

**NEW YORK STATE
DEPARTMENT OF FINANCIAL SERVICES
PROPOSED
FIFTY-SECOND AMENDMENT TO 11 NYCRR 52
(INSURANCE REGULATION 62)**

**MINIMUM STANDARDS FOR FORM, CONTENT AND SALE OF HEALTH INSURANCE,
INCLUDING STANDARDS OF FULL AND FAIR DISCLOSURE**

I, Maria T. Vullo, Superintendent of Financial Services, pursuant to the authority granted by Sections 202 and 302 of the Financial Services Law and Sections 301, 1120, 3201, 3216(i)(17), 3217, 3217(d), 3217-g, 3221(l)(8), 4303(j), and 4306-f of the Insurance Law, do hereby promulgate the Fifty-Second Amendment to Part 52 of Title 11 of the Official Compilation of Codes, Rules and Regulations of the State of New York (Insurance Regulation 62), to take effect 60 days after publication of the Notice of Adoption in the State Register and to apply to all policies and contracts issued, renewed, modified or amended after that date, to read as follows:

(ALL MATERIAL IS NEW)

Section 52.1(r) is added as follows:

(r) It is the policy of this State that individuals have access to comprehensive preventive care services. A critical component of such comprehensive preventive care services is maternal depression screening and prompt referrals for treatment. Sections 52.17(a)(39) and 52.18(a)(14) of this Part make explicit that health insurance policies, including child health insurance plan policies, that cover maternal depression screening and prompt referrals for treatment must provide coverage under the mother's policy and under the policy in which the infant is covered as such services are an important preventive service for both the mother and the infant.

Section 52.17(a)(39) is added as follows:

(39) An insurer issuing a policy subject to the provisions of Insurance Law sections 1120, 3216(i)(17), 3217-g, 4303(j) or 4306-f or Public Health Law section 4406-f that provides coverage for direct access to screening and referral for maternal depression performed by a provider of obstetrical, gynecologic, or pediatric services of the mother's choice, shall provide coverage for the screening and referral for maternal depression under the mother's policy. However, if the infant is covered under a different policy than the mother and the screening and referral are performed by a provider of pediatric services, coverage for the screening and referral shall also be provided under the policy in which the infant is covered.

Section 52.18(a)(14) is added as follows:

(14) An insurer issuing a policy subject to the provisions of Insurance Law sections 3217-g, 3221(l)(8), 4303(j) or 4306-f or Public Health Law section 4406-f that provides coverage for direct access to screening and referral for maternal depression performed by a provider of obstetrical, gynecologic, or pediatric services of the mother's choice, shall provide coverage for the screening and referral for maternal depression under the mother's policy. However, if the infant is covered under a different policy than the mother and the screening and referral are performed by a provider of pediatric services, coverage for the screening and referral shall also be provided under the policy in which the infant is covered.