

8142

I N S E N A T E

June 14, 2016

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

AN ACT to amend the social services law, in relation to complex rehabilitation technology products and services; and to repeal subdivision nine of section 4403 of the public health law relating thereto

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

1 Section 1. Paragraph (b) of subdivision 2 of section 367-j of the
2 social services law, as added by a chapter of the laws of 2016 amending
3 the social services law and the public health law relating to preserving
4 access to quality complex rehabilitation technology for patients with
5 complex medical needs, as proposed in legislative bills numbers S.3651-D
6 and A. 5074-C, is amended to read as follows:
7 (b) Pursuant to paragraph (a) of this subdivision, the commissioner
8 shall, not later than October first, two thousand eighteen: (i) design-
9 ate products and services included in mixed and pure HCPCS billing
10 codes as complex rehabilitation technology, and as [needed] DEEMED
11 NECESSARY AND APPROPRIATE BY THE COMMISSIONER, create new billing codes
12 or code modifiers for services and products covered for complex needs
13 patients; (ii) set minimum standards consistent with paragraph (i) of
14 subdivision one of this section in order for suppliers to be considered
15 qualified complex rehabilitation technology suppliers eligible for medi-
16 caid reimbursement; (iii) exempt products or services billed under mixed
17 or pure HCPCS codes from inclusion in any bidding, selective contract-
18 ing, request for proposal, or similar initiative; (iv) require complex
19 needs patients receiving a complex rehabilitation manual wheelchair,
20 power wheelchair, or seating component to be evaluated by a qualified
21 health care professional and a qualified complex rehabilitation technol-
22 ogy professional to qualify for reimbursement (such evaluation shall be
23 exempt from any health care professional cap); AND (v) make other chang-
24 es as needed to protect access to complex rehabilitation technology for
25 complex needs patients[; and (vi) affirm that with the exception of
26 those enrollees covered under a payment rate methodology otherwise nego-
27 tiated, payments for complex rehabilitation technology provided to

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

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1 patients eligible for medical assistance by organizations operating in
2 accordance with the provisions of article forty-four of the public
3 health law or by health maintenance organizations organized and operat-
4 ing in accordance with article forty-three of the insurance law, shall
5 be the rates of payment that would be paid for such payments under the
6 medical assistance program as determined by the commissioner and appli-
7 cable to services at the time such services were provided.]. THE
8 REIMBURSEMENT RATE PAID TO PROVIDERS FOR COMPLEX REHABILITATION TECHNOL-
9 OGY PRODUCTS AND SERVICES BY MANAGED CARE ORGANIZATIONS PURSUANT TO
10 SECTION FORTY-FOUR HUNDRED THREE-F OF THE PUBLIC HEALTH LAW AND SECTION
11 THREE HUNDRED SIXTY-FOUR-J OF THIS TITLE SHALL BE DETERMINED BY AGREE-
12 MENT BETWEEN THE PROVIDER AND MANAGED CARE ORGANIZATION. THE AMOUNT OF
13 ANY REIMBURSEMENT RATE INCREASE RESULTING FROM THE IMPLEMENTATION OF
14 THIS SECTION SHALL BE SPECIFICALLY IDENTIFIED IN THE MANAGED CARE ORGAN-
15 IZATION'S PREMIUMS AND THE COMMISSIONER SHALL PROVIDE FOR THE EXPE-
16 DITIOUS INCREASE OF SUCH PREMIUMS TO ENSURE THE ACTUARIAL SOUNDNESS AND
17 ADEQUACY OF SUCH PREMIUMS AND TO ACCURATELY ACCOUNT FOR THE COST OF THE
18 AMOUNTS PAID TO PROVIDERS PURSUANT TO THIS SECTION. THE COMMISSIONER,
19 IN HIS OR HER JUDGMENT, MAY ESTABLISH A MINIMUM BENCHMARK REIMBURSEMENT
20 RATE FOR MANAGED CARE ORGANIZATIONS TO PAY CONTRACTED PROVIDERS PURSUANT
21 TO THIS SECTION, PROVIDED SUCH BENCHMARK RATE IS SPECIFICALLY IDENTIFIED
22 AND INCLUDED IN THE MANAGED CARE ORGANIZATIONS PREMIUMS.

23 S 2. Subdivision 9 of section 4403 of the public health law is
24 repealed.

25 S 3. This act shall take effect on the same date and in the same
26 manner as a chapter of the laws of 2016 amending the social services law
27 and the public health law relating to preserving access to quality
28 complex rehabilitation technology for patients with complex medical
29 needs, as proposed in legislative bills numbers S.3651-D and A. 5074-C
30 takes effect.