

STATE OF NEW YORK

7023--A

Cal. No. 118

2021-2022 Regular Sessions

IN SENATE

May 24, 2021

Introduced by Sens. MANNION, KENNEDY, REICHLIN-MELNICK, SKOUFIS -- read twice and ordered printed, and when printed to be committed to the Committee on Health -- recommitted to the Committee on Health in accordance with Senate Rule 6, sec. 8 -- reported favorably from said committee, ordered to first and second report, ordered to a third reading, passed by Senate and delivered to the Assembly, recalled, vote reconsidered, restored to third reading, amended and ordered reprinted, retaining its place in the order of third reading

AN ACT directing the commissioner of health to conduct a study on the rates of reimbursement made through the New York state Medicaid durable medical equipment, orthotics, prosthetics and supplies program for rate adequacy and patient access; and providing for the repeal of such provisions upon expiration thereof

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

1 Section 1. The commissioner of health shall conduct a study to review
2 the rates of reimbursement made through the New York state Medicaid
3 durable medical equipment, orthotics, prosthetics and supplies program
4 for rate adequacy and patient access, including those made under all
5 capitated and contract coverage models. Such review shall include:
6 (a) an analysis of rules, regulations and policies for orthotics and
7 prosthetics service/device provisions under the New York Medicaid
8 program, including all contracted and capitated models;
9 (b) a comprehensive assessment of the existing methodology used to
10 determine payment or nonpayment for prosthetic and orthotic care includ-
11 ing but not limited to:
12 (i) all orthotic and prosthetic codes on the current Medicaid fee
13 schedule, including but not limited to a comparison of prevailing Medi-
14 care fee schedule amounts and New York Medicaid amounts;

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

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1 (ii) codes on the Medicare fee schedule but not included on the New
2 York state Medicaid durable medical equipment, orthotics, prosthetics
3 and supplies program fee schedule;

4 (iii) recommendations for changing reimbursement methodologies.
5 Recommendations under this subparagraph shall be consistent with federal
6 law and shall include recommendations for appropriate changes in state
7 law and regulations. Such recommendations shall consider appropriate
8 payment methodologies for codes not included on the Medicaid fee sched-
9 ule;

10 (c) assessment of barriers to timely service provision as well as
11 racial and socioeconomic disparities in access including, but not limit-
12 ed to, travel time required, geographic variability, access to and cost
13 of technology;

14 (d) the workforce needed to provide orthotic and prosthetic services
15 in the next five years to eligible children and adults, disaggregated by
16 county;

17 (e) opportunities for stakeholder input on current rate methodologies;
18 and

19 (f) assessment of cost savings associated with percentage of Medicaid
20 population returning to work after orthotic and/or prosthetic provision.

21 § 2. Within one year after the effective date of this act, the commis-
22 sioner of health shall submit a report of the findings and recommenda-
23 tions pursuant to this act to the governor, the temporary president of
24 the senate, the minority leader of the senate, the speaker of the assem-
25 bly, the minority leader of the assembly, and the chairs and ranking
26 members of the senate and assembly committees on health and shall post
27 such report on the department of health's website.

28 § 3. The commissioner of health shall be authorized to promulgate
29 rules and regulations to provide for the orderly effectuation of the
30 provisions of this act.

31 § 4. This act shall take effect immediately and shall expire and be
32 deemed repealed upon the submission of the report required pursuant to
33 section two of this act.