



RMS End of Session Health/ Mental Hygiene Update June 27, 2018

The NYS Legislature wrapped up its 2018 session in the early morning hours of June 21st. Rather than focusing on what the Legislature did this session, most of the post mortem has been on what they did not take up. This includes failure to reach an agreement on extending the authority for NYC to continue to use speed cameras (without action the law will expire July 25th), no agreement on authorizing sports betting in NY, no reforms to teacher evaluations and lack of action on some local tax issues, among others. While rumors immediately began swirling about a possible return to Albany for a special session, top lawmakers have dismissed the idea.

In terms of what did get done, over four thousand bills were introduced during the legislative session and over 600 were passed by both houses of the Legislature. Provided below is a sector by sector health/ mental hygiene update of all bills passed by the Senate and Assembly. Most have not yet been transmitted to the Governor for consideration, however each bill's status is noted. To view the text or sponsor's memo for any of the following legislation, you can use the following link: <http://assembly.state.ny.us/leg/>

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Multiple Sectors

Alzheimer's and dementia locator technology information S5221-A Stavisky/A1118-A Rosenthal

This bill requires the State Department of Health, in conjunction with the Office for the Aging, the Department of Social Services, and the State Police to develop a list of businesses and other entities that manufacture, distribute or offer locator technology or services designed to assist in

expedited location of individuals with dementia. Such businesses may register with the Department of Health to be included on the list.

The Department of Health is required to notify all physicians licensed to practice in the State of the existence of the list and to make the list available to the general public through their website.

The bill passed both houses but has not yet been sent to the Governor for action.

Establishes a Lyme and tick-borne diseases working group S.7170-A Serino / A.8900-A Hunter

This bill establishes a Lyme and tick-borne diseases working group consisting of the commissioners of the Department of Health, Office of Mental Health, Environmental Conservation, as well as the Superintendent of Financial Services. Additionally, the Governor shall appoint six members to the working group, while the Temporary President of the Senate and Speaker of the Assembly shall each appoint three, and the minority leaders of the Senate and Assembly shall each appoint one. Among those appointed to the working group shall be an infectious disease specialist, a general practitioner, a mental health practitioner, an entomologist, and epidemiologist, a representative of health insurance providers and a representative of a tick-borne disease advocacy organization.

The working group will review current best practices for the diagnosis, treatment and prevention of Lyme and TBDs, and provide recommendations on improvements to the delivery of care, collaborations at the county, state, and federal level, data collection, reporting, and other issues as determined by the task force.

The working group will submit a report of their findings and recommendations by May 1, 2019.

This bill passed both houses. It has not yet been transmitted to the Governor.

Amends the mental hygiene law in relation to the geriatric service demonstration program to promote mental health and home care collaboration S8632 Ortt/A10938 Gunther

This legislation reinforces the goals of the state's mental health policies of prioritizing care in the community, and supporting the total range of patient needs required to maintain quality community life and avert exacerbations, emergencies, hospitalizations and potential long term institutionalization. Particularly as individuals in the mental health community age, their physical health needs become of equal or ever greater consequence to their health and care management.

By incorporating home care collaboration with mental health providers under the Geriatric Services Demonstration Program, this legislation can be a significant step not only in meeting the patient needs, but also in laying the broader groundwork for statewide policy and model development.

The bill passed both houses but has not yet been sent to the Governor for action.

Reexamination for fitness to drive a motor vehicle S8990 Young/A11121Carroll

This legislation authorizes the Department of Motor Vehicles (DMV) to require a driver to submit to DMV for a reexamination of their fitness to drive if the licensee experienced a loss of consciousness and was involved in a "reportable" motor vehicle or motorcycle accident. A "reportable" accident is one in which any person is killed or injured, or the damage to any one person or their property exceeds \$1000.

The bill requires a study to be completed in one year by DMV in consultation with the New York State Department of Health and the New York State Division of State Police that includes a review of DMV's process for reexamination of drivers, the methodologies by which DMV receives information that would establish reasonable grounds for the Commissioner of Motor Vehicles to believe that a person holding a license may not be qualified to drive due to chronic, ongoing conditions that may cause loss of consciousness, loss of awareness or loss of body control, and any impediments that inhibit the submission of reports by physicians, police officers, or others with information.

The bill passed both houses but has not yet been sent to the Governor for action.

Sexual assault victim bill of rights S8977 Hannon/A8401-C Simotas

This legislation would establish a Sexual Assault Victim Bill of Rights through the Department of Health, in consultation with the Division of Criminal Justice Services (DCJS), the Office of Victim Services, hospitals and other health care providers, and victim advocacy groups. The bill also establishes a Victim's Right to Notice about the status of their sexual offense evidence kit.

The bill passed both houses but has not yet been sent to the Governor for action.

