STATE OF NEW YORK

10203

IN ASSEMBLY

February 12, 2026

Introduced by M. of A. ROZIC, REYES, R. CARROLL, STIRPE, SIMON, GONZALEZ-ROJAS, DINOWITZ, JACOBSON, STECK, ROSENTHAL, OTIS, DAVILA, BURDICK, HUNTER, RAGA, LAVINE, BORES, WOERNER, LASHER, ZACCARO, HEVESI, SEAWRIGHT, KELLES, GLICK, BARRETT, LEE, TAPIA, LEVENBERG, SIMONE, GALLAGHER, CUNNINGHAM, SHIMSKY, SANTABARBARA, BURROUGHS -- read once and referred to the Committee on Health

AN ACT to amend the public health law and the insurance law, in relation to providing information to patients and the public on hospital rule-based exclusions

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

Section 1. Legislative findings. The legislature finds that since 2003 more than 40 community hospitals in New York state have closed.

The legislature additionally finds that as a result of hospital consolidation, large health care systems now control more than 70 percent of acute hospital beds in the state and that these systems sometimes remove categories of care from local hospitals, leaving patients in regions of the state without access to particular types of care, including some types of emergency care.

The legislature further finds that patients do not have the ability to determine whether health care facilities in their area provide the care they seek, because information about how facility restrictions impact options for care is too difficult to obtain.

The legislature also finds that denials and poor access to care can lead to serious adverse health impacts that jeopardize individuals' lives and wellbeing and that New York needs to understand health care gaps and their impact statewide.

Finally, the legislature finds that some denials of care violate state and federal law.

§ 2. The public health law is amended by adding a new section 2803-cc to read as follows:

§ 2803-cc. Hospital rule-based exclusions. 1. As used in this section, "hospital rule-based exclusions" means any criteria, rules, or policies, whether written or unwritten, formally adopted or drafted,

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

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endorsed by the general hospital or followed from an external source, that restrict a general hospital from providing types of care, within the covered practice areas pursuant to subdivision one-a of this section, that the general hospital is licensed to provide or that restrict the provision of care to categories of patients on the basis of any characteristic protected under section two hundred ninety-six of the executive law that the general hospital is licensed to provide. "Hospital rule-based exclusions" shall include, but not be limited to, objections under section twenty-nine hundred eighty-four or twenty-nine hundred ninety-four-n of this chapter. "Hospital rule-based exclusions" shall not include restrictions based on lack of equipment, available bed space in the facility, or insurance denial.

1-a. (a) Covered practice areas shall include but not be limited to:

(i) primary care;

(ii) family planning, contraception, and infertility services;

(iii) pregnancy testing, support, labor and delivery, and termination services;

(iv) reproductive, gender-affirming, and sterilization services; and

(v) palliative, hospice, and other end-of-life services.

(b) The commissioner shall make rules and regulations as necessary to further specify services to be covered within these practice areas.

2. (a) The commissioner shall develop a clear and simple service availability form for the purpose of conveying to patients and to the public the services within the covered practice areas that are and are not generally available or are subject to hospital rule-based exclusions at a general hospital and shall collect from each general hospital a list of its hospital rule-based exclusions on an annual basis using the service availability form. In developing such form the commissioner may consult with health care providers, patient advocates, and experts in health care access to ensure it is understandable to members of the public. Each general hospital shall furnish a completed service availability form to the department, immediately upon request.

(b) The commissioner shall publish on the department's website the completed service availability form for each general hospital not later than six months after the effective date of this section. The commissioner shall post updated service availability forms on an annual basis.

(c) The commissioner may promulgate rules and regulations as may be necessary and proper to carry out effectively the provisions of this section.

§ 3. Subdivision 1 of section 2803 of the public health law is amended by adding a new paragraph (m) to read as follows:

(m) The statement regarding patient rights and responsibilities, required pursuant to paragraph (g) of this subdivision, shall include an explanation of hospital rule-based exclusions and a link to the section of the department's website required in paragraph (b) of subdivision two of section twenty-eight hundred three-cc of this article. Each general hospital's website shall prominently link to the department's website required in paragraph (b) of subdivision two of section twenty-eight hundred three-cc of this article. The commissioner may promulgate rules and regulations as may be necessary and proper to carry out effectively the provisions of this paragraph.

§ 4. Subsection (a) of section 3217-a of the insurance law is amended by adding a new paragraph 22 to read as follows:

(22)(A) an explanation of hospital rule-based exclusions and the fact that some general hospitals may have hospital rule-based exclusions,

along with a link to the website required pursuant to subdivision two of section twenty-eight hundred three-cc of the public health law.

(B) for the purposes of this paragraph, "hospital rule-based exclusions" shall have the same meaning as in section twenty-eight hundred three-cc of the public health law.

§ 5. Subsection (a) of section 4324 of the insurance law is amended by adding a new paragraph 23 to read as follows:

(23)(A) an explanation of hospital rule-based exclusions and the fact that some general hospitals may have hospital rule-based exclusions, along with a link to the website required pursuant to subdivision two of section twenty-eight hundred three-cc of the public health law.

(B) for the purposes of this paragraph, "hospital rule-based exclusions" shall have the same meaning as in section twenty-eight hundred three-cc of the public health law.

§ 6. Subdivision 1 of section 4408 of the public health law is amended by adding a new paragraph (w) to read as follows:

(w) (i) An explanation of hospital rule-based exclusions and the fact that some general hospitals may have hospital rule-based exclusions, along with a link to the website required pursuant to subdivision two of section twenty-eight hundred three-cc of this chapter.

(ii) For the purposes of this paragraph, "hospital rule-based exclusions" shall have the same meaning as in section twenty-eight hundred three-cc of this chapter.

§ 7. Nothing in this act shall be construed to permit or authorize denials of care or discrimination in the provision of health care or health insurance. Compliance with this act does not reduce or limit any liability for general hospitals in connection with hospital rule-based exclusions, including violations of state or federal law.

§ 8. Severability clause. If any provision of this act, or any application of any provision of this act, is held to be invalid, or ruled to violate or be inconsistent with any applicable federal law or regulation, that shall not affect the validity or effectiveness of any other provision of this act, or of any other application of any provision of this act. It is hereby declared to be the intent of the legislature that this act would have been enacted even if such invalid provisions had not been included herein.

§ 9. This act shall take effect eighteen months after it shall have become a law. Effective immediately, the addition, amendment and/or repeal of any rule or regulation necessary for the implementation of this act on its effective date are authorized to be made and completed on or before such effective date.