Regulatory Impact Statement for the amendment of Subpart 441 of Title 12 NYCRR

1. Statutory Authority: WCL §117(1) authorizes the Chair of the Workers’ Compensation Board (Board) to adopt reasonable rules consistent with, and supplemental to, the provisions of the WCL.

2. Legislative Objectives: The emergency adoption allows telemedicine visits in some circumstances due to the outbreak of COVID-19.

3. Needs and benefits: For social distancing purposes to avoid furthering the outbreak of COVID-19, the emergency adoption allows telemedicine visits in some circumstances to avoid in person visits to authorized providers when medically appropriate.

4. Costs: The emergency adoption will have no impact on costs.

5. Local government mandates: The proposed amendments do not impose any program, service, duty, or responsibility upon any county, city, town, village, school district, fire district, or other special district.

6. Paperwork: The emergency adoption requires authorized providers to indicate in their report that the services rendered were through telemedicine due to the outbreak of COVID-19.

7. Duplication: The emergency adoption does not duplicate other regulatory initiatives.

8. Alternatives: An alternative would be to not file an emergency adoption addressing telemedicine. However, this poses a health risk to both the authorized providers and the claimants being treated, and social distancing, where medically appropriate, is a better alternative due to the outbreak of COVID-19.

9. Federal standards. There are no applicable Federal Standards.

10. Compliance schedule: The emergency adoption takes effect immediately upon filing but does not require telemedicine – it offers it as a tool to assist with social distancing in some circumstances. Any provider rendering services using telemedicine must comply with the emergency adoption, including the reporting requirements.