Hospital/ Healthcare Facilities

Relates to Supervision of Clinical Laboratories S7521A Hannon/ A10781A Gottfried

This legislation requires clinical laboratories to have one or more supervisors under the general direction of the director, supervise personnel, report findings, perform tests requiring special scientific skills and in the absence of the director be responsible for lab performance and procedures. The bill states that the supervisor may be on site or available by phone or synchronous two-way electronic audio visual communications per DOH regulations. The supervisor may not supervise more than five laboratories.

This bill passed both houses but has not yet been sent to the Governor for action.

Relates to hospital policies for discharge of individual with a mental illness S8769 Ortt/ A10644 Gunther

This legislation requires OMH, in consultation with DOH, to develop educational materials on effective discharge planning for individuals with mental illness and provide them to general

hospitals to disseminate to individuals with, or at risk of a mental illness during discharge. Such materials shall include information related to various types of treatment and support services and other available resources. OMH and DOH shall also assist and provide guidance to hospitals regarding identification, assessment and referral of individuals with or at risk of mental illness, establishing and implementing training programs for all Title 8 (under education law) professionals providing direct, patient care, and ensuring that individuals are properly referred to mental health services if the hospital does not provide them.

This bill passed both houses but has not yet been sent to the Governor for action.

Relates to hospital standing orders for the care of newborns S8774B Hannon/ A9950B Gottfried

This legislation allows hospitals to establish non-patient specific standing orders for nurses to initiate upon the birth of a healthy newborn in their facility. Each hospital must establish the circumstances in which its order will and will not be implemented without a patient-specific order from the attending practitioner. All orders must comply with the nurse's scope of practice and all applicable regulations.

This bill passed both houses but has not yet been sent to the Governor for action.

Long Term Care

Physical therapy assistants home care services S8217 LaValle/A10381-A Pichardo

This legislation extends for four years, authority for physical therapy assistants to provide services in home care settings.

The bill passed both houses but has not yet been sent to the Governor for action.

Amends the social services law and public health law to authorize residents of assisted living programs to receive hospice services S8353A Hannon/A10459A Lupardo

The purpose of this legislation is to allow residents of an assisted living facility who are receiving Medicaid to be able to access hospice services while remaining in their assisted living facility. Current Medicaid policy prevents terminally ill Assisted Living Program residents from accessing hospice services, forcing many residents to transfer to a nursing home to receive hospice care.

The bill passed both houses but has not yet been sent to the Governor for action.

Amends the Elder Law to require the provision of guide containing best practices for retaining employees who are caregivers S8739 Sepulveda/A.3958 Dinowitz

Requires the provision of such guides and provides that such guide shall be available on the websites of the office for the Aging together with the Department of Health and Labor

The bill passed both houses but has not yet been sent to the Governor for action.

**Amends the elder law to conform to federal law and recent federal regulations S9002
Dilan/A.11050 Lupardo**

The purpose of this legislation is to bring the Elder Law in line with federal statute and newly promulgated federal regulations so that the state law that governs the Long-Term Care Ombudsman Program (LTCOP) is in conformance with the federal law and regulations that govern the LTCOP. The LTCOP is established in the Older Americans Act of 1965 (OAA) for the purpose of serving as a resource and advocate for residents of nursing homes, adult homes, assisted living facilities and family type homes. As required by the OAA, Ombudsmen work to identify, investigate, and resolve problems of individual residents and to bring about changes at the local, state and national levels that will improve residents' care and quality of life. The New York State Elder Law establishes the Office of the Long-Term Care Ombudsman within the New York State Office for the Aging and mirrors the objectives of the OAA. This legislation would bring the Elder Law in line with federal statute and the new regulations promulgated thereunder that govern the LTCOP. NYSOFA is compelled to have the Elder Law be in compliance and conformance with federal law and regulations. Failure by NYSOFA to achieve that compliance and conformance would jeopardize federal funding not only for the LTCOP, but for all OAA funded services administered by NYSOFA.

The bill passed both houses but has not yet been sent to the Governor for action.

Physicians/Healthcare Professionals

**Extends unpaid leave of absence for healthcare professionals fighting Ebola overseas
S.8757 Hannon / A.11020 Rules (Epstein)**

This bill extends the provision, set to expire on December 1, 2018, that provides healthcare professionals who volunteer to fight the Ebola virus overseas the right to seek an unpaid leave of absence without adverse employment consequences to December 1, 2021.

This bill passed both houses. It has not yet been transmitted to the Governor.

**Permits out-of-state physicians travelling with sports teams practice medicine in New York
S.4375-A Funke / A.7237-B Cusick**

This bill amends education law to allow any physician who is licensed and in good standing in any state within the US who meets a number of specific requirements, an exemption in order to temporarily practice medicine while traveling with a sports team at a sanctioned sporting event and five days before and three days after such event. These physicians will be subject to the same oversight and requirements of New York State physicians.

