VERIFIED Validate

# *Notice of Proposed Rule Making*

Financial Services, Department of
(SUBMITTING AGENCY)

[x] Approval has been granted by Executive Chamber to propose this rule making.
[ ] This rule making does not require Executive Chamber approval.

1. A. *Proposed action:*

| | | |
|---|---|---|
| Amendment of | Part 68 (Insurance Regulation 83) | Title 11 NYCRR |
| | | Title NYCRR |
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B. [ ] This is a consensus rule making. A statement is attached setting forth the agency's determination that no person is likely to object to the rule as written [SAPA §202(1)(b)(i)].

C. [ ] This rule was previously proposed as a consensus rule making under I.D. No. _____ - ____. Attached is a brief description of the objection that caused/is causing the prior notice to be withdrawn [SAPA §202(1)(e)].

D. [ ] This rule is proposed pursuant to [SAPA §207(3)], 5-Year Review of Existing Rules (see also item 16).

2. *Statutory authority under which the rule is proposed:*

Financial Services Law Sections 202 and 302 and Insurance Law Sections 301, 2601, 5221 and Article 51.

3. *Subject of the rule:*

Charges for Professional Health Services

4. *Purpose of the rule:*

Limit reimbursement of no-fault health care services provided outside NYS to highest fees in fee schedule for services in NYS.

5. *Public hearings* (check box and complete as applicable):

[x] A public hearing is not scheduled. (*SKIP TO ITEM 8*)

[ ] A public hearing is required by law and is scheduled below. (***Note***: first hearing date must be at least 45 days **after** publication of this notice unless a different time is specified in statute.)

[ ] A public hearing is not required by law, but is scheduled below.

| *Time:* | *Date:* | *Location:* |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

6. *Interpreter services* (check only if a public hearing is scheduled):
   [ ] Interpreter services will be made available to hearing impaired persons, at no charge, upon written request to the agency contact designated in this notice.

7. Accessibility (check appropriate box only if a public hearing is scheduled):
   [ ] All public hearings have been scheduled at places reasonably accessible to persons with a mobility impairment.
   [ ] Attached is a list of public hearing locations that are **not** reasonably accessible to persons with a mobility impairment. An explanation is submitted regarding diligent efforts made to provide accessible hearing sites.

8. *Terms of rule* (SELECT ONE SECTION):
   A. [x] The full text of the rule is attached because it does not exceed 2,000 words.
   B. [ ] A summary of the rule is attached because the full text of the rule exceeds 2,000 words.
      [ ] Full text is posted at the following State website: _____
      [ ] Full text is not posted on a State website.
      [ ] Full text is not posted on a State website; this is a consensus rule or a rule defined in SAPA § 102 (2)(a)(ii).
   C. [ ] Pursuant to SAPA §202(7)(b), the agency elects to print a description of the subject, purpose and substance of the rule as defined in SAPA §102(2)(a)(ii) [Rate Making].

9. *The text of the rule and any required statements and analyses may be obtained from:*

*Agency contact* Hoda Nairooz
*Agency Name* New York State Department of Financial Services
*Office address* One State Street
New York, NY 10004
*Telephone* (212) 480-5595 *E-mail:* hoda.nairooz@dfs.ny.gov

10. *Submit data, views or arguments to* (complete only if different than previously named agency contact):

*Agency contact* _____
*Agency name* _____
*Office address* _____
_____
*Telephone* _____ *E-mail:* _____

11. *Public comment will be received until:*

[x] 45 days after publication of this notice (MINIMUM public comment period when full text is attached because it does not exceed 2000 words or full text of rule has been posted on a State web site or the rule is a consensus rule or a rule defined under SAPA §102[2][a][ii] [Rate Making]).

[ ] 60 days after publication of this notice (MINIMUM public comment period when full text is not attached or full text is not posted on a State web site or the rule is not a consensus rule or a rule defined under SAPA §102[2][a][ii] [Rate Making]).

[ ] 5 days after the last scheduled public hearing required by statute (MINIMUM, with required hearing). This box may not be checked and the minimum 60-day comment period applies if full text is not attached or text is not posted on a State web site or the rule is not a consensus rule or a rule defined under SAPA §102[2][a][ii] [Rate Making]).

[ ] Other: (*specify*) _____.

12. A prior emergency rule making for this action was previously published in the _____ issue of the *Register*, I.D. No. _____-_____.

13. *Expiration date* (check only if applicable):

[ ] This proposal will not expire in 365 days because it is for a "rate making" as defined in SAPA §102 (2)(a)(ii).

14. *Additional matter required by statute:*

[ ] Yes (include below material required by statute).

[x] No additional material required by statute.

15. *Regulatory Agenda* (See SAPA §202-d[1]):

[ ] This rule was a Regulatory Agenda item for this agency in the following issue of the *State Register:* _____.

[x] This rule was not under consideration at the time this agency submitted its Regulatory Agenda for publication in the *Register*.

[ ] Not applicable.

16. ***Review of Existing Rules*** (ALL ATTACHMENTS MUST BE 2,000 WORDS OR LESS)

This rule is proposed pursuant to SAPA §207 (item 1D applies) (check applicable boxes):

[ ] Attached is a statement setting forth a reasoned justification for modification of the rule. Where appropriate, include a discussion of the degree to which changes in technology, economic conditions or other factors in the area affected by the rule necessitate changes in the rule.

