STATE OF NEW YORK

6695

2019-2020 Regular Sessions

IN SENATE

September 6, 2019

Introduced by Sens. RIVERA, BAILEY -- read twice and ordered printed, and when printed to be committed to the Committee on Rules

AN ACT to amend the elder law, in relation to program eligibility for plans comparable to Medicare part D

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

Section 1. Paragraphs (f) and (h) of subdivision 3 and subdivision 4 of section 242 of the elder law, paragraph (f) of subdivision 3 as amended by section 1 of part T of chapter 56 of the laws of 2012, paragraph (h) of subdivision 3 as amended by section 3-f of part A of chapter 59 of the laws of 2011, and subdivision 4 as added by section 12-a of part T of chapter 56 of the laws of 2012, are amended to read as follows:

(f) As a condition of eligibility for benefits under this title, a program participant is required to be enrolled in Medicare part D**, or any other public or private drug plan which has successfully demonstrated to CMS that the coverage is as generous as, or more generous than the defined standard coverage under the Medicare part D prescription drug benefit,** and to maintain such enrollment. For unmarried participants with individual annual income less than or equal to twenty-three thousand dollars and married participants with joint annual income less than or equal to twenty-nine thousand dollars, the elderly pharmaceutical insurance coverage program shall pay for the portion of the part D **or comparable plan** monthly premium that is the responsibility of the participant. Such payment shall be limited to the low-income benchmark premium amount established by the federal centers for medicare and medicaid services and any other amount which such agency establishes under its de minimus premium policy.

(h) The elderly pharmaceutical insurance coverage program is authorized to represent program participants under this title with respect to their Medicare part D **or comparable** coverage.

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

LBD13721-01-9

4. As a condition of eligibility for benefits under this title, participants must be enrolled in [~~medicare~~] **Medicare** part D**, or any other public or private drug plan which has successfully demonstrated to CMS that the coverage is as generous as, or more generous than the defined standard coverage under the Medicare part D prescription drug benefit,** and maintain such enrollment. For persons who meet the eligibility requirements to participate in the elderly pharmaceutical insurance coverage program, the program will pay for a drug covered by the person's [~~medicare~~] **Medicare** part D plan **or comparable plan** or a drug in a [~~medicare~~] **Medicare** part D excluded drug class, as defined in subdivision eight of section two hundred forty-one of this title, provided that such drug is a covered drug, as defined in subdivision one of section two hundred forty-one of this title, and that the participant complies with the point of sale co-payment requirements set forth in sections two hundred forty-seven and two hundred forty-eight of this title. No payment shall be made for [~~medicare~~] **Medicare** part D **or comparable** plan deductibles.

§ 2. This act shall take effect immediately.