This bill passed both houses. It has not yet been transmitted to the Governor.

Relates to baccalaureate degree requirement for the practice of professional nursing S.7320 Flanagan / A.8952 Morelle

This bill allows the temporary commission on nursing program evaluation to make recommendations on the impacts of requiring a baccalaureate degree. The bill also adds a new temporary two-year exemption to requiring a baccalaureate degree for areas of the State where there is limited access to the requiring educational programming. Finally, the bill changes the effective date of requiring a baccalaureate degree from eighteen to thirty months from this act taking effect.

This bill passed both houses. It has not yet been transmitted to the Governor.

Amends the public health law, in relation to authorizing nurse practitioners to witness a health care proxy, act as a health care agent and determine competency of the principal of such a proxy S.7713-B Hannon/A10345-A Gottfried

This technical conforming legislation is necessary to align existing laws regarding health care proxies with Chapter 430 of the Laws of 2017, which pertains to nurse practitioner involvement in end of life issues such as determinations of capacity, as well as issuing orders not to resuscitate and other life sustaining treatments. This legislation would harmonize Article 29-C with the changes made in 2017 to Article 29-B, Article 29-CC, and Article 29-CCC.

The bill passed both houses but has not yet been sent to the Governor for action.

Relates to reports on nurse practitioners S7290 Hannon/ A8928 Gunther

This legislation is a chapter amendment which requires the Director of Classification and Compensation of the Department of Civil Service to thoroughly review the occupational category of nurse practitioner and determine if changes are needed to adequately reflect the positions' responsibilities and duties.

This bill was signed into law by the Governor on April 18, 2018, Chapter 17 of the laws of 2018.

Relates to mandatory continuing education for psychologists S7398A Valesky/ A9072A Fahy

This legislation requires psychologists to complete 36 hours of continuing education during each registration period. Three hours of which must be in the area of professional ethics. There is an exemption for psychologists for their first three years of practice and other waivers may be granted for certain circumstances by the State Education Department.

This bill passed both houses but has not yet been sent to the Governor for action.

Authorizes care of injured employees by an acupuncturist under the workers' comp program S6666 Amedore/ A2023A Bronson

This legislation authorizes the care and treatment of injured employees by a duly licensed and registered acupuncturist under the workers' compensation program and for such acupuncturists to be reimbursed for their services.

This bill passed both houses but has not yet been sent to the Governor for action.

Physical therapy assistants home care services S8217 LaValle/A10381-A Pichardo

This legislation extends for four years, authority for physical therapy assistants to provide services in home care settings.

The bill passed both houses but has not yet been sent to the Governor for action.

Emergency Technician five-year re-certification demonstration program S8158-A Seward/A10830 Stern

This legislation extends the five-year emergency technician re-certification program until 2023.

The bill passed both houses but has not yet been sent to the Governor for action.

Promotion of Emergency Medical Services supervisors S5118-B/A6990-A Abbate

This legislation provides that vacancies in the supervisory personnel of emergency medical services in the titles of Supervising Emergency Medical Service Specialist Level II (Captains), Deputy Chief, Division Chief, or Division Commander, and/or positions with equivalent duties and responsibilities, shall be filled by promotion from among employees holding competitive class positions in a lower grade in the department, and that such promotions must be based on merit and fitness examination.

The bill also provides that any employees holding a provisional or discretionary appointment on the date of enactment of the law shall be given the opportunity to participate in a competitive promotional examination for the next higher title.

The bill passed both houses but has not yet been sent to the Governor for action.

Relates to the appointment of members to and recommendations of the Rural Health Council S.7329 Hannon / A.8988 Jones

This bill provides to legislative leaders the authority for recommendations for Rural Health Council members and for the members to be appointed by the Governor. Further, it directs the Council to recommend cost effective ways to obtain timely data on the status of the healthcare workforce supply in rural areas and provides a longer window for reporting healthcare workforce by the Council to the Regional Economic Development Councils.

This bill was signed Chapter 43 of the Laws of 2018 on April 18, 2018.

Amends the insurance law extending the elimination of the requirement that the Medical Malpractice Insurance Pool offer a second layer of excess medical malpractice insurance coverage A 10613 Cymbrowitz/S8499 Seward

In 1999, legislation was passed to dissolve the Medical Malpractice Insurance Association ("MMIA"), the market of last resort for medical malpractice insurance (Chapter 407 of the laws of 1999). Upon MIA's dissolution, the MMIP was established as a source of medical malpractice insurance for health care providers who were unable to procure such insurance in the voluntary market. This legislation continue the exemption of MMIP from providing a second layer of coverage.

The bill passed both houses but has not yet been sent to the Governor for action.

Relates to sepsis awareness, prevention and education S7280 Marcellino/ A9001 Nolan

This legislation is a chapter amendment which clarifies that course work or training in infection control practices relates to infections that could lead to sepsis.

