STATE OF NEW YORK

8367--B

IN SENATE

January 23, 2024

Introduced by Sen. HOYLMAN-SIGAL -- read twice and ordered printed, and when printed to be committed to the Committee on Insurance -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee

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 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 by a licensed health care provider legally authorized to prescribe under title eight of the education law.

(B) Coverage under this paragraph shall not be subject to annual deductibles or coinsurance, provided, however, that an insured who is eligible for and able to obtain prescribed antiviral therapeutics at no cost or reduced cost 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 group or blanket policy delivered or issued for delivery in this state that 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 by a licensed health care provider legally authorized to prescribe under title eight of the education law.

(B) Coverage under this paragraph shall not be subject to annual deductibles or coinsurance, provided, however, that an insured who is eligible for and able to obtain prescribed antiviral therapeutics at no cost or reduced cost under a manufacturer or government program may be

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

LBD14144-04-4

required to use such program before using coverage required pursuant to this paragraph.

§ 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 that 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 by a licensed health care provider legally authorized to prescribe under title eight of the education law.

(2) Coverage under this subsection shall not be subject to annual deductibles or coinsurance, provided, however, that an insured who is eligible for and able to obtain prescribed antiviral therapeutics at no cost or reduced cost under a manufacturer or government program may be required to use such program before using coverage required pursuant to this subsection.

§ 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 by a licensed health care provider legally authorized to prescribe under title eight of the education law.

(ii) coverage under this paragraph shall be provided at no cost to the insured, provided, however, that an insured who is eligible for and able to obtain prescribed antiviral therapeutics at no cost or reduced cost 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 on the first day of January next succeeding the date on which it shall have become a law and shall apply to all policies and contracts issued, renewed, modified, altered, or amended on or after such date.