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, 3201, 3217, 3221, 4235, 4237, and 4303 of the Insurance Law, do hereby promulgate the Forty-Eighth 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)

Subdivision 52.1(p) is added as follows:

(p)(1) Subject to certain limited exceptions, Insurance Law section 3217 and regulations promulgated thereunder (section 52.16(c) of this Part) have long prohibited health insurance policies from limiting or excluding coverage based on type of illness, accident, treatment or medical condition. None of the exceptions apply to medically necessary abortions. As a result, insurance policies that provide hospital, surgical, or medical expense coverage are required to include coverage for abortions that are medically necessary.

(2) Section 52.16(o) of this Part makes explicit that group and blanket insurance policies that provide hospital, surgical, or medical expense coverage delivered or issued for delivery in this State shall not exclude coverage for medically necessary abortions. Section 52.16(o) of this Part also provides for an optional, limited exemption for religious employers as provided in that section while ensuring that coverage is maintained for any insured seeking a medically necessary abortion.

Subdivision 52.2(y) is added as follows:

(y) Religious employer means an entity for which each of the following is true:

(1) The inculcation of religious values is the purpose of the entity.

(2) The entity primarily employs persons who share the religious tenets of the entity.

(3) The entity serves primarily persons who share the religious tenets of the entity.

(4) The entity is a nonprofit organization as described in Section 6033(a)(2)(A)i or iii, of the Internal Revenue Code of 1986, as amended.
Subdivision 52.16(o) is added as follows:

(o)(1) No policy delivered or issued for delivery in this State that provides hospital, surgical, or medical expense coverage shall limit or exclude coverage for abortions that are medically necessary. Coverage for in-network abortions that are medically necessary shall not be subject to copayments, or coinsurance, or annual deductibles, unless the policy is a high deductible health plan as defined in section 223(c)(2) of the Internal Revenue Code in which case coverage for medically necessary abortions may be subject to the plan’s annual deductible.

(2) Notwithstanding any other provision of this Part, a group or blanket policy that provides hospital, surgical, or medical expense coverage delivered or issued for delivery in this State to a religious employer may exclude coverage for medically necessary abortions only if the insurer:

   (i) obtains an annual certification from the group or blanket policyholder or contract holder that the policyholder or contract holder is a religious employer and that the religious employer requests a contract without coverage for medically necessary abortions;

   (ii) issues a rider to each certificate holder (i.e., primary insured) at no premium to be charged to the certificate holder (i.e., primary insured) or religious employer for the rider, that provides coverage for medically necessary abortions subject to the same rules as would have been applied to the same category of treatment in the policy issued to the religious employer. The rider must clearly and conspicuously specify that the religious employer does not administer medically necessary abortion benefits, but that the insurer is issuing a rider for coverage of medically necessary abortions, and shall provide the insurer’s contact information for questions; and

   (iii) provides notice of the issuance of the policy and rider to the superintendent in a form and manner acceptable to the superintendent.
I, Maria T. Vullo, Superintendent of Financial Services, do hereby certify that the foregoing is the Forty-Eighth 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) signed by me on May 10, 2017 pursuant to the authority granted by Sections 202 and 302 of the Financial Services Law and Sections 301, 3201, 3217, 3221, 4235, 4237, and 4303 of the Insurance Law, to take effect 60 days after publication in the State Register.

Pursuant to the provisions of the State Administrative Procedure Act, prior notice of the proposed rule was published in the State Register on February 8, 2017. No other publication or prior notice is required by statute.

Date: June 5, 2017

Maria T. Vullo
Superintendent of Financial Services