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**NEW YORK HEALTH PLAN ASSOCIATION ON MANDATED BENEFITS:
*Issue Brief Examines Health Insurance Mandates & the Cost Impact***

The New York Health Plan Association (HPA) today released a new issue brief, *The Hidden Cost of Mandated Benefits*, examining their impact on health insurance premiums and policy recommendations legislators should consider. Among the issues highlighted in the new brief:

- The number of **mandated benefits**, with New York requiring every health insurance policy to include or “make available” coverage for more than 45 specific treatments or services, while more than 90 bills mandating coverage for nearly 30 new services or provider types have been introduced in the current session;
- The **cost implications** as new mandates exacerbate the affordability challenges facing New York consumers, employers and labor unions; and
- Establishing a **state process to review the cost of new and existing mandated benefits** as outlined in legislation that Senate Insurance Chair Jamaal Bailey and Assembly Insurance Chair David Weprin (S.10080/A.8364-A) have introduced.

“Mandated benefits increase the cost of coverage for consumers, employers, union benefit funds and the state and runs counter to efforts to make health care more affordable,” said Eric Linzer, President and CEO of HPA. “Rather than piling on new mandates that will make health insurance more expensive for New Yorkers, the Legislature should follow the lead of more than 30 other states by establishing a review process to understand the impact on premiums as outlined in S.10080/A.8364-A.”

The issue brief is available on the HPA website at: <https://nyhpa.org/wp-content/uploads/2026/05/TFA-Mandated-Benefits-Final.pdf>