STATE OF NEW YORK

6694

2019-2020 Regular Sessions

IN SENATE

September 6, 2019

Introduced by Sen. CARLUCCI -- read twice and ordered printed, and when printed to be committed to the Committee on Rules

AN ACT to amend the mental hygiene law, in relation to establishing a workgroup to conduct analysis on the ambulatory patient group rates and commercial insurance rates for behavioral health services

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

Section 1. Section 7.07 of the mental hygiene law is amended by adding a new subdivision (h) to read as follows:

(h) 1. The commissioner of the office of mental health, in collaboration with the commissioner of the department of health and the commissioner of the office of alcoholism and substance abuse services are directed to convene and jointly chair, either directly or through a designee or designees, a workgroup, which shall include membership that ensures adequate statewide geographic representation selected with equal contributions on such selection from the governor, the speaker of the assembly and temporary president of the senate and be comprised of the following members: (i) professional associations representing substance use, mental health, and/or behavioral health providers; (ii) representatives from professional associations representing providers of peer and recovery-based programs and services; (iii) representatives from professional associations representing medicated assisted treatment providers; (iv) representatives from professional associations representing children's behavioral health providers; (v) representatives from hospital associations; (vi) representatives from associations representing behavioral health consumers and family members; and (vii) any additional stakeholder or expert that the commissioners deem necessary. Members of the workgroup shall serve without compensation, but may be reimbursed for actual costs incurred for participation on such workgroup. 2. The workgroup shall conduct an analysis on the ambulatory patient group rates and commercial insurance rates for behavioral health

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

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services for the purpose of developing a report that shall provide recommendations on the following: (i) rate adequacy related to the existing ambulatory patient group-based reimbursement provided under medicaid managed care, as well as for commercial insurance rates with regards to services rendered under child health plus, or for services provided by clinics licensed or certified pursuant to article thirty-one or thirty-two of this chapter or dually licensed or certified under article thirty-one or thirty-two of this chapter and article twenty-eight of the public health law; (ii) the actual costs of care associated with the delivery of behavioral health services; (iii) one or more alternative reimbursement models that would adequately compensate clinics licensed or holding an operating certificate under article thirty-one or thirty-two of this chapter or dually licensed under article thirty-one or thirty-two of this chapter and article twenty-eight of the public health law for their costs of care under medicaid managed care and child health plus; and (iv) any policy or fiscal resources necessary to carry out the recommendations of the report developed pursuant to this section. The report shall be submitted to the governor, the speaker of the assembly and the temporary president of the senate no later than October first, two thousand twenty-one.

§ 2. This act shall take effect on the ninetieth day after it shall have become a law.