

2022-23 State Budget Proposals Comparison

Issue	Executive Budget	Assembly Budget	Senate Budget
Telehealth Payment Parity	Proposes payment parity for care provided via Telehealth; payments must be equal to what physicians receive for the same care provided in-person.	No language included on Telehealth payment parity in Assembly one house budget bill.	Modifies Exec. proposal & replaces with language from S.5505/A.6256.
Doctors Across NYS (DANYS)	Proposes an increase from \$9M to \$15.9M. Program provides loan forgiveness up to \$120,000 for physicians who work in underserved areas for three years. According to the Association of American Medical Colleges (AAMC), the average medical school debt for students who graduated in 2020 was \$200,000.	Same as Executive's proposal.	Same as Executive's proposal.
Insurance Coverage Expansion	<p>Proposal includes the following:</p> <ul style="list-style-type: none"> *Eligibility expansion for NY's Essential Plan from 200% of the Federal Poverty Level (FPL) to 250% FPL. *Elimination of premium for CHIP coverage for children 	Same as Executive's proposal.	Modifies Exec. Proposal to also add language to allow undocumented immigrants to enroll in Essential Plan.

	<p>in families between 160% FPL & 222% FPL.</p> <p>*Expansion of Medicaid coverage for postpartum care for up to one year after birth.</p> <p>*Increasing payment for Medicaid E&M codes to 70% of Medicare.</p> <p>*Restoration of the FY 2020-21 1.5% cut to Medicaid payment & a 1% increase across the board increase.</p>		
Prescriber Prevails	Proposed elimination of “prescriber prevails” protections for prescribing medication to patient in Medicaid & for several classes of prescriptions in Medicaid managed care.	Not included in one house Assembly budget.	Not included in one house Senate budget.
Surprise Billing Reforms (QPA)	Executive budget includes several proposals to update NY’s surprise bill law where required by federal No Surprises Act. However, it also includes a provision not required by NSA to expressly permit Independent Dispute Resolution (IDR) entity’s	Not included in one house Assembly budget.	Not included in one house Senate budget.

	consideration of insurer self-determined median Payments when arriving at IDR decisions for payment.		
Nurse Practitioner Collaborative Agreement	Proposes elimination of the statutory requirement for experienced primary care nurse practitioners (NPs) to maintain collaboration arrangements with a physician in the same specialty.	Permanently extends current law relative to NP Collaborative Agreements (Written agreements for NPs with less than 3,600 hours experience; more informal “collaborative arrangement” with physicians in same specialty for those with more than 3,600 hours experience.	Not included in the Senate one house budget. Prefer to have discussion outside of the Budget
Collaborative Drug Therapy	Extends existing law for 2 years.	Extends existing law 2 years.	Omits this provision entirely. Prefer to have discussion outside of the Budget
Scope Expansion for Pharmacists	Executive’s proposal would allow pharmacists to perform dozens of “limited services” lab test authorized by FDA, without any required coordination with patients’ treating physicians.	Not included in Assembly one house.	Not included in Senate one house. Prefer to have discussion outside of the Budget
Interstate Medical Licensure Compact	Adds NYS to list of states who have joined the Interstate Medical Licensure Compact	Not included in Assembly one house budget bill.	Included in Senate one house budget bill.
Transfer Oversight of Health Professionals from SED to DOH	Proposed transfer of oversight of all Education Law regulated health care	Not included in Assembly one house.	Included in Senate one house.

	providers from NYS Department of Education (SED) to NYS Department of Health (DOH).		
Restrictive Covenants	Proposed limitations on the use of Restrictive Covenants by employers. <i>MSSNY NOTE: While generally positive, proposal does not go far enough in preventing excessive post-employment limits often imposed on employed physicians that could harm continuity of care for patients.</i>	Not included in Assembly one house budget bill.	Not included in Senate one house budget bill.
Excess Medical Malpractice Insurance Program	Proposes \$102 million to fund state's Excess Medical Malpractice Insurance Program & Governor's "30-day Budget amendments" eliminated proposed requirement for physicians to purchase the coverage up front and then be reimbursed in 2 separate installments.	Rejects Exec. proposal for installment payments but accepts 1 year program extension.	Rejects Exec. proposal for installment payments but accepts 1 year program extension.