

**NEW YORK STATE
DEPARTMENT OF FINANCIAL SERVICES
FIFTY-SEVENTH 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, Linda A. Laceywell, Superintendent of Financial Services of the State of New York, pursuant to the authority granted by Sections 202 and 302 of the Financial Services Law and Sections 301, 3216, 3217, 3221, and 4303 of the Insurance Law, do hereby promulgate the Fifty-Seventh 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 upon filing with the Secretary of State, to read as follows:

(ALL MATERIAL IS NEW)

Section 52.16(p) is added as follows:

(p)(1) No policy or contract delivered or issued for delivery in this State that provides hospital, surgical, or medical expense insurance coverage shall impose, and no insured shall be required to pay, copayments, coinsurance, or annual deductibles for the following services when covered under the policy or contract:

(i) in-network laboratory tests to diagnose the novel coronavirus (COVID-19); and

(ii) visits to diagnose the novel coronavirus (COVID-19) at the following locations, including through telehealth: an in-network provider's office, an in-network urgent care center, any other in-network outpatient provider setting able to diagnose the novel coronavirus (COVID-19), or an emergency department of a hospital. Copayments, coinsurance, or annual deductibles may be imposed in accordance with the applicable policy or contract for any follow-up care or treatment for the novel coronavirus (COVID-19), including an inpatient hospital admission, as otherwise permitted by law.

(2) An insurer shall provide written notification to its in-network providers that they shall not collect any deductible, copayment, or coinsurance in accordance with this subdivision.



Department of Financial Services

ANDREW M. CUOMO
Governor

LINDA A. LACEWELL
Superintendent

CERTIFICATION

I, Linda A. Lacewell, Superintendent of Financial Services, do hereby certify that the foregoing is the Fifty-Seventh 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), entitled “Minimum Standards for Form, Content and Sale of Health Insurance, Including Standards of Full and Fair Disclosure,” signed by me on March 13, 2020, pursuant to the authority granted by Sections 202 and 302 of the Financial Services Law and Sections 301, 3216, 3217, 3221, and 4303 of the Insurance Law, to take effect upon filing of the Notice of Emergency Adoption with the Secretary of State.

Pursuant to Section 202(6) of the State Administrative Procedure Act, the Fifty-Seventh Amendment to 11 NYCRR 52 (Insurance Regulation 62) is being promulgated as an emergency measure. A statement of the specific reasons for the finding of the need for emergency action is attached.

Linda A. Lacewell
Superintendent of Financial Services

Date: March 13, 2020

**Statement of the Reasons for the Emergency Measure
Fifty-Seventh Amendment to 11 NYCRR 52
(Insurance Regulation 62)**

A novel coronavirus (“COVID-19”) was first detected in China and had not been previously found in humans. There are thousands of confirmed cases in China, and an increasing number of cases are being confirmed worldwide. Cases of COVID-19 have been confirmed in the United States, including New York. The Centers for Disease Control advised that COVID-19 seems to be spreading easily and sustainably in communities in affected areas. Given the public health implications of an increasing number of cases, it is essential that cost-sharing not serve as a barrier to testing for COVID-19. This amendment prohibits health care plans that provide hospital, surgical, or medical expense insurance policies or contracts from imposing, and provides that no insured shall be required to pay, copayments, coinsurance, or annual deductibles for covered in-network laboratory tests to diagnose COVID-19 and for visits to diagnose COVID-19 at the following locations, including through telehealth: an in-network provider’s office, an in-network urgent care center, any other in-network outpatient provider setting able to diagnose COVID-19, or an emergency department of a hospital. Copayments, coinsurance, or annual deductibles may be imposed in accordance with the applicable policy or contract for any follow-up care or treatment for COVID-19, including an inpatient hospital admission, as otherwise permitted by law. The amendment requires every health care plan to provide written notification of the requirements of the amendment to its in-network providers in order to ensure that the providers do not require any insured to pay a copayment, coinsurance, or annual deductible that is prohibited from being imposed under the amendment. This notification should ensure that providers do not collect a copayment, coinsurance, or annual deductible at any time, including when the services are provided, which is typically when such payment is collected.

Since the situation regarding COVID-19 is constantly evolving as the virus spreads across the United States, including New York, and to ensure that cost-sharing does not serve as a barrier to testing for COVID-19, it is imperative that this amendment be promulgated on an emergency basis for the preservation of public health.



Linda A. Lacewell
Superintendent of Financial Services

Dated: March 13, 2020