

# STATE OF NEW YORK

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6045

2017-2018 Regular Sessions

## IN SENATE

May 10, 2017

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Introduced by Sen. MARCHIONE -- 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 coverage for eating disorders

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

1 Section 1. Subparagraph (B) of paragraph 5 of subsection (1) of  
2 section 3221 of the insurance law, as amended by chapter 502 of the laws  
3 of 2007, is amended to read as follows:

4 (B) (i) Every insurer delivering a group or school blanket policy or  
5 issuing a group or school blanket policy for delivery, in this state,  
6 which provides coverage for inpatient hospital care or coverage for  
7 physician services, shall provide comparable coverage for adults and  
8 children with biologically based mental illness or an eating disorder.  
9 Such group policies issued or delivered in this state shall also provide  
10 such comparable coverage for children with serious emotional disturb-  
11 ances. Such coverage shall be provided under the terms and conditions  
12 otherwise applicable under the policy, including network limitations or  
13 variations, exclusions, co-pays, coinsurance, deductibles or other  
14 specific cost sharing mechanisms. Provided further, where a policy  
15 provides both in-network and out-of-network benefits, the out-of-network  
16 benefits may have different coinsurance, co-pays, or deductibles, than  
17 the in-network benefits, regardless of whether the policy is written  
18 under one license or two licenses.

19 (ii) For purposes of this paragraph, the term "biologically based  
20 mental illness" means a mental, nervous, or emotional condition that is  
21 caused by a biological disorder of the brain and results in a clinically  
22 significant, psychological syndrome or pattern that substantially limits  
23 the functioning of the person with the illness. Such biologically based  
24 mental illnesses are defined as schizophrenia/psychotic disorders, major

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

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depression, bipolar disorder, delusional disorders, panic disorder[7] or obsessive compulsive disorders[7, bulimia, and anorexia].

(iii) For purposes of this paragraph, the term "eating disorder" means pica, rumination disorder, avoidant/restrictive food intake disorder, anorexia nervosa, bulimia nervosa, binge eating disorder, other specified feeding or eating disorder, and any other eating disorder contained in the most recent version of the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association where diagnosed by a licensed physician, psychiatrist, psychologist, clinical social worker, licensed marital and family therapist, or professional counselor duly licensed in the state where he or she practices and acting within their applicable scope of practice in the state where he or she practices.

§ 2. Paragraph 2 of subsection (g) of section 4303 of the insurance law, as amended by chapter 502 of the laws of 2007, is amended to read as follows:

(2) (A) A hospital service corporation or a health service corporation, which provides group, group remittance or school blanket coverage for inpatient hospital care, shall provide comparable coverage for adults and children with biologically based mental illness or an eating disorder. Such hospital service corporation or health service corporation shall also provide such comparable coverage for children with serious emotional disturbances. Such coverage shall be provided under the terms and conditions otherwise applicable under the contract, including network limitations or variations, exclusions, co-pays, coinsurance, deductibles or other specific cost sharing mechanisms. Provided further, where a contract provides both in-network and out-of-network benefits, the out-of-network benefits may have different coinsurance, co-pays, or deductibles, than the in-network benefits, regardless of whether the contract is written under one license or two licenses.

(B) For purposes of this subsection, the term "biologically based mental illness" means a mental, nervous, or emotional condition that is caused by a biological disorder of the brain and results in a clinically significant, psychological syndrome or pattern that substantially limits the functioning of the person with the illness. Such biologically based mental illnesses are defined as schizophrenia/psychotic disorders, major depression, bipolar disorder, delusional disorders, panic disorder[7] or obsessive compulsive disorders[7, anorexia, and bulimia].

(C) For purposes of this subsection, the term "eating disorder" means pica, rumination disorder, avoidant/restrictive food intake disorder, anorexia nervosa, bulimia nervosa, binge eating disorder, other specified feeding or eating disorder, and any other eating disorder contained in the most recent version of the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association where diagnosed by a licensed physician, psychiatrist, psychologist, clinical social worker, licensed marital and family therapist, or professional counselor duly licensed in the state where he or she practices and acting within their applicable scope of practice in the state where he or she practices.

§ 3. Paragraph 2 of subsection (h) of section 4303 of the insurance law, as amended by chapter 502 of the laws of 2007, is amended to read as follows:

(2) (A) A medical expense indemnity corporation or a health service corporation, which provides group, group remittance or school blanket coverage for physician services, shall provide comparable coverage for adults and children with biologically based mental illness or an eating

1 disorder. Such medical expense indemnity corporation or health service  
2 corporation shall also provide such comparable coverage for children  
3 with serious emotional disturbances. Such coverage shall be provided  
4 under the terms and conditions otherwise applicable under the contract,  
5 including network limitations or variations, exclusions, co-pays, coin-  
6 surance, deductibles or other specific cost sharing mechanisms. Provided  
7 further, where a contract provides both in-network and out-of-network  
8 benefits, the out-of-network benefits may have different coinsurance,  
9 co-pays, or deductibles, than the in-network benefits, regardless of  
10 whether the contract is written under one license or two licenses.

11 (B) For purposes of this subsection, the term "biologically based  
12 mental illness" means a mental, nervous, or emotional condition that is  
13 caused by a biological disorder of the brain and results in a clinically  
14 significant, psychological syndrome or pattern that substantially limits  
15 the functioning of the person with the illness. Such biologically based  
16 mental illnesses are defined as schizophrenia/psychotic disorders, major  
17 depression, bipolar disorder, delusional disorders, panic disorder[7] or  
18 obsessive compulsive disorder[~~7, anorexia, and bulimia~~].

19 (C) For purposes of this subsection, the term "eating disorder" means  
20 pica, rumination disorder, avoidant/restrictive food intake disorder,  
21 anorexia nervosa, bulimia nervosa, binge eating disorder, other speci-  
22 fied feeding or eating disorder, and any other eating disorder contained  
23 in the most recent version of the Diagnostic and Statistical Manual of  
24 Mental Disorders published by the American Psychiatric Association where  
25 diagnosed by a licensed physician, psychiatrist, psychologist, clinical  
26 social worker, licensed marital and family therapist, or professional  
27 counselor duly licensed in the state where he or she practices and  
28 acting within their applicable scope of practice in the state where he  
29 or she practices.

30 § 4. This act shall take effect on the ninetieth day after it shall  
31 have become a law; provided, however, that the provisions of this act  
32 shall apply to policies and contracts issued, renewed, modified, altered  
33 or amended on or after such effective date.