STATE OF NEW YORK

1345

2019-2020 Regular Sessions

IN SENATE

January 14, 2019

- Introduced by Sens. SERINO, AKSHAR, HELMING, JACOBS, KENNEDY, O'MARA, RITCHIE -- 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 meetings and reports of the New York state health care quality and cost containment commission

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

Section 1. Section 213 of the insurance law, as added by section 1 of 1 2 part L of chapter 57 of the laws of 2007, is amended to read as follows: 3 § 213. New York state health care quality and cost containment commission. (a) There is hereby established within the department a commis-4 5 sion, to be known as the "New York state health care quality and cost б containment commission". The commission shall consist of thirteen 7 members appointed by the governor, one of whom shall be the superinten-8 dent, one of whom shall be the commissioner of health, and six of whom shall be appointed on the recommendation of the legislative leaders, two 9 10 on the recommendation of the temporary president of the senate, two on 11 the recommendation of the speaker of the assembly, one on the recommen-12 dation of the minority leader of the senate, and one on the recommenda-13 tion of the minority leader of the assembly. All members shall serve at the pleasure of the governor, and vacancies shall be appointed in the 14 same manner as original appointments. Members of the commission shall 15 serve without compensation, but shall be reimbursed for reasonable trav-16 el expenses. In making appointments to the commission, the governor 17 18 shall ensure that the interests of health care consumers, small busi-19 nesses, the medical community and health plans are represented on the 20 commission. <u>The commission shall be required to meet on the first</u>
21 <u>Monday after the first of January of each calendar year to consider</u> 22 outstanding requests or duties. Any vacancies shall be deemed waived by 23 the appointing authority for the purposes of the first meeting. Nothing

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

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in this section shall forfeit the right for an appointment authority to 1 2 fill vacancies within their statutorily allowed members. (b)(1) The purpose of the commission shall be to analyze the impact on 3 4 health insurance costs and quality of proposed legislation which would 5 mandate that health benefits be offered or made available in individual б and group health insurance policies, contracts and comprehensive health 7 service plans, including legislation that affects the delivery of health 8 benefits or services or the reimbursement of health care providers. 9 (2) [The] Notwithstanding any other provision of law, the governor, 10 chair of the senate insurance committee and the chair of the assemthe 11 bly insurance committee may request in writing that the commission evaluate a proposed mandated benefit. Upon receiving such a request, the 12 13 commission may, by a majority vote of its members, undertake an evalu-14 ation of such proposed mandated benefit. 15 (3) In evaluating a proposed mandated benefit, the commission shall: (A) investigate the current practices of health plans with regard to 16 17 the proposed mandated benefit, and, to the extent possible, self-funded 18 health benefit plans; 19 (B) investigate the potential premium impact of the proposed mandated 20 benefits on all segments of the insurance market, as well as the poten-21 tial for avoided costs through early detection and treatment of conditions, or more cost-effective delivery of medical services; and 22 (C) analyze the most current medical literature regarding the proposed 23 24 mandated benefit to determine its impact on health care quality. 25 (4) In evaluating a proposed mandated benefit, the commission may hold 26 one or more public hearings, and shall strive to obtain independent and 27 verifiable information from diverse sources within the healthcare indus-28 try, medical community and among health care consumers with regard to 29 the proposed mandated benefit. 30 (c) To assist the commission in its duties, and upon the direction of 31 the commission, the superintendent is authorized to enter into one or 32 more contracts with independent entities and organizations with demon-33 strable expertise in health care quality, finance, utilization and actuarial services. For the purposes of this section, the superintendent 34 35 shall not enter into contracts with health plans, entities or organiza-36 tions owned or controlled by health plans, or with significant business 37 relationships with health plans. 38 (d) Upon completion of its evaluation of a proposed mandated benefit 39 pursuant to this section, the commission shall deliver a written report of its findings to the chair of the assembly insurance committee and the 40 41 chair of the senate insurance committee. 42 (e) The commission shall issue a report to the governor, the majority 43 leader of the senate, the speaker of the assembly, the chairs of the senate and assembly insurance committees, and the chair of the senate 44 45 task force on Lyme and tick-borne diseases, considering the impact on 46 health insurance costs and quality of legislation requiring coverage of long-term and chronic Lyme disease and other tick-borne diseases. The 47 commission shall be required to consider issues including, but not 48 limited to, the specific medical impacts to particular geographic areas 49 in the state including the Hudson Valley and Long Island, best practices 50 51 developed for coverage for long-term and chronic Lyme disease in other states, and the associated costs of mandated coverage in addition to 52 53 projected costs of untreated symptoms. The commission shall deliver a 54 written report of its findings by May first, two thousand twenty. § 2. This act shall take effect immediately. 55