# STATE OF NEW YORK

960

2023-2024 Regular Sessions

# IN ASSEMBLY

January 11, 2023

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

AN ACT to amend the insurance law, in relation to mandating insurance coverage for medical devices to treat withdrawal symptoms

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

Section 1. Subparagraph (A) of paragraph 30 of subsection (i) of section 3216 of the insurance law, as amended by section 5 of subpart A of part BB of chapter 57 of the laws of 2019, is amended to read as follows:

(A) Every policy that provides hospital, major medical or similar comprehensive coverage shall provide inpatient coverage for the diagnosis and treatment of substance use disorder, including detoxification and rehabilitation services**, including the use of medications, medical devices and products approved and/or cleared by the food and drug administration for the treatment of withdrawal symptoms**. Such inpatient coverage shall include unlimited medically necessary treatment for substance use disorder treatment services provided in residential settings. Further, such inpatient coverage shall not apply financial requirements or treatment limitations, including utilization review requirements, to inpatient substance use disorder benefits that are more restrictive than the predominant financial requirements and treatment limitations applied to substantially all medical and surgical benefits covered by the policy.

§ 2. Paragraph 30 of subsection (i) of section 3216 of the insurance law, as amended by section 7 of subpart B of part J of chapter 57 of the laws of 2019, is renumbered paragraph 30-a.

§ 3. Paragraph 7-a of subsection (l) of section 3221 of the insurance law, as added by chapter 748 of the laws of 2019, is amended to read as follows:

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

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(7-a) (A) Every policy that provides medical, major medical or similar comprehensive-type large group coverage shall provide immediate coverage for all buprenorphine products, methadone or long acting injectable naltrexone**, including medical devices or products for the treatment of withdrawal symptoms,** without prior authorization for the detoxification or maintenance treatment of a substance use disorder.

(B) Coverage provided under this paragraph may be subject to copayments, coinsurance, and annual deductibles that are consistent with those imposed on other benefits within the policy.

§ 4. Subsection (l-1) of section 4303 of the insurance law, as added by chapter 748 of the laws of 2019, is amended to read as follows:

(l-1) (A) Every contract that provides medical, major medical, or similar comprehensive-type large group coverage shall provide immediate coverage for all buprenorphine products, methadone or long acting injectable naltrexone**, including any medical devices or products for the treatment of withdrawal symptoms,** without prior authorization for the detoxification or maintenance treatment of a substance use disorder.

(B) Coverage provided under this paragraph may be subject to copayments, coinsurance, and annual deductibles that are consistent with those imposed on other benefits within the policy.

§ 5. Subparagraph (A) of paragraph 31 of subsection (i) of section 3216 of the insurance law, as amended by section 6 of subpart A of part BB of chapter 57 of the laws of 2019, is amended to read as follows:

(A) Every policy that provides medical, major medical or similar comprehensive-type coverage shall provide outpatient coverage for the diagnosis and treatment of substance use disorder, including detoxification and rehabilitation services**, including the use of medications, medical devices and products approved and/or cleared by the food and drug administration for the treatment of withdrawal symptoms**. Such coverage shall not apply financial requirements or treatment limitations to outpatient substance use disorder benefits that are more restrictive than the predominant financial requirements and treatment limitations applied to substantially all medical and surgical benefits covered by the policy.

§ 6. This act shall take effect immediately and shall apply to policies and contracts issued, renewed, modified, altered or amended on and after such date.