This bill was signed into law by the Governor on April 18, 2018, Chapter 10 of the laws of 2018.

Pharmacy/ Pharmaceuticals

Authorizing pharmacy interns to give immunizations S1043D Funke/ A2857D McDonald

This legislation allows pharmacy interns who have received required training and a certificate from the education department to administer the immunizations that pharmacists are currently permitted to give in New York State. Intern administration must be done under the immediate personal supervision of a licensed, immunizing pharmacist and the person receiving the vaccine shall be informed of the option to receive it from a certified pharmacist.

This bill passed both houses but has not yet been sent to the Governor for action.

Relates to reclassification of controlled substances by regulation S8275B Jacobs/ A10468B Ryan

This legislation authorizes DOH to reschedule a drug under New York State law through regulatory action if a drug is rescheduled by the federal government. Such authority will be limited to only be able to reclassify drugs to a new subdivision in the same numbered schedule or a higher numbered schedule than which to it is rescheduled under the federal act.

This bill passed both houses but has not yet been sent to the Governor for action.

Enacts the drug take back act S9100 Hannon/ A9576B Gunther

This legislation creates a statewide manufacturer stewardship for unused medication take back and safe disposal. Manufacturers are responsible for all administrative and operational fees

associated with the program including the cost of collecting, transporting and disposing of unused, unwanted medications (prescription and OTCs with some exceptions). Chain pharmacies with ten or more locations are required, under the bill, to facilitate drug disposal activities through a DEA-authorized method including an in-store collection box, mail back envelopes (by providing consumers with a voucher) or other approved method. In cities with more than 125,000 people (the big five), DOH shall establish by regulation a plan to ensure sufficient on-site collection boxes to ensure accessibility and program cost efficiency. Pharmacies shall display signage advertising drug collection to consumers. Take back by other authorized collectors on a voluntary basis shall also be paid for by manufacturer stewardship. Finally, there is a preemption clause in the bill preventing prior or future local laws on this matter.

This bill passed both houses but has not yet been sent to the Governor for action.

Public Health/ Human Services

Establishes the temporary state taskforce to study child abuse and neglect prevention S.7285 Golden / A.8945 Galef

The bill amends the name from the Temporary State Commission on Child Abuse and Neglect Prevention to The Temporary State Taskforce on Child Abuse and Neglect Prevention and increases the members of the taskforce from 9 to 13 members. The bill also includes evaluation of primary prevention programs in the report required by the Laws of 2017 originally establishing the Commission and extends the timeframe to complete such report.

This bill was signed Chapter 12 of the Laws of 2018 on April 18, 2018.

Relates to the establishment of human trafficking courts S.7836 Lanza / A.9870 Paulin

This bill allows any county outside of New York City the ability to move an action pending in a local criminal court for a felony and misdemeanor to a human trafficking court established by the Chief Administrator of the Courts where appropriate.

This bill passed both houses. It has not yet been transmitted to the Governor.

Establishes culturally competent short-term and long-term safe house facilities for victims of human trafficking S.8305 Golden / A.9566 Hevesi

This bill requires the Office of Temporary and Disability Assistance (OTDA) to enter into contracts with non-governmental organizations to provide short-term and long-term safe house facilities for victims of human trafficking.

The short-term safe houses will be a residential facility operated by not-for-profit agencies with experience in providing emergency shelter, services, and care to victims of human trafficking including food, shelter, clothing, medical care, counseling and crisis intervention.

The long-term residential facility will also be operated by a not-for-profit agency and will provide or assist these victims with services through either direct provision of services or through written agreements with other community and public agencies to provide services such as housing, assessment, case management, medical, legal, mental health, and substance use services. The long-term facility will also provide counseling, therapeutic, educational services such as life skills and job training, and placement and planning services to transition these victims back into the community.

Victims will not be prevented from being allowed to be placed in such safe houses regardless of any ongoing legal dispute.

This bill passed both houses. It has not yet been transmitted to the Governor.

Relates to the purchase of multivitamin-mineral dietary supplements with benefits through SNAP S.8453 Croci, S.9008 Flanagan / A.10697 Hevesi

This bill directs OTDA to apply for a waiver from the federal government so to allow for a program in New York whereby persons who wish, may use their Supplemental Nutrition Assistance Program (SNAP) benefits, towards the purchase of multivitamin-mineral dietary supplements.

This bill passed both houses. It has not yet been transmitted to the Governor.

Relates to a study on hepatitis C among inmate populations S.6322 Hoylman / A.8340 Weprin

This legislation directs the Commissioner of the Department of Corrections and Community Supervision (DOCCS), in consultation with DOH to undertake a study of the surveillance, prevention, treatment and prevalence of hepatitis C among the inmate population, and to identify any procedural, regulatory, legislative or budgetary obstacles to effective surveillance, prevention and/or treatment of hepatitis C.

