

STATE OF NEW YORK

2679

2019-2020 Regular Sessions

IN ASSEMBLY

January 24, 2019

Introduced by M. of A. BARNWELL -- read once and referred to the Committee on Labor

AN ACT to amend the workers' compensation law, in relation to ensuring timely access to high-quality medical care

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

1 Section 1. Subdivision 5 of section 13-a of the workers' compensation
2 law, as amended by chapter 6 of the laws of 2007 and as further amended
3 by section 104 of part A of chapter 62 of the laws of 2011, is amended
4 to read as follows:

5 (5) No claim for specialist consultations, surgical operations,
6 physiotherapeutic or occupational therapy procedures, x-ray examinations
7 or special diagnostic laboratory tests costing more than [~~one~~] two thou-
8 sand dollars shall be valid and enforceable, as against such employer,
9 unless such special services shall have been authorized by the employer
10 or by the board, or unless such authorization has been unreasonably
11 withheld, or withheld for a period of more than [~~thirty~~] seven calendar
12 days from receipt of a request for authorization, or unless such special
13 services are required in an emergency, provided, however, that the basis
14 for a denial of such authorization by the employer must be based on a
15 conflicting second opinion rendered by a physician authorized by the
16 board. The board, with the approval of the superintendent of financial
17 services, shall issue and maintain a list of pre-authorized procedures
18 under this section. Such list of pre-authorized procedures shall be
19 issued and maintained for the purpose of expediting authorization of
20 treatment of injured workers. Such list of pre-authorized procedures
21 shall not be construed or relied upon to support the premise that proce-
22 dures not included on the pre-authorized list should be denied. Pre-au-
23 thorized procedures shall not be given preference over alternative forms
24 of treatment that are not on the pre-authorized procedures list. Such

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

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1 list must include concurrent enrollment in an addiction and/or dependen-
2 cy treatment program for all injured workers subject to opioid weaning.

3 § 2. Paragraph (c) of subdivision 7 of section 13-a of the workers'
4 compensation law, as added by chapter 6 of the laws of 2007, is amended
5 to read as follows:

6 (c) At the time a request for authorization for special diagnostic
7 tests, x-ray examinations, magnetic resonance imaging or other radiolog-
8 ical examinations or tests costing more than [~~one~~] two thousand dollars
9 as required by subdivision five of this section is approved, the insur-
10 ance carrier, self-insurer or state insurance fund, or if so delegated
11 the network with which the insurance carrier, self-insurer or state
12 insurance fund has contracted, shall notify the physician requesting
13 authorization of the requirement that the claimant obtain or undergo the
14 special diagnostic test, x-ray examination, magnetic resonance imaging
15 or other radiological examination or test with a provider or at a facil-
16 ity affiliated with the network or networks with which it has
17 contracted, the contact information for the network and a list of the
18 providers and facilities within the claimant's geographic location, as
19 defined by regulation of the board. The claimant, in consultation with
20 the provider who requested the special diagnostic test, x-ray examina-
21 tion, magnetic resonance imaging or other radiological test or exam,
22 will determine the provider or facility from within the network which
23 will perform such diagnostic test, x-ray examination, magnetic resonance
24 imaging or other radiological examination or test.

25 § 3. This act shall take effect immediately.