

MEMO IN OPPOSITION

FOR IMMEDIATE RELEASE: FEBRUARY 28, 2006

Re: S.2759 (Spano)/A.1240 (Dinowitz)

An act to amend the Insurance Law and the Public Health Law, in relation to access to health care providers in managed care plans.

The New York Health Plan Association (HPA) **opposes S.2759/A.1240** because it requires health plans to allow physicians to treat certain patients even if the physician is no longer affiliated in the health plan's network or was never credentialed with the plan. This measure needlessly delays the proper and orderly transition of beneficiaries to a plan's panel of credentialed physicians while at the same time requires greater plan resources to administer coordinated care for patients. Furthermore, although treating providers would not be responsible for meeting plan protocols, health plans would still be held accountable for meeting myriad quality of care and operational standards mandated by law and regulation through a multitude of governmental agencies and accrediting organizations.

HPA also opposes **S.2759/A.1240** because it would require that a provider whose contract with a health plan is discontinued be allowed to treat persons with a "terminal illness or condition" for an unlimited period. Our concern is compounded by the bill's vague definition of "terminal illness or condition," and the fact that the provider called upon to determine whether the patient has a terminal condition may be none other than the physician whose health plan contract has been discontinued. This provision invites abuse of this exception by physicians wishing to hold on to these patients.

In 1997, New York's landmark Managed Care Act was enacted with the support of a wide spectrum of diverse interests. A portion of the act addressed issues related to provider continuity, both for newly enrolled members and in those cases when a provider became disaffiliated from the plan. When the Managed Care Act was developed, the negotiating parties, including the Medical Society of the State of New York, achieved a careful balance between allowing enrollees a reasonable transition period with existing providers and preserving the plan's ability to deliver quality care by maintaining the integrity of its provider panel. Since the passage of this legislation, there has been no demonstrated need to alter this careful balance at the risk of sacrificing quality care.

For all the reasons set forth above, HPA **OPPOSES S.2759/A.1240**.

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The New York Health Plan Association represents 31 managed care health plans that provide comprehensive health care services to nearly 6 million New Yorkers.