STATE OF NEW YORK

10332

IN ASSEMBLY

May 13, 2022

Introduced by COMMITTEE ON RULES -- (at request of M. of A. Septimo) -- read once and referred to the Committee on Insurance

AN ACT to amend the insurance law, in relation to the coordination of no-fault benefits for persons injured in motor vehicle accidents

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

Section 1. The insurance law is amended by adding a new section 5110 to read as follows:

§ 5110. Payment for services provided for motor vehicle injuries. 1. Any provider of treatment to any covered person, who renders care or supplies a product within seventy-two hours of the motor vehicle accident, in the absence of fraud or deception by the claimant, is conclusively presumed to have accepted, and to have consented to, an assignment of no-fault benefits under this article in the form prescribed by the superintendent. The provisions of this subdivision shall apply if the provider knows, or is on notice of facts that indicate that the injuries or conditions treated are the result of a motor vehicle accident which occurred in the preceding seventy-two hours.

2. Any provider of treatment to a covered person who mistakenly or otherwise bills an insurer other than the no-fault insurer for claims eligible for first-party benefits under this article must, upon presentation with proof of applicable coverage under article six, eight or forty-four-B of the vehicle and traffic law, return such fees and seek payment for services from the no-fault insurer instead. A provider shall be permitted to maintain insurance information in the event it is established that there are no first-party benefits available for emergency treatment under this article.

3. The time limit for presentation of invoices to an insurer shall be measured from the first date on which the provider or the patient first presented the invoice to any insurer.

4. Any compensation provider that, notwithstanding the other provisions of this law, pays for the emergency treatment of a covered person, has a right of direct action against the insurer liable for coverage under this article for reimbursement, but in no case will the

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

LBD10765-02-1

reimbursement exceed the amount of lawful benefits according to state-promulgated fee schedules.

5. No insurer providing coverage under this article shall exclude reimbursement for first-party benefits which have been paid to a health care provider or medical equipment supplier by a compensation provider not under this article.

§ 2. This act shall take effect immediately.