

# STATE OF NEW YORK

6596--C

2025-2026 Regular Sessions

## IN ASSEMBLY

March 6, 2025

Introduced by M. of A. ROSENTHAL, CRUZ, GONZALEZ-ROJAS, SEAWRIGHT, LUNSFORD, DAVILA, SIMONE, REYES, ROMERO, P. CARROLL, MEEKS, KELLES, LEVENBERG, HEVESI, SHIMSKY, BORES, SIMON, LEE, MORENO -- read once and referred to the Committee on Health -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee -- recommitted to the Committee on Health in accordance with Assembly Rule 3, sec. 2 -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee -- again reported from said committee with amendments, ordered reprinted as amended and recommitted to said committee

AN ACT to amend the social services law and the public health law, in relation to requiring Medicaid to cover gender-affirming care regardless of federal funding; to amend the executive law, in relation to prohibiting discriminatory practices by health care entities; and to amend the insurance law, in relation to prohibiting discriminatory practices by insurers and to coverage for treatment for gender dysphoria or gender incongruence

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

- 1 Section 1. Subdivision 2 of section 365-a of the social services law  
2 is amended by adding a new paragraph (oo) to read as follows:  
3 (oo) all medically necessary gender-affirming care regardless of  
4 whether any federal funds are available for such coverage.  
5 § 2. Subdivision 7 of section 2510 of the public health law, as  
6 amended by section 1 of part DDD of chapter 56 of the laws of 2022, is  
7 amended to read as follows:  
8 7. "Covered health care services" means: the services of physicians,  
9 optometrists, nurses, nurse practitioners, midwives and other related  
10 professional personnel which are provided on an outpatient basis,  
11 including routine well-child visits; diagnosis and treatment of illness  
12 and injury; inpatient health care services; laboratory tests; diagnostic

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

LBD09201-11-6

1 x-rays; prescription and non-prescription drugs, ostomy and other  
2 medical supplies and durable medical equipment; radiation therapy;  
3 chemotherapy; hemodialysis; outpatient blood clotting factor products  
4 and other treatments and services furnished in connection with the care  
5 of hemophilia and other blood clotting protein deficiencies; emergency  
6 room services; ambulance services; hospice services; emergency, preven-  
7 tive and routine dental care, including orthodontia but excluding  
8 cosmetic surgery; emergency, preventive and routine vision care, includ-  
9 ing eyeglasses; speech and hearing services; inpatient and outpatient  
10 mental health, alcohol and substance abuse services, including children  
11 and family treatment and support services, children's home and community  
12 based services, assertive community treatment services and residential  
13 rehabilitation for youth services which shall be reimbursed in accord-  
14 ance with the ambulatory patient group (APG) rate-setting methodology as  
15 utilized by the department of health, the office of addiction services  
16 and supports, or the office of mental health for rate-setting purposes  
17 or any such other fees established pursuant to article forty-three of  
18 the mental hygiene law; all gender-affirming care regardless of whether  
19 any federal funds are available for such coverage; and health-related  
20 services provided by voluntary foster care agency health facilities  
21 licensed pursuant to article twenty-nine-I of this chapter; as defined  
22 by the commissioner. "Covered health care services" shall not include  
23 drugs, procedures and supplies for the treatment of erectile dysfunction  
24 when provided to, or prescribed for use by, a person who is required to  
25 register as a sex offender pursuant to article six-C of the correction  
26 law, provided that any denial of coverage of such drugs, procedures or  
27 supplies shall provide the patient with the means of obtaining addi-  
28 tional information concerning both the denial and the means of challeng-  
29 ing such denial.

30 § 3. Subdivision 9 of section 292 of the executive law, as amended by  
31 chapter 89 of the laws of 2015, is amended and a new subdivision 43 is  
32 added to read as follows:

33 9. The term "place of public accommodation, resort or amusement" shall  
34 include, regardless of whether the owner or operator of such place is a  
35 state or local government entity or a private individual or entity,  
36 except as hereinafter specified, all places included in the meaning of  
37 such terms as: inns, taverns, road houses, hotels, motels, whether  
38 conducted for the entertainment of transient guests or for the accommo-  
39 dation of those seeking health, recreation or rest, or restaurants, or  
40 eating houses, or any place where food is sold for consumption on the  
41 premises; buffets, saloons, barrooms, or any store, park or enclosure  
42 where spirituous or malt liquors are sold; ice cream parlors, confec-  
43 tionaries, soda fountains, and all stores where ice cream, ice and fruit  
44 preparations or their derivatives, or where beverages of any kind are  
45 retailed for consumption on the premises; wholesale and retail stores  
46 and establishments dealing with goods or services of any kind, dispen-  
47 saries, clinics, hospitals, health care entities, bath-houses, swimming  
48 pools, laundries and all other cleaning establishments, barber shops,  
49 beauty parlors, theatres, motion picture houses, airdromes, roof  
50 gardens, music halls, race courses, skating rinks, amusement and recre-  
51 ation parks, trailer camps, resort camps, fairs, bowling alleys, golf  
52 courses, gymnasiums, shooting galleries, billiard and pool parlors;  
53 garages, all public conveyances operated on land or water or in the air,  
54 as well as the stations and terminals thereof; travel or tour advisory  
55 services, agencies or bureaus; public halls, public rooms, public eleva-  
56 tors, and any public areas of any building or structure. Such term shall