This bill passed both houses. It has not yet been transmitted to the Governor.

Relates to rehabilitation programs for female inmates S.7281 Bailey / A.8959 Rozic

This bill requires that the Commissioner of DOCCS assure that an array of rehabilitation programs are provided to female inmates which are comparable to and not limited to vocational, academic and industrial programs provided to male inmates.

This bill passed both houses. It has not yet been transmitted to the Governor.

Relates to installing Lyme and tick-borne disease warning signs at all state-managed parks S.7242 Serino / A.8829 Barrett

This bill directs the Office of Parks, Recreation and Historic Preservation to install and maintain tick warning signs at all state-managed parks, including trail entryways and campgrounds. The signs will inform the public that ticks may be found in such areas and that they can spread Lyme or other tick borne diseases.

This bill passed both houses. It has not yet been transmitted to the Governor.

Amends the public health law, the insurance law and the workers' compensation law, in relation to enacting the "living donor protection act of 2018" S.2496B Hannon /S297-C Gunther

Ensures that New Yorkers receive reliable and accurate information about live organ donation and to ensure that those who donate are protected against insurance discrimination and benefit from paid family leave.

The bill passed both houses but has not yet been sent to the Governor for action.

Relates to newborn testing for cytomegalovirus S2816B Hannon/ A587C Rosenthal

This legislation requires urine polymerase chain reaction testing for cytomegalovirus in newborns with hearing impairments, unless a parent objects. Also, this bill adds a requirement for the Department of Health (DOH)'s health care and wellness education and outreach program to provide women who may become pregnant, are expecting or are new parents with information regarding cytomegalovirus, transmission, risks, diagnostic methods, available preventive measures and treatment methods and resources for families with children born with the condition.

This bill passed both houses but has not yet been sent to the Governor for action.

Amends the Workers Compensation Law to authorize family leave for bereavement S.8380A Funke/A10639A Morelle

This legislation includes time off for bereavement as a part of Paid Family Leave (PFL). It allows the use of PFL where (1) if a family member, as defined by current law, passes away suddenly then PFL may be taken for bereavement or (2) if PFL is used to take care of a family member and that family member passes away, any remaining PFL may be used as bereavement time.

Relates to smoking restrictions in child care facilities S7522A Hannon/A397B Gunther

This legislation prohibits smoking at all times in rooms of licensed or registered facilities that provide child care services in a private home.

This bill passed both houses but has not yet been sent to the Governor for action.

Relates to smoking restrictions and public libraries S169B Rivera/ A330B Dinowitz

This legislation would ban smoking within 100 feet of the entrances and exits of any public library.

This bill passed both houses but has not yet been sent to the Governor for action.

Prohibits the distribution of e-cigarettes to minors S1223 Akshar/ A8014 Rosenthal

This legislation states that no person engaged in the business of selling or distributing electronic cigarettes for commercial purposes may knowingly distribute without charge or sell them to those under the age of 18. Anyone appearing under the age of 25 but provide a driver's license or government issued form of identification.

This bill was signed into law by the Governor on April 18, 2018.

Establishes a NYS physical fitness and activity education campaign S8716 Sepulveda/ A4426 Cusick

This legislation establishes a New York State physical fitness and activity education campaign under the administration of DOH. Its purpose is to promote physical fitness and activity through the development and implementation of a public education and outreach campaign using social and mass media. The campaign will also recruit individuals to serve as public ambassadors to promote the message including professional and amateur athletes, fitness experts and celebrity advocates. The campaign will be statewide and focus on seniors, youth and those at- high risk for obesity.

This bill passed both houses but has not yet been sent to the Governor for action.

Relates to requirements for use of indoor tanning facilities S5585A Boyle/ A7218A Jaffee

This legislation makes changes to the existing law regulating the use of indoor tanning facilities to prevent anyone under the age of eighteen from being able to use them.

This bill passed both houses but has not yet been sent to the Governor for action.

Relates to DOH enforcement actions when areas of lead poisoning are designated S7295 Alcantara/ A8992 Dinowitz

This legislation is a chapter amendment which preserves the authority of DOH to retain flexibility in its enforcement of lead paint abatement in designated dwellings.

This bill was signed into law by the Governor on April 18, 2018, Chapter 20 of the laws of 2018.

Relates to the Crohn’s and colitis fairness act S7327 Hannon/ A8989 Paulin

This legislation is a chapter amendment which moves the provisions of the Crohn’s and colitis fairness act enacted in 2017 from the public health law to the general business law since it directs businesses to make employee restrooms available to the public.

This bill was signed into law by the Governor on April 18, 2018, Chapter 42 of the laws of 2018.

