

STATE OF NEW YORK

3694--C

2017-2018 Regular Sessions

IN ASSEMBLY

January 30, 2017

Introduced by M. of A. GUNTHER, LIFTON, SKOUFIS, BUCHWALD, GALEF, ABINANTI, STECK -- Multi-Sponsored by -- M. of A. THIELE -- read once and referred to the Committee on Insurance -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee -- recommitted to the Committee on Insurance in accordance with Assembly Rule 3, sec. 2 -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee -- again reported from said committee with amendments, ordered reprinted as amended and recommitted to said committee

AN ACT to amend the insurance law, in relation to establishing the mental health and substance use disorder parity report act

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

1 Section 1. Short title. This act shall be known and may be cited as
2 the "mental health and substance use disorder parity report act".

3 § 2. Section 210 of the insurance law is amended by adding a new
4 subsection (c-1) to read as follows:

5 (c-1) Beginning September first, two thousand nineteen and annually
6 thereafter, the superintendent shall include in such guide a mental
7 health and substance use disorder parity report detailing each company's
8 compliance with federal and state mental health and substance use disor-
9 der parity laws based on each company's record during the preceding
10 calendar year. The superintendent shall include in such report, and
11 each company shall provide to the superintendent the information
12 required for such guide in a timely fashion, the following information:

13 (1) Rates of utilization review for mental health and substance use
14 disorder claims as compared to medical and surgical claims, including
15 rates of approval and denial, categorized by benefits provided under the
16 following classifications: inpatient in-network, inpatient out-of-net-
17 work, outpatient in-network, outpatient out-of-network, emergency care,
18 and prescription drugs;

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

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1 (2) The number of prior or concurrent authorization requests for
2 mental health services and for substance use disorder services and the
3 number of denials for such requests, compared with the number of prior
4 or concurrent authorization requests for medical and surgical services
5 and the number of denials for such requests, categorized by the same
6 classifications identified in paragraph one of this subsection;

7 (3) The rates of appeals of adverse determinations, including the
8 rates of adverse determinations upheld and overturned, for mental health
9 claims and substance use disorder claims compared with the rates of
10 appeals of adverse determinations, including the rates of adverse deter-
11 minations upheld and overturned, for medical and surgical claims;

12 (4) The percentage of claims paid for in-network mental health
13 services and for substance use disorder services compared with the
14 percentage of claims paid for in-network medical and surgical services
15 and the percentage of claims paid for out-of-network mental health
16 services and substance use disorder services compared with the percent-
17 age of claims paid for out-of-network medical and surgical services;

18 (5) The number of behavioral health advocates, pursuant to an agree-
19 ment with the office of the attorney general if applicable, or staff
20 available to assist policyholders with mental health benefits and
21 substance use disorder benefits;

22 (6) A comparison of the cost sharing requirements including but not
23 limited to co-pays and coinsurance, and the benefit limitations includ-
24 ing limitations on the scope and duration of coverage, for medical and
25 surgical services, and mental health services and substance use disorder
26 services;

27 (7) The number by type of providers licensed to practice in this state
28 that provide services for the treatment and diagnosis of substance use
29 disorder who are in-network, and the number by type of providers
30 licensed to practice in this state that provide services for the diagno-
31 sis and treatment of mental, nervous or emotional disorders and
32 ailments, however defined in a company's policy, who are in-network;

33 (8) The percentage of providers of services for the treatment and
34 diagnosis of substance use disorder who remained participating provid-
35 ers, and the percentage of providers of services for the diagnosis and
36 treatment of mental, nervous or emotional disorders and ailments, howev-
37 er defined in a company's policy, who remained participating providers;
38 and

39 (9) Any other data or metric the superintendent deems necessary to
40 measure compliance with mental health and substance use disorder parity
41 including, but not limited to an evaluation and assessment of: (i) the
42 adequacy of the company's in-network mental health services and
43 substance use disorder provider panels pursuant to provisions of the
44 insurance law and public health law; and (ii) the company's reimburse-
45 ment for in-network and out-of-network mental health services and
46 substance use disorder services as compared to the reimbursement for
47 in-network and out-of-network medical and surgical services.

48 § 3. Subsection (d) of section 210 of the insurance law, as added by
49 chapter 579 of the laws of 1998, is amended to read as follows:

50 (d) Health insurers and entities certified pursuant to article forty-
51 four of the public health law shall provide annually to the superinten-
52 dent and the commissioner of health, and the commissioner of health
53 shall provide to the superintendent, all of the information necessary
54 for the superintendent to produce the annual consumer guide, including
55 the mental health and substance use disorder parity report. In compil-
56 ing the guide, the superintendent shall make every effort to ensure that

1 the information is presented in a clear, understandable fashion which
2 facilitates comparisons among individual insurers and entities, and in a
3 format which lends itself to the widest possible distribution to consum-
4 ers. The superintendent shall either include the information from the
5 annual consumer guide in the consumer shopping guide required by
6 subsection (a) of section four thousand three hundred twenty-three of
7 this chapter or combine the two guides as long as consumers in the indi-
8 vidual market are provided with the information required by subsection
9 (a) of section four thousand three hundred twenty-three of this chapter.

10 § 4. This act shall take effect on the sixtieth day after it shall
11 have become a law, provided, however, effective immediately, the amend-
12 ment and/or repeal of any rule or regulation necessary for the implemen-
13 tation of this act on its effective date are authorized and directed to
14 be made and completed on or before such effective date.