STATE OF NEW YORK

9662

IN ASSEMBLY

March 27, 2024

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

AN ACT to amend the insurance law and the social services law, in relation to capping cost sharing for antiviral COVID-19 therapeutics

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

Section 1. Subsection (i) of section 3216 of the insurance law is amended by adding a new paragraph 39 to read as follows:

(39) (A) Every policy that provides coverage for hospital, surgical or medical care or prescription drugs shall provide coverage for antiviral therapeutics approved or granted emergency use authorization by the food and drug administration for the treatment of COVID-19 when prescribed or furnished by a licensed health care provider acting within their scope of practice and the standard of care.

(B) The coverage required pursuant to subparagraph (A) of this paragraph shall not be subject to annual deductibles or coinsurance, provided, however, that an insured who is eligible for and able to obtain free prescribed antiviral therapeutics under a manufacturer or government program may be required to use such program before using coverage required pursuant to this paragraph.

§ 2. Subsection (k) of section 3221 of the insurance law is amended by adding a new paragraph 23 to read as follows:

(23) (A) Every policy that provides coverage for hospital, surgical or medical care or prescription drugs shall provide coverage for antiviral therapeutics approved or granted emergency use authorization by the food and drug administration for the treatment of COVID-19 when prescribed or furnished by a licensed health care provider acting within their scope of practice and the standard of care.

(B) The coverage required pursuant to subparagraph (A) of this paragraph shall not be subject to annual deductibles or coinsurance, provided, however, that an insured who is eligible for and able to obtain free prescribed antiviral therapeutics under a manufacturer or government program may be required to use such program before using coverage required pursuant to this paragraph.

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

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§ 3. Section 4303 of the insurance law is amended by adding a new subsection (vv) to read as follows:

(vv) (1) Every contract issued by a medical expense indemnity corporation, a hospital service corporation or a health service corporation for delivery in this state that provides medical, hospital, surgical care, or major medical or similar comprehensive-type coverage and provides coverage for prescription drugs shall provide coverage for antiviral therapeutics approved or granted emergency use authorization by the food and drug administration for the treatment of COVID-19 when prescribed or furnished by a licensed health care provider acting within their scope of practice and the standard of care.

(2) Such coverage required pursuant to paragraph one of this subsection shall not be subject to annual deductibles or coinsurance, provided, however, that an insured who is eligible for and able to obtain free prescribed antiviral therapeutics under a manufacturer or government program may be required to use such program before using coverage required pursuant to this paragraph.

§ 4. Subdivision 2 of section 365-a of the social services law is amended by adding a new paragraph (nn) to read as follows:

(nn) (i) antiviral therapeutics approved or granted emergency use authorization by the food and drug administration for the treatment of COVID-19 when prescribed or furnished by a licensed health care provider acting within their scope of practice and the standard of care.

(ii) coverage required pursuant to this paragraph shall be provided at no cost to the insured, provided, however, that an insured who is eligible for and able to obtain free prescribed antiviral therapeutics under a manufacturer or government program may be required to use such program before using coverage required pursuant to this paragraph.

§ 5. This act shall take effect immediately and shall apply to any policy or contract issued, renewed, modified, altered, or amended on or after January 1, 2025.