Relates to newborn health and safe sleep S7408 Hannon/A8957 Simotas

This legislation is a chapter amendment which amends the Newborn Health and Safe Sleep Pilot Program enacted in 2017 to start with a study. Under the study, DOH in consultation with healthcare providers, the Office of Children and Family Services (OCFS) and other stakeholders is required to look at how to enhance existing strategies to improve safe sleep practices and reduce infant mortality rates. Within 12 months of completing the study, DOH is required to conduct a pilot program to improve caregiver education and safe sleep practices in the areas of the State with high infant mortality rates.

This bill was signed into law by the Governor on April 18, 2018, Chapter 46 of the laws of 2018.

Relates to use of medical marijuana for pain management and substance use disorders S8987A Amedore/ A11011B Gottfried

This legislation adds “substance use disorder” and “pain that degrades health and functional capability” to the list of conditions eligible for medical marijuana for patients certified by physicians to have such conditions. The purpose is to provide medical marijuana as an alternative to the use of opioids.

This bill passed both houses but has not yet been sent to the Governor for action.

Amyotrophic Lateral Sclerosis (ALS) tax check-off and research fund S8582 Mayer/A398-A Gunther

This legislation would establish an ALS tax check-off on the New York State personal income tax form for contributions to be used for a newly created New York State Research and Education Fund.

The bill passed both houses but has not yet been sent to the Governor for action.

School-Based Health Center tax check-off S4487-B Montgomery/A2660-B Ortiz

This legislation would establish a tax check-off on the New York State personal income tax form to fund physical and mental health services at School-Based Health Centers. The bill passed both houses but has not yet been sent to the Governor for action.

Names Chapter 61 of the Laws of 2002 on requirements for Automated External Defibrillators (AED) the “Louis Acompora AED’s in Schools Act.” S8124 Marcellino A10369 Nolan

This bill names Chapter 61 of the Laws of 2002, the “Louis Acompora AED’s in Schools Act.” Chapter 61 was enacted in 2002 following the tragic death of Louis Acompora who died from sudden cardiac arrest after suffering a blow to his chest while playing his first high school lacrosse game. The law requires public school facilities to provide and maintain at least one AED on the premises.

The bill passed both houses but has not yet been sent to the Governor for action.

Behavioral Health

Provides education materials relating to substance abuse among students S.8318 Comrie / A.7470 Davila

This bill requires the Office of Alcoholism and Substance Abuse Services (OASAS), in consultation with the State Education Department, to develop or use existing educational materials regarding the misuse and abuse of alcohol, tobacco, prescription medication and other drugs that are prevalent among school aged youth. In addition, the bill requires each school district superintendent to designate an employee of the district to provide information to students, parents and staff regarding substance abuse services. Any information provided would be confidential except for instances where there is required reporting.

This bill passed both houses. It has not yet been transmitted to the Governor.

Requires OASAS to maintain a directory on their website S.8552 Golden / A.8151 Rosenthal L

This bill requires that OASAS maintain a database of searchable information of all providers and programs operated. This database would include the location of providers, contact information, services provided, special populations served, types of insurance accepted, availability of treatment beds, and any other information the commissioner deems necessary.

This bill passed both houses. It has not yet been transmitted to the Governor.

Relates to raising awareness of maternal depression S.7409 Krueger / A.8953 Richardson

This bill requires the Commissioner of the Department of Health (DOH) in consultation with the Commissioner of the Office of Mental Health (OMH) to inform providers of the need to raise awareness about maternal depression. In addition, this bill eliminates the requirement for DOH to provide an online list of providers who treat or provide support for maternal depression in favor of a broader requirement that the DOH and OMH websites provide information on how to locate available providers, including but not limited to mental health professionals, other licensed professionals, peer support, not-for-profit corporations and other community resources.

This bill was signed Chapter 62 of the Laws of 2018 on June 1, 2018.

**Requires development of educational material regarding suicide prevention S5860A
Ritchie/ A3210A Ortiz**

This legislation requires the Office of Mental Health (OMH) to develop educational materials for educators affiliated with any NYS university, community college or city university regarding depression and suicide prevention.

This bill passed both houses but has not yet been sent to the Governor for action.

Relates to the prevention of suicide S7322 Alcantara/ A8961 De La Rosa

This legislation is a chapter amendment which adds suicide research, prevention and reduction to the scope of responsibility of the Office of Mental Health (OMH). The bill makes it the responsibility of OMH to assure the development of plans, programs and services in the area of research and prevention of suicide, to reduce suicidal behavior and suicide through consultation, training, evidence-based practices and surveillance data. Such plans shall consider the needs of differing demographic groups and be development in cooperation with other agencies, organizations and individuals.

This bill passed both houses but has not yet been sent to the Governor for action.

