INSURER THAT OFFERS HEALTH INSURANCE AND IS SUBJECT TO THE PROVISIONS OF THIS ARTICLE, MAY OFFER, PURSUANT TO OTHER PROVISIONS OF LAW, OUT-OF-NETWORK COVERAGE OUTSIDE OF THE HEALTH BENEFIT EXCHANGE REGARDLESS OF WHETHER SUCH COVERAGE IS MADE AVAILABLE WITHIN THE HEALTH BENEFIT EXCHANGE.

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

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

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S 4306-d. Choice of health care provider. (A) A corporation that is 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 provider who is available to accept such individual, and in the case of a child, shall permit the subscriber to designate a physician (allopathic or osteopathic) who specializes in pediatrics as the child's primary care provider if such provider participates in the network of the corporation.

(B) NOTWITHSTANDING ANY RULE OR REGULATION TO THE CONTRARY, EVERY CORPORATION THAT IS SUBJECT TO THE PROVISIONS OF THIS ARTICLE, MAY OFFER, PURSUANT TO OTHER PROVISIONS OF LAW, OUT-OF-NETWORK COVERAGE OUTSIDE OF THE HEALTH BENEFIT EXCHANGE REGARDLESS OF WHETHER SUCH COVERAGE IS MADE AVAILABLE WITHIN THE HEALTH BENEFIT EXCHANGE.

S 4. This act shall take effect immediately, and shall apply to contracts and policies issued, renewed, modified or amended on or after such date.