1 not include kindergartens, primary and secondary schools, high schools,  
2 academies, colleges and universities, extension courses, and all educa-  
3 tional institutions under the supervision of the regents of the state of  
4 New York; any such kindergarten, primary and secondary school, academy,  
5 college, university, professional school, extension course or other  
6 education facility, supported in whole or in part by public funds or by  
7 contributions solicited from the general public; or any institution,  
8 club or place of accommodation which proves that it is in its nature  
9 distinctly private. In no event shall an institution, club or place of  
10 accommodation be considered in its nature distinctly private if it has  
11 more than one hundred members, provides regular meal service and regu-  
12 larly receives payment for dues, fees, use of space, facilities,  
13 services, meals or beverages directly or indirectly from or on behalf of  
14 a nonmember for the furtherance of trade or business. An institution,  
15 club, or place of accommodation which is not deemed distinctly private  
16 pursuant to this subdivision may nevertheless apply such selective  
17 criteria as it chooses in the use of its facilities, in evaluating  
18 applicants for membership and in the conduct of its activities, so long  
19 as such selective criteria do not constitute discriminatory practices  
20 under this article or any other provision of law. For the purposes of  
21 this section, a corporation incorporated under the benevolent orders law  
22 or described in the benevolent orders law but formed under any other law  
23 of this state or a religious corporation incorporated under the educa-  
24 tion law or the religious corporations law shall be deemed to be in its  
25 nature distinctly private.

26 No institution, club, organization or place of accommodation which  
27 sponsors or conducts any amateur athletic contest or sparring exhibition  
28 and advertises or bills such contest or exhibition as a New York state  
29 championship contest or uses the words "New York state" in its announce-  
30 ments shall be deemed a private exhibition within the meaning of this  
31 section.

32 43. The term "health care entity" means:

33 (a) a hospital or provider as defined by section twenty-eight hundred  
34 one of the public health law; or

35 (b) a professional licensed under article one hundred thirty-one, one  
36 hundred thirty-one-B, one hundred thirty-one-C, one hundred thirty-two,  
37 one hundred thirty-three, one hundred thirty-four, one hundred thirty-  
38 six, one hundred thirty-seven, one hundred thirty-seven-A, one hundred  
39 thirty-nine, one hundred forty, one hundred forty-one, one hundred  
40 forty-three, one hundred forty-four, one hundred fifty-three, one  
41 hundred fifty-seven, one hundred sixty-three, one hundred sixty-four, or  
42 one hundred sixty-seven of the education law; or

43 (c) an issuer or provider of coverage for health insurance, as defined  
44 by section seven thousand seven hundred five of the insurance law.

45 § 4. Paragraph (a) of subdivision 2 of section 296 of the executive  
46 law, as separately amended by chapters 202 and 748 of the laws of 2022,  
47 is amended to read as follows:

48 (a) It shall be an unlawful discriminatory practice for any person,  
49 being the owner, lessee, proprietor, manager, superintendent, agent or  
50 employee of any place of public accommodation, resort or amusement,  
51 because of the race, creed, color, national origin, citizenship or immi-  
52 gration status, sexual orientation, gender identity or expression, mili-  
53 tary status, sex, disability, predisposing genetic characteristics,  
54 familial status, marital status, or status as a victim of domestic  
55 violence, of any person, directly or indirectly, to refuse, withhold  
56 from or deny to such person any of the accommodations, advantages,

1 facilities or privileges thereof, including the extension of credit, or,  
2 directly or indirectly, to publish, circulate, issue, display, post or  
3 mail any written or printed communication, notice or advertisement, to  
4 the effect that any of the accommodations, advantages, facilities and  
5 privileges of any such place shall be refused, withheld from or denied  
6 to any person on account of race, creed, color, national origin, citi-  
7 zenship or immigration status, sexual orientation, gender identity or  
8 expression, military status, sex, disability [~~or~~], predisposing genetic  
9 characteristics, familial status, marital status, or that the patronage  
10 or custom thereat of any person of or purporting to be of any particular  
11 race, creed, color, national origin, citizenship or immigration status,  
12 sexual orientation, gender identity or expression, military status, sex  
13 or marital status, or having a disability is unwelcome, objectionable or  
14 not acceptable, desired or solicited.