**Relates to hospital policies for discharge of individual with a mental illness S8769 Ortt/
A10644 Gunther**

This legislation requires OMH, in consultation with DOH, to develop educational materials on effective discharge planning for individuals with mental illness and provide them to general hospitals to disseminate to individuals with, or at risk of a mental illness during discharge. Such materials shall include information related to various types of treatment and support services and other available resources. OMH and DOH shall also assist and provide guidance to hospitals regarding identification, assessment and referral of individuals with or at risk of mental illness, establishing and implementing training programs for all Title 8 (under education law) professionals providing direct, patient care, and ensuring that individuals are properly referred to mental health services if the hospital does not provide them.

This bill passed both houses but has not yet been sent to the Governor for action.

**Provides a tick-borne diseases and blood-borne pathogen mental health impact study
S.7171-A Serino / A.9019-A Gunther**

This bill requires the DOH to issue in conjunction with OMH a report examining the mental health impacts of tick-borne diseases and blood-borne pathogens on mental illness rates in endemic areas of the state. The report shall include but not be limited to: considerations of the correlation between Lyme and other tick-borne illnesses, blood-borne pathogens or vector-borne

diseases may have with mental illness; at-risk populations; diagnostic indicators of mental illness; historic consideration of infection rates and illness indicators; and recommendations for intervention and coordinated care for infected individuals.

This bill passed both houses. It has not yet been transmitted to the Governor.

Establishes the mental health and substance use parity report act S1156C Ortt/ A3694C Gunther

This legislation requires the Superintendent of the Department of Financial Services (DFS), beginning September 1, 2019 and annually thereafter, to include in the annual consumer guide a mental health and substance use disorder parity report. The report shall detail each insurance company's compliance with federal and state parity laws based on the company's record during the preceding calendar year. The following information shall be included in the report:

- Rates of utilization review for mental health (MH) and substance use disorder (SUD) claims as compared to medical and surgical claims, including rates of approval and denial and categorized by benefits (inpatient in-network, inpatient out-of-network, outpatient in-network, outpatient out-of-network, emergency care and prescription drugs);
- Number of prior or concurrent authorization requests for MH and SUD services and the number of denials for such requests, compared with the number of requests/denials for medical and surgical services;
- Rates of appeals of adverse determinations, including rates of those upheld and overturned for MH and SUD claims compared with the rates of appeals of adverse determinations and those upheld/overturned for medical and surgical claims;
- Percentage of claims paid for in-network MH and SUD services compared with the percentage of claims paid for in-network medical and surgical services and the percentage of claims paid for out-of-network MH and SUD services compared with out-of-network medical and surgical services;
- Number of behavioral health advocates available to assist policyholders with MH and SUD benefits;
- Comparison of the cost sharing requirements and benefit limitations including limits on scope/duration of coverage for medical and surgical services, and MH and SUD services;
- Number by type of providers licensed in NY that provider services for the treatment and diagnosis of SUD who are in-network as well as the number by type of providers of services for diagnosis and treatment of mental, nervous or emotional disorders and ailments, defined in a company's policy, who remained participating providers;
- Percentage of providers of SUD services who remained participating providers as well as the percentage of providers of services for diagnosis and treatment of mental, nervous or emotional disorders and ailments, defined in a company's policy, who remained participating providers; and
- Any other data or metric that DFS deems necessary to measure compliance with parity laws including but not limited to the adequacy of the company's in-network MH and SUD services provider panels and the company's reimbursement for in-network and out-of-network MH and SUD services compared to reimbursement for in-network and out-of-network medical and surgical services.

This bill passed both houses but has not yet been sent to the Governor for action.

**Prohibits certain practices by substance use disorder (SUD) service providers S6544B
Akshar/ A7689A Rosenthal (OASAS Departmental Bill #62)**

This legislation would prohibit any individual, addiction professional, credentialed professional, health care provider, facility or substance abuse program from giving or receiving a commission, bonus, rebate or kickback directly or indirectly to induce the referral of a potential service recipient in connection with performing SUD services. The purpose is to prohibit “patient brokers” in this field.

This bill passed both houses but has not yet been sent to the Governor for action.

**Relates to notice of potential service reductions at certain state-operated hospitals S7207
Ortt/ A9563A Gunther**

This legislation requires that notice to local governments of the potential for significant service reductions at state operated hospitals and state operated research institutes under mental hygiene law be at least 12 months and at most 24 months prior to commencing such service reductions.

This bill passed both houses but has not yet been sent to the Governor for action.

Developmental Disabilities/ Education

Disability identification card S2565-C Helming/A249-C Santabarbara

This legislation would allow individuals and parents of children with a developmental disability to receive an optional identification card to relay important information regarding their disability and a name and phone number of an individual designated by the card bearer to be contacted in case of emergency.

The bill passed both houses but has not yet been sent to the Governor for action.

Small business tax credit for disabled persons S3688-A Addabbo/A1369-A Cusick

This legislation authorizes a small business tax credit for employers who have 100 employees or less for each disabled person hired during the tax year, provided that such disabled person is employed for 35 hours or more per week and remains employed for 12 months or more. The amount of credit must equal \$5000 per employee, not to exceed \$25,000.

