

STATE OF NEW YORK

5764

2017-2018 Regular Sessions

IN SENATE

April 28, 2017

Introduced by Sen. DeFRANCISCO -- 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 physical therapy
services

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

1 Section 1. Paragraph 23 of subsection (i) of section 3216 of the
2 insurance law, as added by chapter 593 of the laws of 2000, is amended
3 to read as follows:

4 (23) If a policy provides for reimbursement for physical and occupa-
5 tional therapy service which is within the lawful scope of practice of a
6 duly licensed physical or occupational therapist, an insured shall be
7 entitled to reimbursement for such service whether the said service is
8 performed by a physician or through a duly licensed physical or occupa-
9 tional therapist, provided however, that nothing contained herein shall
10 be construed to impair any terms of such policy including appropriate
11 utilization review and the requirement that said service be performed
12 pursuant to a medical order, or a similar or related service of a physi-
13 cian provided that such terms shall not impose co-payments in excess of
14 twenty percent of the total reimbursement to the provider of care or
15 different deductibles, co-payments or co-insurance amounts on the basis
16 of the setting in which such physical therapy services are rendered or
17 whether the services are performed by a physical therapist or physician.

18 § 2. Subparagraph (A) of paragraph 1 of subsection (f) of section 4235
19 of the insurance law, as amended by chapter 219 of the laws of 2011, is
20 amended to read as follows:

21 (A) Any policy of group accident, group health or group accident and
22 health insurance may include provisions for the payment by the insurer
23 of benefits for expenses incurred on account of hospital, medical or
24 surgical care or physical and occupational therapy by licensed physical
25 and occupational therapists upon the prescription or referral of a

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

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1 physician for the employee or other member of the insured group, the
2 employee's or member's spouse, the employee's or member's child or chil-
3 dren, or other persons chiefly dependent upon the employee or member for
4 support and maintenance; provided that:

5 (i) a policy of hospital, medical, surgical, or prescription drug
6 expense insurance that provides coverage for children shall provide such
7 coverage to a married or unmarried child until attainment of age twen-
8 ty-six, without regard to financial dependence, residency with the
9 employee or member, student status, or employment, except a policy that
10 is a grandfathered health plan may, for plan years beginning before
11 January first, two thousand fourteen, exclude coverage of an adult child
12 under age twenty-six who is eligible to enroll in an employer-sponsored
13 health plan other than a group health plan of a parent. For purposes of
14 this item, "grandfathered health plan" means coverage provided by an
15 insurer in which an individual was enrolled on March twenty-third, two
16 thousand ten for as long as the coverage maintains grandfathered status
17 in accordance with section 1251(e) of the Affordable Care Act, 42 U.S.C.
18 § 18011(e); and

19 (ii) a policy under which coverage terminates at a specified age shall
20 not so terminate with respect to an unmarried child who is incapable of
21 self-sustaining employment by reason of mental illness, developmental
22 disability, mental retardation, as defined in the mental hygiene law, or
23 physical handicap and who became so incapable prior to attainment of the
24 age at which coverage would otherwise terminate and who is chiefly
25 dependent upon such employee or member for support and maintenance,
26 while the insurance of the employee or member remains in force and the
27 child remains in such condition, if the insured employee or member has
28 within thirty-one days of such child's attainment of the termination age
29 submitted proof of such child's incapacity as described herein. No
30 policy of group accident, group health or group accident and health
31 insurance shall impose co-payments in excess of twenty percent of the
32 total reimbursement to the provider of care or different deductibles,
33 co-payments or co-insurance amounts on the basis of the setting in which
34 such physical therapy services are rendered or whether the services are
35 performed by a physical therapist or physician.

36 § 3. Subparagraph (A) of paragraph 4 of subsection (f) of section 4235
37 of the insurance law, as amended by chapter 593 of the laws of 2000, is
38 amended to read as follows:

39 (A) any physical and occupational therapy service which is within the
40 lawful scope of practice of a licensed physical and occupational thera-
41 pist, a subscriber to such policy shall be entitled to reimbursement for
42 such service, whether the said service is performed by a physician or
43 licensed physical and occupational therapist pursuant to prescription or
44 referral by a physician; and a policy of group accident, group health or
45 group accident and health insurance shall not impose co-payments in
46 excess of twenty percent of the total reimbursement to the provider of
47 care or different deductibles, co-payments or co-insurance amounts on
48 the basis of the setting in which such physical therapy services are
49 rendered or whether the services are performed by a physical therapist
50 or physician;

51 § 4. Subparagraph (G) of paragraph 1 of subsection (b) of section 4301
52 of the insurance law, as amended by chapter 593 of the laws of 2000, is
53 amended to read as follows:

54 (G) physical and occupational therapy care provided through licensed
55 physical and occupational therapists upon the prescription of a physi-
56 cian and any co-payments related to reimbursement for physical therapy

1 services shall not exceed twenty percent of the total reimbursement to
2 the provider of care or different deductibles, co-payments or co-insu-
3 rance amounts on the basis of the setting in which such physical therapy
4 services are rendered or whether the services are performed by a phys-
5 ical therapist or physician,

6 § 5. Paragraph 13 of subsection (b) of section 4322 of the insurance
7 law, as added by chapter 504 of the laws of 1995, is amended to read as
8 follows:

9 (13) Outpatient physical therapy up to ninety visits per condition per
10 calendar year and any co-payments related to reimbursement for such
11 services shall not exceed twenty percent of the total reimbursement to
12 the provider of care or different deductibles, co-payments or co-insu-
13 rance amounts on the basis of the setting in which such physical therapy
14 services are rendered or whether the services are performed by a phys-
15 ical therapist or physician.

16 § 6. This act shall take effect on the one hundred eightieth day after
17 it shall have become a law.