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# MEMORANDUM IN OPPOSITION

FOR IMMEDIATE RELEASE: JANUARY 22, 2021

Re: A.1523 (Pretlow)/S.2212 (Sepulveda) – An act to amend the public health law, in relation to prohibiting approved organizations in the child health insurance plan from limiting the participation of certain health care providers.

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This legislation, A.1523/S.2212, would prohibit health plans that administer the Child Health Plus program from requiring that participating health care providers also sign up for the commercial health care network operated by the insurer. The New York Health Plan Association (HPA) opposes this legislation because it is harmful to health plan members as it would remove important continuity of care protections when they move between products.

Health care networks are the foundation of health plans. Providing coverage through a network increases quality, enhances medical competency, and encourages greater coordination and collaboration by providers. In developing their networks, health plans also make sure they have the variety of primary care doctors, specialists, hospitals, and other providers that consumers need and can access in a variety of locations.

Health plan members regularly move between health plan products as their eligibility changes. Currently in New York there is substantial movement of members between commercial and Medicaid products. A key reason for allowing Prepaid Health Plans into the NY State of Health, the state's health exchange, was in recognition of the shifting membership based on income eligibility changes between Medicaid and Qualified Health Plan products or other commercial coverage. Prohibiting a health plan from requiring providers as a condition of participating in CHP to participate their commercial products, also is likely to confuse health plan members and make health care more difficult to navigate.

Further, access to the provider of their choice remains a strong consumer demand for health plan members, who expect that their health plans will make all reasonable efforts to reach agreements with provider groups. Moreover, while health plans generally require that providers participate in all benefit options, providers can and do negotiate over the financial terms that apply to their participation in different types of products. This provides ample incentive for health plans to bargain fairly with providers; they do not need an additional "helping hand" from the Legislature.

Sponsors of the legislation suggest that the bill is necessary to protect patients and ensure that providers are able to participate in the CHP program. In reality, this legislation is a *provider* protection bill that will result in less choice for health plan members.

For these reasons, HPA opposes A.1523/S.2212.

*The New York Health Plan Association represents 28 managed care health plans that provide comprehensive health care services to nearly 8 million New Yorkers.*