The bill passed both houses but has not yet been sent to the Governor for action.

Office of People with Developmental Disabilities (OPWDD), outsourcing Individualized Residential Alternatives (IRAs) S8200 Marcellino/A10442 Gunther

This legislation would prohibit OPWDD from changing the auspice of a state-operated individualized residential alternative. It is intended to prevent OPWDD from changing the operator of an IRA from the State to a private entity.

The bill passed both houses but has not yet been sent to the Governor for action.

**Autism Spectrum Advisory Board, outreach to minority populations S5534-A
Hamilton/A7976 De La Rosa**

This legislation would require the Autism Spectrum Advisory Board to identify strategies and methods of improving outreach and coordination of services associated with autism spectrum disorders for minority group members including, but not limited to, African American, Latino and Asian children.

The bill passed both houses but has not yet been sent to the Governor for action.

**Autism screening for children three years of age and under S8955 Ortt/A9868-A
Santabarbara**

This legislation would require the State Commissioner of Health to include developmental screening for children age three or younger in best practice protocols for screening of children for autism spectrum disorders and to update the protocols on a biennial basis.

The bill passed both houses but has not yet been sent to the Governor for action.

Extension: state conformance with federal Individuals with Disabilities Education Act (IDEA) S8331 Marcellino/A10472 Lifton

Extends for 3 years provisions of the State Education law to conform with the federal Individuals with Disabilities Education Act of 2004 in order to ensure continued compliance with federal law.

The bill passed both houses but has not yet been sent to the Governor for action.

Early Intervention Coordinating Council (EICC) and Maternal Child Health Services Block Grant (MCHSBG) meeting quorum S 8392-A Hannon/A10675 Gottfried

This legislation, introduced at the request of the State Department of Health, would allow the EICC and MCHSBG to reach a meeting quorum based on a majority of the number of members appointed, instead of a majority of the number of members required to be appointed to these bodies. In addition, the bill would allow the EICC members who are legislators to appoint a designee to represent them on the Council.

The bill passed both houses but has not yet been sent to the Governor for action.

**Extends authority of school psychologists to conduct multidisciplinary evaluations of children in 4410 preschool programs and the Early Intervention (EI) program S7641
LaValle/A9918 Glick**

This legislation extends authority of school psychologists to conduct multidisciplinary evaluations of children in 4410 preschool programs and the EI program from June 30, 2018 to June 30, 2020.

This bill was signed by the Governor on June 1, 2018, Chapter 68 of the Laws of 2018.

Child abuse reporting in educational settings S7372-B Gallivan/A8485-B Nolan

This legislation amends existing law related to reporting of child abuse in educational settings to include private schools which were previously exempt and to extend reporting requirements to licensed and registered speech-language pathologists, licensed and registered physical therapists, teacher's aides, school resource officers, school bus drivers, and the school bus driver's supervisors. In addition, on and after July 1, 2019, those who are required to report are also required to complete two hours of training regarding child abuse, including but not limited, information regarding the physical and behavioral indicators of child abuse maltreatment and their obligations under the law to provide such reports.

The bill passed both houses but has not yet been sent to the Governor for action.

Relates to calculation of school aid for nonpublic schools S8175 Marcellino/ A9903 Cusick

This legislation clarifies that the State Education Department may continue to utilize the instructional time standard as the basis for providing reimbursement to nonpublic schools for their participation in the mandated services aid program.

This bill passed both houses but has not yet been sent to the Governor for action.

Insurance

Clarifies the original intent of Hannah's Law to ensure coverage of enteral formula S.8924 Seward / A.11043 Rules (Stern)

This bill amends insurance law to clarify that any insurance policy which covers prescription drugs shall also cover oral and feeding-tube administered enteral formulas, which are deemed medically necessary by a licensed healthcare practitioner per written medical order.

This bill passed both houses. It has not yet been transmitted to the Governor.

Relates to notice of determination of eligibility for medical assistance S.7328 Ortt / A.9004 Gottfried

This bill repeals paragraph f of subdivision 5 of section 366 of the social services law relating to notification of eligibility for medical assistance as amended by the laws of 2017 and adds a new clause in subdivision 2 of the section which require the department of health to provide written to notice applicants for medical assistance who may have income in excess of that required to qualify for Medicaid and the availability of special needs trusts.

This bill passed both houses. It has not yet been transmitted to the Governor.

**Prohibits patient cost sharing for diagnostic screening for prostate cancer S6882A Tedisco/
A8683A Gottfried**

This legislation requires policies and contracts covering diagnostic screening for prostate cancer shall not be subject to patient cost sharing. This applies to men 40 and over with a family history, and men 50 and over who are asymptomatic.

This bill passed both houses but has not yet been sent to the Governor for action.