[ ] Attached is an assessment of public comments received by the agency in response to its publication of a list of rules to be reviewed.

[ ] An assessment of public comments is not attached because no comments were received.

[x] Not applicable.

17. ***Regulatory Impact Statement (RIS)***
(SELECT AND COMPLETE ONE; ALL ATTACHMENTS MUST BE 2,000 WORDS OR LESS, EXCLUDING SUMMARIES OF STUDIES, REPORTS OR ANALYSES [Needs and Benefits]):

A. The attached RIS contains:

[x] The full text of the RIS.

[ ] A summary of the RIS.

[ ] A consolidated RIS, because this rule is one of a series of closely related and simultaneously proposed rules or is virtually identical to rules proposed during the same year.

B. A RIS is **not attached,** because this rule is:

[ ] subject to a consolidated RIS printed in the *Register* under I.D. No.: _____ - _____; issue date: _____ .

[ ] exempt, as defined in SAPA §102(2)(a)(ii) [Rate Making].

[ ] exempt, as defined in SAPA §102(11) [Consensus Rule Making].

C. [ ] A **statement is attached** claiming exemption pursuant to SAPA § 202-a (technical amendment).

18. ***Regulatory Flexibility Analysis (RFA) for small businesses and local governments***
(SELECT AND COMPLETE ONE; ALL ATTACHMENTS MUST BE 2,000 WORDS OR LESS):

A. The attached RFA contains:

[ ] The full text of the RFA.

[ ] A summary of the RFA.

[ ] A consolidated RFA, because this rule is one of a series of closely related rules.

B. [x] A **statement is attached** explaining why a RFA is not required. This statement is in scanner format and explains the agency's finding that the rule will not impose any adverse economic impact or reporting, recordkeeping or other compliance requirements on small businesses or local governments and the reason(s) upon which the finding was made, including any measures used to determine that the rule will not impose such adverse economic impacts or compliance requirements.

C. A RFA is **not** attached, because this rule:

[ ] is subject to a consolidated RFA printed in the *Register* under I.D. No.: _____ - _____; issue date: _____ .

[ ] is exempt, as defined in SAPA §102(2)(a)(ii) [Rate Making].

[ ] is exempt, as defined in SAPA §102(11) [Consensus Rule Making].

19. ***Rural Area Flexibility Analysis (RAFA)***
(SELECT AND COMPLETE ONE; ALL ATTACHMENTS MUST BE 2,000 WORDS OR LESS):

A. The attached RAFA contains:

[ ] The full text of the RAFA.

[ ] A summary of the RAFA.

[ ] A consolidated RAFA, because this rule is one of a series of closely related rules.

B. [x] A **statement is attached** explaining why a RAFA is not required. This statement is in scanner format and explains the agency's finding that the rule will not impose any adverse impact on rural areas or reporting, recordkeeping or other compliance requirements on public or private entities in rural areas and the reason(s) upon which the finding was made, including what measures were used to determine that the rule will not impose such adverse impact or compliance requirements.

C. A RAFA is **not attached,** because this rule:

[ ] is subject to a consolidated RAFA printed in the *Register* under I.D. No.: _____ - _____; issue date: _____ .

[ ] is exempt, as defined in SAPA §102(2)(a)(ii) [Rate Making].

[ ] is exempt, as defined in SAPA §102(11) [Consensus Rule Making].

20. ***Job Impact Statement (JIS)***

(SELECT AND COMPLETE ONE; ALL ATTACHMENTS MUST BE 2,000 WORDS OR LESS):

A. The attached JIS contains:

[ ] The full text of the JIS.

[ ] A summary of the JIS.

[ ] A consolidated JIS, because this rule is one of a series of closely related rules.

B. [x] A **statement is attached** explaining why a JIS is not required. This statement is in scanner format and explains the agency's finding that the rule will not have a substantial adverse impact on jobs and employment opportunities (as apparent from its nature and purpose) and explains the agency's finding that the rule will have a positive impact or no impact on jobs and employment opportunities; except when it is evident from the subject matter of the rule that it could only have a positive impact or no impact on jobs and employment opportunities, the statement shall include a summary of the information and methodology underlying that determination.

[ ] A JIS/Request for Assistance [SAPA §201-a(2)(c)] is attached.

C. A JIS is **not attached,** because this rule:

[ ] is subject to a consolidated JIS printed in the *Register* under I.D. No.: _____ - _____, issue date: _____.

[ ] is exempt, as defined in SAPA §102(2)(a)(ii) [Rate Making].

[ ] is proposed by the State Comptroller or Attorney General.

**AGENCY CERTIFICATION (To be completed by the person who PREPARED the notice.)**

I have reviewed this form and the information submitted with it. The information contained in this notice is correct to the best of my knowledge.

I have reviewed Article 2 of SAPA and Parts 260 through 263 of 19 NYCRR, and I hereby certify that this notice complies with all applicable provisions.

*Name* Camielle Barclay

*Address* One State Street, New York, NY 10004

*Telephone* (212) 480-5299 *E-Mail* camielle.barclay@dfs.ny.gov

*Date* 09/13/2016

Reset Form

**Please read before submitting this notice:**

1. Except for this form itself, all text must be typed in the prescribed format as described in the Department of State's Register procedures manual, *Rule Making in New York.*
2. Rule making notices with any necessary attachments should be e-filed via the Department of State website.