§ 365-d. Medicaid evidence based benefit review advisory committee. 1. The department shall convene a Medicaid evidence based benefit review advisory committee. The committee shall provide advice and make recommendations regarding coverage of health technology or service for purposes of the medical assistance program. The commissioner shall consult such committee prior to any determination made regarding the coverage status of a particular item, health technology or service based on procedures established in subdivision five of this section under the medical assistance program. For purposes of this section, "health technology" means medical devices and surgical procedures used in the prevention, diagnosis and treatment of disease and other medical conditions. For purposes of this section "services" means any medical or behavioral health procedure.

2. (a) The membership of such committee shall, at a minimum, include:

(i) at least three persons licensed and actively engaged in the practice of medicine in this state;

(ii) one person licensed and actively engaged in the practice of nursing as a nurse practitioner, or in the practice of midwifery in this state;

(iii) one person with expertise in health technology assessment or evidence based medical review who is preferably a health care professional licensed under title eight of the education law;

(iv) three persons who shall be consumers or representatives of organizations with a regional or statewide constituency and who have been involved in activities related to health care consumer advocacy;

(v) one person who is a representative of a hospital organization with a regional, national or statewide constituency;

(vi) one person who is a representative of a health insurance or managed care organization with a regional, statewide or national constituency;

(vii) one person who is a health economist;

(viii) one person with health care expertise who is appointed by the temporary president of the senate;

(ix) one person with health care expertise who is appointed by the speaker of the assembly;

(x) a member of the department who shall act as chairperson as

designated by the commissioner; and

(xi) the committee may invite and consult with scientific, technical, or clinical experts with demonstrable experience or knowledge of the technology or medical specialty area under review.

3. The department shall provide video or audio access to all meetings of such committee through the department's website.

4. The members of the committee shall receive no compensation for their services but shall be reimbursed for expenses actually and necessarily incurred in the performance of their duties unless expressly stated otherwise in this section, members shall be appointed by the commissioner. Members shall serve three year terms, and may be reappointed for subsequent terms. Committee members shall be deemed to be employees of the department for purposes of section seventeen of the public officers law, and shall not participate in any matter before the committee for which a conflict of interest exists.

5. The committee shall consider any matter regarding material changes in the coverage status of a particular item, health technology or service, and any matter relative to new health technology assessment or medical evidence review for which the department determines a sufficient body of evidence exists to warrant committee deliberation. The commissioner shall provide members of the committee with any evidence or information related to the health technology or medical service assessment including but not limited to, information submitted by members of the public. The department shall report to the committee programmatic changes to benefits that do not rise to the level of a material change, as well as determinations of when sufficient medical evidence exists to warrant committee deliberations. The commissioner shall provide forty-five days public notice on the department's website prior to any meeting of the committee to develop recommendations concerning health technology or medical service coverage determinations. Such notice shall include a description of the proposed health technology or service to be reviewed, the conditions or diseases impacted by the health technology or service, the proposals to be considered by the committee, and the systematic evidence-based

assessment prepared in accordance with this subdivision. The committee shall allow interested parties a reasonable opportunity to make an oral presentation to the committee related to the health technology or service to be reviewed and to submit written information. The committee shall consider any information provided by any interested party, including, but not limited to, health care providers, health care facilities, patients, consumers and manufacturers. For all health technologies or services selected for review, the department shall conduct or commission a systematic evidence-based assessment of the health technology's or service's safety and clinical efficacy. The assessment shall use established systematic review elements, study quality assessment, and data synthesis. Upon completion, the systematic, evidence-based assessment shall be made available to the public.

6. The commissioner shall provide notice of any coverage recommendations developed by the committee by making such information available on the department's website. Such public notice shall include: a summary of the deliberations of the committee; a summary of the positions of those making public comments at meetings of the committee and any safety and health outcomes data submitted by any interested party; the response of the committee to those comments, if any; the clinical evidence upon which the committee bases its recommendations; and the findings and recommendations of the committee including a final evidence-based systematic assessment.

7. The commissioner shall provide public notice on the department's website of the committee's recommendation and the department's final determination, including: the nature of the determination; an analysis of the impact of the department's determination on the state Medicaid plan populations and providers; and the projected fiscal impact to the state Medicaid program.

8. The recommendations of the committee, made pursuant to this section, shall be based on a review of the evidence presented to the committee, including the clinical effectiveness, patient outcomes, impact on at risk and underserved populations, and safety. The committee shall review previous recommendations of the committee as new evidence

becomes available and permit oral presentations and the submission of new evidence at any committee meeting. Such review shall occur pursuant to the procedure established in subdivisions five and six of this section. The department may alter or revoke the final determination after such review pursuant to the procedure established in subdivision seven of this section.

9. The department shall provide administrative support to the committee.