

STATE OF NEW YORK

9367

2025-2026 Regular Sessions

IN ASSEMBLY

December 19, 2025

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

AN ACT to amend the insurance law and the legislative law, in relation to creating the New York health benefit and cost commission; and to repeal section 213 of the insurance law relating thereto

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

1 Section 1. The insurance law is amended by adding a new section 3221-a
2 to read as follows:

3 § 3221-a. Health benefit and cost commission. (a) For the purposes of
4 this section, "mandated health benefit" shall mean any requirement that
5 individual, group or blanket accident and health insurance policies or
6 contracts issued by hospital or health service corporations include:

7 (1) coverage for specific health services, treatment, tests, drugs,
8 supplies, or equipment to diagnose or treat a particular disease or
9 condition; and

10 (2) coverage for services of specific providers of health care
11 services.

12 (b) There is hereby created a commission within the department, to be
13 known as the "New York health benefit and cost commission" consisting of
14 thirteen members to be appointed as follows: three to be appointed by
15 the governor, three to be appointed by the temporary president of the
16 senate, three to be appointed by the speaker of the assembly, and one
17 each to be appointed by the minority leader of the senate and the assem-
18 bly. The superintendent and the commissioner of health, or their desig-
19 nated representatives, shall also serve as members of the commission.
20 The members shall elect a person to serve as chair.

21 (c) Each member shall serve for a term of four years. Vacancies shall
22 be appointed in the same manner as original appointments. The members of
23 the commission shall receive no compensation for their services but
24 shall be allowed actual and necessary expenses incurred in the perform-

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

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1 ance of their duties. The commission may request and shall receive from
2 any department, board, bureau, commission, office, agency, or other
3 instrumentality of the state such facilities, assistance, and data as it
4 deems necessary or desirable for the proper execution of its powers and
5 duties. The commission may seek the assistance and advice of any person,
6 organization, or entity as may be relevant or necessary and may hire or
7 contract with any such person, organization, or entity. The commission
8 shall have the power to hold public hearings and solicit testimony on
9 any matter it deems relevant to carrying out its mission.

10 § 2. The legislative law is amended by adding a new section 52-a to
11 read as follows:

12 § 52-a. Requirements with respect to bills affecting mandated health
13 benefits. 1. For purposes of this section, the terms "mandated health
14 benefits" shall have the same meanings that they have in section three
15 thousand two hundred twenty-one-a of the insurance law.

16 2. In addition to any other fiscal note required, a bill that enacts
17 or amends any law in relation to mandating health benefits shall be
18 accompanied by an impact statement consisting of a fiscal note separate-
19 ly stating the estimated cost of the health benefits mandate in the bill
20 for the first year it is to be in effect and for the next succeeding
21 year, as well as a statement of the public purpose to be served by such
22 mandate.

23 3. The commission shall conduct a review and public comment period and
24 issue a report relating to legislation that would enact a mandated
25 health benefit. Such issuance shall:

26 (a) consider and summarize all public comment and all scientific,
27 medical, and actuarial data and information provided or obtained relat-
28 ing to the proposed mandated health benefit;

29 (b) report on public and patient health issues, including:

30 (i) the extent to which the proposed mandated health benefit is avail-
31 able and utilized by the state's population and the level of public
32 demand for the benefit;

33 (ii) the extent to which the proposed mandated health benefit is
34 already a covered health benefit;

35 (iii) if coverage is not generally available, the extent to which the
36 lack of coverage results in persons being unable to obtain necessary
37 health care and results in financial hardship for those needing such
38 care;

39 (iv) projected utilization rates and access to service that would
40 result from the proposed mandated health benefit;

41 (v) whether the proposed mandated health benefit is a medical or a
42 broader social need and whether it is consistent with the role of health
43 insurance and managed health care; and

44 (vi) the extent to which the proposed mandated health benefit is
45 generally recognized by the medical community as being effective and
46 efficacious, including appropriate review by scientific and medical peer
47 review literature; and

48 (c) report on access to coverage and economic issues, including:

49 (i) the impact on premiums, rates, and costs of health coverage in all
50 affected markets;

51 (ii) the impact that the proposed mandated health benefit may have on
52 the availability of other benefits;

53 (iii) the impact that the proposed mandated health benefit may have on
54 the availability of health coverage in each affected market and the
55 impact on the number of persons covered through self-insured plans; and

1 (iv) report on any other matter, question, or concern relating to a
2 mandated health benefit as may be determined relevant by the commission
3 or by the person having issued the request.

4 4. The commission shall allow a thirty-day public comment period and
5 issue a report to the governor and the legislature within ninety days
6 after receipt of a written request. The commission may extend its review
7 period and reporting time upon the consent of the person having issued
8 the request.

9 5. The commission shall review and report on utilization rates, public
10 and patient health effects, and impact on premiums and access to health
11 care and health coverage of all mandated health benefits existing on the
12 effective date of this section.

13 § 3. Section 213 of the insurance law is REPEALED.

14 § 4. This act shall take effect immediately.