15 § 5. The section heading and the opening paragraph and paragraph 4 of  
16 subsection (a) of section 3243 of the insurance law, as added by section  
17 2 of subpart D of part J of chapter 57 of the laws of 2019, are amended  
18 and a new subsection (c) is added to read as follows:

19 Discrimination [~~because of sex or marital status~~] in hospital, surgi-  
20 cal or medical expense insurance.

21 With regard to an accident and health insurance policy that provides  
22 hospital, surgical, or medical expense coverage or a policy of student  
23 accident and health insurance, as defined in subsection (a) of section  
24 three thousand two hundred forty of this article, delivered or issued  
25 for delivery in this state, no insurer shall because of [~~sex, marital~~  
26 ~~status~~] age, race, creed, color, national origin, citizenship or immi-  
27 gration status, sexual orientation, gender identity or expression,  
28 military status, sex, disability, predisposing genetic characteristics,  
29 familial status, marital status, or status as a victim of domestic  
30 violence, pre-existing condition, or based on pregnancy, false pregnan-  
31 cy, termination of pregnancy, or recovery therefrom, childbirth or  
32 related medical conditions:

33 (4) insert in the policy any condition, or make any stipulation,  
34 whereby the insured binds [~~his or herself~~] themselves, or [~~his or her~~]  
35 such insured's heirs, executors, administrators or assigns, to accept  
36 any sum or service less than the full value or amount of such policy in  
37 case of a claim thereon except such conditions and stipulations as are  
38 imposed upon others in similar cases; and any such stipulation or condi-  
39 tion so made or inserted shall be void;

40 (c) Discrimination prohibited by this section includes any of the  
41 following:

42 (1) including a policy clause that purports to deny, limit, or exclude  
43 coverage based on an insured's sexual orientation, gender identity or  
44 expression, or transgender status;

45 (2) denying, limiting, or otherwise excluding medically necessary  
46 services or treatment otherwise covered by a policy on the basis that  
47 the treatment is for gender dysphoria or gender incongruence; provided  
48 further that an insurer shall provide an insured with the utilization  
49 review appeal rights required by insurance law and public health law  
50 articles forty-nine for gender dysphoria or gender incongruence treat-  
51 ment that is denied based on medical necessity;

52 (3) designating an insured's sexual orientation, gender identity or  
53 expression, or transgender status as a pre-existing condition for the  
54 purpose of denying, limiting, or excluding coverage; or

55 (4) denying a claim from an insured of one gender or sex for a service  
56 that is typically or exclusively provided to an individual of another

1 gender or sex unless the insurer has taken reasonable steps, including  
2 requesting additional information, to determine whether the insured is  
3 eligible for the services prior to denial of such claim.

4 § 6. Section 4303 of the insurance law is amended by adding a new  
5 subsection (yy) to read as follows:

6 (yy) (1) Every policy which provides hospital, surgical, or medical  
7 coverage shall provide medically necessary services or treatment other-  
8 wise covered by a policy on the basis that the treatment is for gender  
9 dysphoria or gender incongruence.

10 (2) Coverage for gender dysphoria or gender incongruence shall not be  
11 subject to annual deductibles or coinsurance, including co-payments,  
12 unless the policy is a high deductible health plan as defined in section  
13 223(c)(2) of the internal revenue code of 1986, in which case coverage  
14 for gender dysphoria or gender incongruence may be subject to the plan's  
15 annual deductible.

16 § 7. Subsection (k) of section 3221 of the insurance law is amended by  
17 adding a new paragraph 24 to read as follows:

18 (24) (A) Every policy which provides hospital, surgical, or medical  
19 coverage shall also provide coverage for medically necessary services or  
20 treatments for gender dysphoria or gender incongruence that are other-  
21 wise covered by the policy.

22 (B) Coverage for the treatment of gender dysphoria or gender incongru-  
23 ence shall not be subject to annual deductibles or coinsurance, includ-  
24 ing co-payments, unless the policy is a high deductible health plan as  
25 defined in section 223(c)(2) of the internal revenue code of 1986, in  
26 which case coverage for gender dysphoria or gender incongruence may be  
27 subject to the plan's annual deductible.

28 § 8. Subsection (i) of section 3216 of the insurance law is amended by  
29 adding a new paragraph 42 to read as follows:

30 (42) (A) Every policy which provides hospital, surgical, or medical  
31 coverage shall also provide coverage for medically necessary services or  
32 treatments for gender dysphoria or gender incongruence that are other-  
33 wise covered by the policy.

34 (B) Coverage for gender dysphoria or gender incongruence shall not be  
35 subject to annual deductibles or coinsurance, including co-payments,  
36 unless the policy is a high deductible health plan as defined in section  
37 223(c)(2) of the internal revenue code of 1986, in which case coverage  
38 for gender dysphoria or gender incongruence may be subject to the plan's  
39 annual deductible.

40 § 9. Severability. If any clause, sentence, paragraph, section or part  
41 of this act shall be adjudged by any court of competent jurisdiction to  
42 be invalid and after exhaustion of all further judicial review, the  
43 judgment shall not affect, impair or invalidate the remainder thereof,  
44 but shall be confined in its operation to the clause, sentence, para-  
45 graph, section or part of this act directly involved in the controversy  
46 in which the judgment shall have been rendered.

47 § 10. This act shall take effect immediately.