

# STATE OF NEW YORK

9275

## IN SENATE

February 23, 2026

Introduced by Sen. RIVERA -- read twice and ordered printed, and when printed to be committed to the Committee on Health

AN ACT to amend the social services 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 9 of section 292 of the executive law, as amended by  
6 chapter 89 of the laws of 2015, is amended and a new subdivision 43 is  
7 added to read as follows:

8 9. The term "place of public accommodation, resort or amusement" shall  
9 include, regardless of whether the owner or operator of such place is a  
10 state or local government entity or a private individual or entity,  
11 except as hereinafter specified, all places included in the meaning of  
12 such terms as: inns, taverns, road houses, hotels, motels, whether  
13 conducted for the entertainment of transient guests or for the accommo-  
14 dation of those seeking health, recreation or rest, or restaurants, or  
15 eating houses, or any place where food is sold for consumption on the  
16 premises; buffets, saloons, barrooms, or any store, park or enclosure  
17 where spirituous or malt liquors are sold; ice cream parlors, confec-  
18 tionaries, soda fountains, and all stores where ice cream, ice and fruit  
19 preparations or their derivatives, or where beverages of any kind are  
20 retailed for consumption on the premises; wholesale and retail stores  
21 and establishments dealing with goods or services of any kind, dispen-  
22 saries, clinics, hospitals, health care entities, bath-houses, swimming  
23 pools, laundries and all other cleaning establishments, barber shops,  
24 beauty parlors, theatres, motion picture houses, airdromes, roof

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

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1 gardens, music halls, race courses, skating rinks, amusement and recre-  
2 ation parks, trailer camps, resort camps, fairs, bowling alleys, golf  
3 courses, gymnasiums, shooting galleries, billiard and pool parlors;  
4 garages, all public conveyances operated on land or water or in the air,  
5 as well as the stations and terminals thereof; travel or tour advisory  
6 services, agencies or bureaus; public halls, public rooms, public eleva-  
7 tors, and any public areas of any building or structure. Such term shall  
8 not include kindergartens, primary and secondary schools, high schools,  
9 academies, colleges and universities, extension courses, and all educa-  
10 tional institutions under the supervision of the regents of the state of  
11 New York; any such kindergarten, primary and secondary school, academy,  
12 college, university, professional school, extension course or other  
13 education facility, supported in whole or in part by public funds or by  
14 contributions solicited from the general public; or any institution,  
15 club or place of accommodation which proves that it is in its nature  
16 distinctly private. In no event shall an institution, club or place of  
17 accommodation be considered in its nature distinctly private if it has  
18 more than one hundred members, provides regular meal service and regu-  
19 larly receives payment for dues, fees, use of space, facilities,  
20 services, meals or beverages directly or indirectly from or on behalf of  
21 a nonmember for the furtherance of trade or business. An institution,  
22 club, or place of accommodation which is not deemed distinctly private  
23 pursuant to this subdivision may nevertheless apply such selective  
24 criteria as it chooses in the use of its facilities, in evaluating  
25 applicants for membership and in the conduct of its activities, so long  
26 as such selective criteria do not constitute discriminatory practices  
27 under this article or any other provision of law. For the purposes of  
28 this section, a corporation incorporated under the benevolent orders law  
29 or described in the benevolent orders law but formed under any other law  
30 of this state or a religious corporation incorporated under the educa-  
31 tion law or the religious corporations law shall be deemed to be in its  
32 nature distinctly private.

33 No institution, club, organization or place of accommodation which  
34 sponsors or conducts any amateur athletic contest or sparring exhibition  
35 and advertises or bills such contest or exhibition as a New York state  
36 championship contest or uses the words "New York state" in its announce-  
37 ments shall be deemed a private exhibition within the meaning of this  
38 section.

