

STATE OF NEW YORK

2548

2017-2018 Regular Sessions

IN ASSEMBLY

January 20, 2017

Introduced by M. of A. LIFTON, JAFFEE, KAVANAGH, O'DONNELL,
PEOPLES-STOKES, ROSENTHAL -- Multi-Sponsored by -- M. of A. COLTON,
GALEF, GUNTHER -- read once and referred to the Committee on Insurance

AN ACT to amend the insurance law, in relation to providing coverage for
family members of children who require psychiatric or psychological
services

The People of the State of New York, represented in Senate and Assem-
bly, do enact as follows:

1 Section 1. Subsection (i) of section 3216 of the insurance law is
2 amended by adding a new paragraph 34 to read as follows:

3 (34) (A) Every insurer issuing a policy of accident and health insur-
4 ance for delivery in this state which provides coverage for psychiatric
5 or psychological services or diagnosis or treatment of mental, nervous
6 or emotional disorders or ailments shall make available and provide
7 coverage for family sessions when the insured is under eighteen years of
8 age. In this paragraph, "family sessions" means therapy sessions deter-
9 mined as necessary by a licensed psychological professional in the state
10 involving any family member of an insured.

11 (B) The coverage required by this paragraph shall include treatment as
12 a family member pursuant to such family member's own policy or contract
13 provided such family member (i) does not exceed the allowable number of
14 family visits provided by the applicable policy or contract, and (ii) is
15 otherwise entitled to coverage pursuant to such family member's applica-
16 ble policy or contract.

17 § 2. Subsection (1) of section 3221 of the insurance law is amended by
18 adding a new paragraph 20 to read as follows:

19 (20) (A) Every group or blanket policy which provides coverage for
20 psychiatric or psychological services or diagnosis or treatment of
21 mental, nervous or emotional disorders or ailments shall make available
22 and provide coverage for family sessions when the insured is under eigh-
23 teen years of age. In this paragraph, "family sessions" means therapy

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

LBD07907-01-7

sessions determined as necessary by a licensed psychological professional in the state involving any family member of an insured.

(B) The coverage required by this paragraph shall include treatment as a family member pursuant to such family member's own policy or contract provided such family member (i) does not exceed the allowable number of family visits provided by the applicable policy or contract, and (ii) is otherwise entitled to coverage pursuant to such family member's applicable policy or contract.

§ 3. Subsection (i) of section 4303 of the insurance law, as amended by chapter 230 of the laws of 2004, is amended to read as follows:

(i) A medical expense indemnity corporation or health service corporation which provides coverage for physicians, psychiatrists or psychologists for psychiatric or psychological services or for the diagnosis and treatment of mental, nervous or emotional disorders and ailments, however defined in such contract, must make available and if requested by all persons holding individual contracts in a group whose premiums are paid by a remitting agent or by the contract holder in the case of a group contract issued pursuant to section four thousand three hundred five of this article[7]: (A) provide the same coverage for such services when performed by a licensed clinical social worker, within the lawful scope of his or her practice, who is licensed pursuant to article one hundred fifty-four of the education law. The state board for social work shall maintain a list of all licensed clinical social workers qualified for reimbursement under this subsection. Such coverage shall be made available at the inception of all new contracts and, with respect to all other contracts, at any anniversary date subject to evidence of insurability. Written notice of the availability of such coverage shall be delivered to the group remitting agent or group contract holder prior to inception of such contract and annually thereafter, except that this notice shall not be required where a policy covers two hundred or more employees or where the benefit structure was the subject of collective bargaining affecting persons who are employed in more than one state[7]; and (B) make available and provide coverage for family sessions when the insured is under eighteen years of age.

(i) In this subsection, "family sessions" means therapy sessions determined as necessary by a licensed psychological professional in the state involving any family member of an insured.

(ii) The coverage required by this subsection shall include treatment as a family member pursuant to such family member's own policy or contract provided such family member (1) does not exceed the allowable number of family visits provided by the applicable policy or contract, and (2) is otherwise entitled to coverage pursuant to such family member's applicable policy or contract.

§ 4. This act shall take effect on the one hundred twentieth day after it shall have become a law, except that any rule or regulation necessary for the timely implementation of this act on its effective date shall be promulgated on or before such date.