## STATE OF NEW YORK

9908

## IN ASSEMBLY

April 19, 2022

Introduced by M. of A. McDONALD, WOERNER -- read once and referred to the Committee on Insurance

AN ACT to amend the public health law, in relation to exemptions from preauthorization requirements in certain circumstances

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

Section 1. Section 4902 of the public health law is amended by adding a new subdivision 5 to read as follows:

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- 5. (a) A health care plan that uses a preauthorization process for 4 health care services shall not require a health care professional to obtain preauthorization for a particular health care service if, in the most recent six-month evaluation period, such health care plan has approved not less than ninety percent of the preauthorization requests submitted by such healthcare professional for the particular health care service.
- 10 (b) A health care plan shall evaluate whether a health care profes-11 sional qualifies for an exemption from preauthorization requirements under paragraph (a) of this subdivision once every six months. 12
- 13 (c) A health care plan may continue an exemption under paragraph (a) of this subdivision without evaluating whether the health care profes-14 15 sional qualifies for the exemption for a particular evaluation period.
- 16 (d) A health care professional shall not be required to request an 17 exemption to qualify for such exemption.
- (e) A health care professional's exemption from preauthorization requirements under paragraph (a) of this subdivision shall remain in 19 effect until:
- (i) the thirtieth day after the health care plan notifies such health 22 care professional of such health care plan's determination to rescind 23 such exemption if such health care professional does not appeal such health care plan's determination; or 24
- (ii) if such health care professional appeals such determination, the 25 26 fifth day after the independent review organization affirms such health 27 care plan's determination to rescind such exemption. If a health care 28 plan does not finalize a rescission determination, then the health care

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

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1 professional shall be considered to have met the criteria to continue to 2 qualify for the exemption.

- (f) A health care plan may rescind an exemption from preauthorization requirements under paragraph (a) of this subdivision only:
  - (i) during January or June of each year;
- (ii) if such health care plan makes a determination, on the basis of a retrospective review of a random sample of not fewer than five and no more than twenty claims submitted by the health care professional during the most recent evaluation period, that less than ninety percent of such claims for the particular health care service met the medical necessity criteria that would have been used by such health care professional when conducting preauthorization review for such health care service during the relevant evaluation period; and
  - (iii) if such health care plan complies with other applicable requirements specified in this section, including:
  - (1) notifying the health care professional not less than twenty-five days before the proposed rescission is to take effect; and
  - (2) providing with such notice the sample information used to make the determination under subparagraph (ii) of this paragraph, and a plain language explanation of how the health care professional may appeal the determination.
  - (g) A health care plan may deny an exemption from preauthorization requirements under paragraph (a) of this subdivision only if:
  - (i) the health care professional does not have such exemption at the time of the relevant evaluation period; and
  - (ii) such health care plan provides the health care professional with actual statistics and data for the relevant preauthorization request evaluation period and detailed information sufficient to demonstrate that such health care professional does not meet the criteria for an exemption from preauthorization requirements for the particular health care service.
  - (h) After a final determination or review affirming the rescission or denial of an exemption for a specific health care service under paragraph (a) of this subdivision, a health care professional shall be eligible for consideration of an exemption for the same health care service after the six-month evaluation period that follows the evaluation period which formed the basis of the rescission or denial of an exemption.
- (i) Not later than five days after qualifying for an exemption from preauthorization requirements under paragraph (a) of this subdivision, a health care plan shall provide to the health care professional a notice that includes:
- 43 <u>(i) a statement that such health care professional qualifies for an</u>
  44 <u>exemption from preauthorization requirements under paragraph (a) of this</u>
  45 <u>subdivision;</u>
  - (ii) a list of the health care services to which such exemption applies; and
    - (iii) a statement of the duration of such exemption.
  - (j) If a health care professional submits a preauthorization request for a health care service under which such health care professional qualifies for an exemption from preauthorization requirements under paragraph (a) of this subdivision, such health care plan shall promptly provide a notice to such health care professional that such health care professional has qualified for an exemption for preauthorization for such health care service.
    - (k) Nothing in this subdivision shall be construed to:

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- 1 <u>(i) authorize a health care professional to provide a health care</u>
  2 <u>service outside the scope of such health care professional's applicable</u>
  3 <u>license; or</u>
- 4 <u>(ii) prohibit a health care plan from performing retrospective review</u>
  5 <u>of a health care service to section forty-nine hundred three of this</u>
  6 <u>title.</u>
- 7 § 2. This act shall take effect on the one hundred eightieth day after 8 it shall have become a law.