7558

IN SENATE

May 9, 2016

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

AN ACT to amend the insurance law, in relation to denial of coverage of treatment related to health care services for which pre-authorization was granted

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

- Section 1. Section 3238 of the insurance law is amended by adding a new subsection (c-1) to read as follows:
 - (C-1) IF A HEALTH PLAN DENIES PAYMENT FOR THE TREATMENT OF CONCURRENT SYMPTOMS OR SIDE EFFECTS DUE TO LACK OF PRE-AUTHORIZATION AND SUCH TREATMENT IS RENDERED AT THE SAME TIME AS A HEALTH CARE SERVICE FOR WHICH PRE-AUTHORIZATION WAS REQUIRED AND RECEIVED, UPON THE APPEAL OF THE DENIAL, THE DENIAL OF ANY SUCH SERVICE SHALL BE UPHELD ONLY IF IT IS DETERMINED THAT:
 - (1) THE TREATMENT IS NOT A COVERED BENEFIT;

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- (2) THE TREATMENT WAS NOT MEDICALLY NECESSARY PURSUANT TO SECTION FOUR THOUSAND NINE HUNDRED FOUR OF THIS CHAPTER OR SECTION FORTY-NINE HUNDRED FOUR OF THE PUBLIC HEALTH LAW;
- 13 (3) THE TREATMENT WAS EXPERIMENTAL OR INVESTIGATIONAL PURSUANT TO 14 SECTION FOUR THOUSAND NINE HUNDRED FOUR OF THIS CHAPTER OR SECTION 15 FORTY-NINE HUNDRED FOUR OF THE PUBLIC HEALTH LAW; OR
- 16 (4) ONE OF THE CONDITIONS SET FORTH IN PARAGRAPHS ONE THROUGH SIX OF 17 SUBSECTION (A) OF THIS SECTION IS MET.
- 18 S 2. This act shall take effect on the ninetieth day after it shall 19 have become a law.

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

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