STATE OF NEW YORK

405

2019-2020 Regular Sessions

IN ASSEMBLY

(Prefiled)

January 9, 2019

Introduced by M. of A. CAHILL, BARRETT, BLANKENBUSH, DiPIETRO, FAHY, HUNTER, MALLIOTAKIS, B. MILLER, RIVERA, SANTABARBARA, STECK, WEPRIN -- Multi-Sponsored by -- M. of A. ABBATE, ABINANTI, ARROYO, BENEDETTO, BRAUNSTEIN, COLTON, CRESPO, CROUCH, CUSICK, CYMBROWITZ, DINOWITZ, ENGLEBRIGHT, GALEF, GARBARINO, GIGLIO, GOTTFRIED, GUNTHER, HAWLEY, HEVESI, JAFFEE, LENTOL, LIFTON, LUPARDO, MAGNARELLI, McDONOUGH, MOSLEY, OTIS, PALMESANO, PAULIN, PEOPLES-STOKES, PERRY, PRETLOW, QUART, RAIA, RAMOS, L. ROSENTHAL, SIMON, STEC, STIRPE, THIELE, WOERNER, ZEBROWSKI -- read once and referred 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 Assembly, do enact as follows:

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

(23) If a policy provides for reimbursement for physical and occupational therapy service which is within the lawful scope of practice of a 5 duly licensed physical or occupational therapist, an insured shall be entitled to reimbursement for such service whether the said service is performed by a physician or through a duly licensed physical or occupational therapist, provided however, that nothing contained herein shall 9 be construed to impair any terms of such policy including appropriate 10 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. An insurer shall not impose a copayment or coinsurance amount 14 charged to the insured for services rendered for each date of service by 15 <u>a physical therapist licensed under article one hundred thirty-six of</u> 16 the education law or an occupational therapist licensed under article 17 one hundred fifty-six of the education law that is greater than the

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

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copayment or coinsurance amount imposed on the insured for services provided to the insured for an office visit for the service of a licensed primary care physician or osteopath for the same or a similar diagnosed condition even if a different nomenclature is used to describe the condition for which the services are provided.

- § 2. Subparagraph (A) of paragraph 1 of subsection (f) of section 4235 of the insurance law is amended by adding a new clause (iii) to read as follows:
- (iii) a policy shall not impose a copayment or coinsurance amount charged to the insured for services rendered for each date of service by a physical therapist licensed under article one hundred thirty-six of the education law or an occupational therapist licensed under article 12 one hundred fifty-six of the education law that is greater than the 14 copayment or coinsurance amount imposed on the insured for services provided to the insured for an office visit for the service of a licensed primary care physician or osteopath for the same or a similar diagnosed condition even if a different nomenclature is used to describe the condition for which the services are provided.
 - § 3. Subparagraph (A) of paragraph 4 of subsection (f) of section 4235 of the insurance law, as amended by chapter 593 of the laws of 2000, is amended to read as follows:
 - (A) any physical and occupational therapy service which is within the lawful scope of practice of a licensed physical and occupational therapist, a subscriber to such policy shall be entitled to reimbursement for such service, whether the said service is performed by a physician or licensed physical and occupational therapist pursuant to prescription or referral by a physician. A policy shall not impose a copayment or coinsurance amount charged to the insured for services rendered for each date of service by a physical therapist licensed under article one hundred thirty-six of the education law or an occupational therapist licensed under article one hundred fifty-six of the education law that is greater than the copayment or coinsurance amount imposed on the insured for services provided to the insured for an office visit for the service of a licensed primary care physician or osteopath for the same or a similar diagnosed condition even if a different nomenclature is used to describe the condition for which the services are provided;
 - § 4. Subparagraph (G) of paragraph 1 of subsection (b) of section 4301 of the insurance law, as amended by chapter 593 of the laws of 2000, is amended to read as follows:
 - (G) physical and occupational therapy care provided through licensed physical and occupational therapists upon the prescription of a physician, provided, however, that no copayment or coinsurance amount charged to the insured for services rendered for each date of service by a physical therapist licensed under article one hundred thirty-six of the education law or an occupational therapist licensed under article one hundred fifty-six of the education law is greater than the copayment or coinsurance amount imposed on the insured for services provided to the insured for an office visit for the service of a licensed primary care physician or osteopath for the same or a similar diagnosed condition even if a different nomenclature is used to describe the condition for which the services are provided,
 - § 5. Paragraph 13 of subsection (b) of section 4322 of the insurance law, as added by chapter 504 of the laws of 1995, is amended to read as follows:
- (13) Outpatient physical therapy up to ninety visits per condition per 56 calendar year, provided, however, that no copayment or coinsurance

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amount charged to the insured for services rendered for each date of service by a physical therapist licensed under article one hundred thirty-six of the education law or an occupational therapist licensed under article one hundred fifty-six of the education law is greater than the copayment or coinsurance amount imposed on the insured for services provided to the insured for an office visit for the service of a licensed primary care physician or osteopath for the same or a similar diagnosed condition even if a different nomenclature is used to describe the condition for which the services are provided.

10 § 6. This act shall take effect on the one hundred eightieth day after 11 it shall have become a law.