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

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

42 (b) a professional licensed under article one hundred thirty-one, one  
43 hundred thirty-one-B, one hundred thirty-one-C, one hundred thirty-two,  
44 one hundred thirty-three, one hundred thirty-four, one hundred thirty-  
45 six, one hundred thirty-seven, one hundred thirty-seven-A, one hundred  
46 thirty-nine, one hundred forty, one hundred forty-one, one hundred  
47 forty-three, one hundred forty-four, one hundred fifty-three, one  
48 hundred fifty-seven, one hundred sixty-three, one hundred sixty-four, or  
49 one hundred sixty-seven of the education law; or

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

52 § 3. The section heading and the opening paragraph and paragraphs 4, 7  
53 and 8 of subsection (a) of section 3243 of the insurance law, as added  
54 by section 2 of subpart D of part J of chapter 57 of the laws of 2019,  
55 are amended and four new paragraphs 9, 10, 11 and 12 are added to  
56 subsection (a) to read as follows:

1 Discrimination because of race, national origin, age, disability, sex  
2 or marital status in hospital, surgical or medical expense insurance.

3 With regard to an accident and health insurance policy that provides  
4 hospital, surgical, or medical expense coverage or a policy of student  
5 accident and health insurance, as defined in subsection (a) of section  
6 three thousand two hundred forty of this article, delivered or issued  
7 for delivery in this state, no insurer shall because of race, color,  
8 creed, national origin, sex, marital status, disability, preexisting  
9 condition, or based on pregnancy, false pregnancy, termination of preg-  
10 nancy, or recovery therefrom, childbirth or related medical conditions:

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

18 (7) fix any lower rate or discriminate in the fees or commissions of  
19 insurance agents or insurance brokers for writing or renewing such a  
20 policy; [~~or~~]

21 (8) engage in sexual stereotyping[~~-~~];

22 (9) include a policy clause that purports to deny, limit, or exclude  
23 coverage based on an insured's sexual orientation, gender identity or  
24 expression, or transgender status;

25 (10) deny, limit, or otherwise exclude medically necessary services or  
26 treatment otherwise covered by a policy on the basis that the treatment  
27 is for gender dysphoria or gender incongruence; provided further that an  
28 insurer shall provide an insured with the utilization review appeal  
29 rights required by insurance law and public health law articles forty-  
30 nine for gender dysphoria or gender incongruence treatment that is  
31 denied based on medical necessity;

32 (11) designate an insured's sexual orientation, gender identity or  
33 expression, or transgender status as a pre-existing condition for the  
34 purpose of denying, limiting, or excluding coverage; or

35 (12) deny a claim from an insured of one gender or sex for a service  
36 that is typically or exclusively provided to an individual of another  
37 gender or sex unless the insurer has taken reasonable steps, including  
38 requesting additional information, to determine whether the insured is  
39 eligible for the services prior to denial of such claim.

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

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

46 (2) Coverage for gender dysphoria or gender incongruence shall not be  
47 subject to annual deductibles or coinsurance, including co-payments,  
48 unless the policy is a high deductible health plan as defined in section  
49 223(c)(2) of the internal revenue code of 1986, in which case coverage  
50 for gender dysphoria or gender incongruence may be subject to the plan's  
51 annual deductible.

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

54 (24) (A) Every policy which provides hospital, surgical, or medical  
55 coverage shall also provide coverage for medically necessary services or

1 treatments for gender dysphoria or gender incongruence that are other-  
2 wise covered by the policy.

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

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

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

15 (B) Coverage for gender dysphoria or gender incongruence shall not be  
16 subject to annual deductibles or coinsurance, including co-payments,  
17 unless the policy is a high deductible health plan as defined in section  
18 223(c)(2) of the internal revenue code of 1986, in which case coverage  
19 for gender dysphoria or gender incongruence may be subject to the plan's  
20 annual deductible.

21 § 7. Severability. If any clause, sentence, paragraph, section or part  
22 of this act shall be adjudged by any court of competent jurisdiction to  
23 be invalid and after exhaustion of all further judicial review, the  
24 judgment shall not affect, impair or invalidate the remainder thereof,  
25 but shall be confined in its operation to the clause, sentence, para-  
26 graph, section or part of this act directly involved in the controversy  
27 in which the judgment shall have been rendered.

28 § 8. This act shall take effect immediately.