

STATE OF NEW YORK

3506

2021-2022 Regular Sessions

IN SENATE

January 29, 2021

Introduced by Sens. BAILEY, BIAGGI, GAUGHRAN, JACKSON, KRUEGER, MYRIE, PERSAUD -- read twice and ordered printed, and when printed to be committed to the Committee on Insurance

AN ACT to amend the insurance law and the public health law, in relation to enacting the "health insurance preauthorization disclosure act"

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

1 Section 1. Short title. This act shall be known and may be cited as
2 the "health insurance preauthorization disclosure act".

3 § 2. The insurance law is amended by adding a new section 4242 to read
4 as follows:

5 § 4242. Health insurance companies; preauthorization for health care
6 services. Every health care insurance company shall be required to
7 provide participating physicians and health care providers, as defined
8 in subdivision seven of section twenty-nine hundred eighty of the public
9 health law, with an updated list of health care treatments and services
10 that require preauthorization or precertification from such health care
11 insurance company. Such list shall be developed based upon consultation
12 with medical guidelines developed by the relevant medical specialty
13 organization and in consultation with appropriately trained physicians
14 practicing within the region the health care insurance company serves.
15 Such list shall be updated annually or more frequently as appropriate.
16 Only those health care services which are contained on such list shall
17 be subject to pre-authorization or precertification by the health care
18 insurance company. No health care treatment or service shall be added to
19 the list of services requiring pre-authorization or precertification
20 unless the health care insurance company provides a minimum of ninety
21 days notice to participating physicians and health care providers.

22 § 3. The public health law is amended by adding a new section 4905-a
23 to read as follows:

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

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1 § 4905-a. Pre-authorized services. Every health care plan shall be
2 required to develop and provide to participating health care providers a
3 list of health care services that require pre-authorization or precer-
4 tification from such health care plan. Such list shall be developed
5 based upon consultation with medical guidelines developed by the rele-
6 vant medical specialty organization and in consultation with appropri-
7 ately trained physicians practicing within the region the health care
8 plan serves. Such list shall be updated annually or more frequently as
9 appropriate. Only those health care services which are contained on such
10 list shall be subject to pre-authorization or precertification by the
11 health care plan. No health care service shall be added to the list of
12 services requiring pre-authorization or precertification unless the
13 health care plan provides a minimum of ninety days notice to participat-
14 ing health care providers.

15 § 4. The insurance law is amended by adding a new section 4905-a to
16 read as follows:

17 § 4905-a. Pre-authorized services. Every health care plan shall be
18 required to develop and provide to participating health care providers a
19 list of health care services that require pre-authorization or precer-
20 tification from such health care plan. Such list shall be developed
21 based upon consultation with medical guidelines developed by the rele-
22 vant medical specialty organization and in consultation with appropri-
23 ately trained physicians practicing within the region the health care
24 plan serves. Such list shall be updated annually or more frequently as
25 appropriate. Only those health care services which are contained on such
26 list shall be subject to pre-authorization or precertification by the
27 health care plan. No health care service shall be added to the list of
28 services requiring pre-authorization or precertification unless the
29 health care plan provides a minimum of ninety days notice to participat-
30 ing health care providers.

31 § 5. This act shall take effect on the sixtieth day after it shall
32 have become a law; provided, however that the superintendent of finan-
33 cial services is hereby authorized to promulgate all rules and regu-
34 lations and take any other measures necessary to implement this act on
35 its effective date.