MEMORANDUM IN SUPPORT

A.3734 – Rosenthal (In Assembly Insurance Committee)
S.1846 – Hannon (In Senate Health Committee)

AN ACT to amend the public health law and the insurance law, in relations to requiring health care insurers to offer coverage for health care provided by out-of-network providers

The mission of NYSPA is to advance the science and practice of psychology as a means of promoting human welfare; the organization has sixteen divisions and twelve regional affiliates, with representation from various practice areas such as addictions, clinical psychology, adult development and aging, and school psychology. NYSPA is affiliated with the American Psychological Association (APA).

This is first and foremost an issue of freedom of choice for consumers, as well as a right to continuity of care. The right to access to Out of Network coverage should be afforded to all New Yorkers, whether they purchase policies on the New York Exchange Plans, or receive coverage through their employers or in some other fashion.

- For decades, the majority of New Yorkers with health insurance have had an OON option, meaning they have been able to choose providers not in their insurer’s network, and still be reimbursed. Costs are almost always higher than selecting someone on their “panel”, but consumers often accept those costs for the benefit of having the right to choose.

- When the ACA was introduced, and the NY exchange plan developed, it did not require that the health plans on the exchange have this feature. It said that those plans offering OON outside the exchange had to do so inside. Almost none of the plans chose to do it this way, thus leaving many New Yorkers without this vital option. Consumers purchasing plans on the exchange have been forced to give up doctors with whom they have built vital relationships.

- As a result of cancellation of their individual or small business policies under the new ACA rules, many individuals were now forced to purchase plans on the exchange which afforded no freedom of choice. They often found that plans which seemed reasonable and affordable required that they change providers and/or hospitals because their providers were not participants. There has been confusion and disruption to treatment processes, and a huge amount of anxiety generated for those consumers who wish to maintain a relationship with their providers.

- With no out-of-network option, continuity of care is disrupted and relationships between patients and providers are destroyed. This is particularly harmful to our most vulnerable patients, those with rare and/or chronic disorders, as well as emotional disorders, including serious mental illness where relationships between provider and patient provide important support and are vital to patient health and well-being. Having an option to purchase out of network coverage would assist patients in maintaining such continuity.

New York is one of the few states which do not offer an OON benefit on their state exchange – in fact only 1% do not.