

SUPPORT MEMO

Date: May 30, 2023

To: Members, Hudson Valley and Long Island Senate Delegations

From: Wendy Darwell, President and CEO

Re: A.6898 (Weprin) – In Insurance Committee S.3402 (Breslin) – Advanced to 3rd Reading

The Suburban Hospital Alliance of New York State, which represents hospitals and health systems in the Hudson Valley and on Long Island, supports A.6898/S.3402, which would deem care to be approved if a health plan fails to make a utilization review determination within the timeframes prescribed by law.

Current statute enumerates the timeframes within which insurers engaged in prior authorization of health services must complete their reviews and issue determinations. If the health plan fails to respond, the request for health services is deemed to be denied. This requires the healthcare provider to file an appeal, which is difficult and time-consuming to argue when the plan has not provided any justification for the denial. Ultimately, medically necessary care gets approved, but not until the healthcare provider has spent days or weeks pursuing the claim. This delays care for patients and creates costly administrative burdens for providers, diverting resources that would be better deployed for patient care.

Plans are incentivized by current law to delay or ignore requests for care. A.6898/S.3402 would ensure better enforcement of the statutory timeframes for insurers to issue determinations. If insurers fail to timely issue a determination upon receipt of the clinical documentation requested from the provider, the care would be deemed to be approved. Patients should not be forced to wait for medically necessary care because a health plan failed to respond in a timely manner to a clinician's request.

The Suburban Hospital Alliance of New York State urges your support for A.6898/S.3402.