

3137--B

2013-2014 Regular Sessions

I N   S E N A T E

January 30, 2013

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Introduced by Sen. KRUEGER -- read twice and ordered printed, and when printed to be committed to the Committee on Health -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee

AN ACT to amend the public health law and the insurance law, in relation to developing a maternal depression screening and referral plan for the state, and providing maternal depression education

THE PEOPLE OF THE STATE OF NEW YORK, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

1     Section 1. The public health law is amended by adding a new section  
2     2500-k to read as follows:  
3     S 2500-K. MATERNAL DEPRESSION. 1. DEFINITIONS. AS USED IN THIS  
4     SECTION:  
5     (A) "MATERNAL DEPRESSION" MEANS A WIDE RANGE OF EMOTIONAL AND PSYCHO-  
6     LOGICAL REACTIONS A WOMAN MAY EXPERIENCE DURING PREGNANCY OR AFTER  
7     CHILDBIRTH. THESE REACTIONS MAY INCLUDE, BUT ARE NOT LIMITED TO, FEEL-  
8     INGS OF DESPAIR OR EXTREME GUILT, PROLONGED SADNESS, LACK OF ENERGY,  
9     DIFFICULTY CONCENTRATING, FATIGUE, EXTREME CHANGES IN APPETITE, AND  
10    THOUGHTS OF SUICIDE OR OF HARMING THE BABY. MATERNAL DEPRESSION MAY  
11    INCLUDE PRENATAL DEPRESSION, THE "BABY BLUES," POSTPARTUM DEPRESSION, OR  
12    POSTPARTUM PSYCHOSIS-THE SEVEREST FORM.  
13    (B) "MATERNAL HEALTH CARE PROVIDER" MEANS A PHYSICIAN, MIDWIFE, NURSE  
14    PRACTITIONER, OR PHYSICIAN ASSISTANT, OR OTHER HEALTH CARE PRACTITIONER  
15    ACTING WITHIN HIS OR HER LAWFUL SCOPE OF PRACTICE, ATTENDING A PREGNANT  
16    WOMAN OR A WOMAN UP TO ONE YEAR AFTER CHILDBIRTH, INCLUDING A PRACTI-  
17    TIONER ATTENDING THE WOMAN'S CHILD UP TO ONE YEAR AFTER CHILDBIRTH.  
18    2. MATERNAL DEPRESSION SCREENING. (A) THE COMMISSIONER, IN CONSULTA-  
19    TION WITH THE COMMISSIONER OF MENTAL HEALTH, SHALL ESTABLISH  
20    EVIDENCE-BASED GUIDELINES FOR MATERNAL DEPRESSION SCREENING FOR USE BY  
21    MATERNAL HEALTH CARE PROVIDERS AND PEDIATRIC PRIMARY CARE PROVIDERS. IN

EXPLANATION--Matter in *ITALICS* (underscored) is new; matter in brackets [ ] is old law to be omitted.

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DEVELOPING GUIDELINES UNDER THIS SECTION, THE COMMISSIONER AND THE COMMISSIONER OF MENTAL HEALTH SHALL CONSULT APPROPRIATE MATERNAL HEALTH CARE PROVIDERS. SUCH GUIDELINES SHALL INCLUDE, BUT NOT BE LIMITED TO:

(I) THE IDENTIFICATION OF SUGGESTED VALIDATED, EVIDENCE-BASED DIAGNOSTIC TOOLS TO BE USED FOR MATERNAL DEPRESSION SCREENING;

(II) THE ROUTINE EMPLOYMENT OF VALIDATED, EVIDENCE-BASED MATERNAL DEPRESSION SCREENING TOOLS AT REGULAR INTERVALS DURING PREGNANCY AND AFTER CHILDBIRTH; AND

(III) AN APPROPRIATE REFERRAL MECHANISM FOR PATIENTS WHO REQUIRE FURTHER EVALUATION, SERVICES, OR TREATMENT.

(B) MATERNAL DEPRESSION SCREENING AND REFERRAL MAY INCLUDE COMMUNICATION WITH THE FATHER OF THE CHILD AND OTHER FAMILY MEMBERS, AS APPROPRIATE AND CONSISTENT WITH PATIENT CONFIDENTIALITY.

3. REFERRALS FOR MATERNAL DEPRESSION TREATMENT. THE COMMISSIONER SHALL MAKE AVAILABLE A LIST OF PROVIDERS FOR TREATMENT OF MATERNAL DEPRESSION, INCLUDING SUPPORT GROUPS AND SERVICES PROVIDED BY NOT-FOR-PROFIT ORGANIZATIONS.

4. THE COMMISSIONER SHALL MAKE ANY REGULATIONS NECESSARY TO IMPLEMENT THIS SECTION.

S 2. Subdivision 1 of section 207 of the public health law is amended by adding a new paragraph (i) to read as follows:

(I) MATERNAL DEPRESSION, INCLUDING EDUCATION, SCREENING, REFERRAL SERVICES, AND POSSIBLE OPTIONS FOR TREATMENT.

S 3. Subdivision 1 of section 2803-j of the public health law, as amended by chapter 62 of the laws of 1996, is amended to read as follows:

1. The commissioner shall require that every hospital and birth center shall prepare in printed or photocopied form and distribute at the time of pre-booking directly to each prospective maternity patient and, upon request, to the general public an informational leaflet. Such leaflet shall be designed by the commissioner and shall contain brief definitions of maternity related procedures and practices as specified in subdivision two of this section and such other material as deemed appropriate by the commissioner. Hospitals and birth centers may also elect to distribute additional explanatory material along with the maternity patients informational leaflet. THE COMMISSIONER SHALL MAKE THE INFORMATION LEAFLETS AVAILABLE ON THE DEPARTMENT'S WEBSITE.

S 4. Subdivision 1-b of section 2803-j of the public health law, as added by chapter 647 of the laws of 1997, is amended to read as follows:

1-b. The informational leaflet shall also include information relating to the physical and mental health of the maternity patient after discharge from the hospital, including, but not limited to, information about MATERNAL AND post-partum depression. THE COMMISSIONER SHALL PERFORM A REVIEW OF INFORMATION ON MATERNAL AND POST-PARTUM DEPRESSION IN INFORMATIONAL LEAFLETS, IN COLLABORATION WITH THE COMMISSIONER OF MENTAL HEALTH, TO EVALUATE THE CONTENTS FOR ADDRESSING ALL FORMS OF MATERNAL AND POST-PARTUM DEPRESSION, AND IDENTIFYING RESOURCES FOR OBTAINING HELP FOR THE PATIENTS AND THEIR FAMILIES. ALL INFORMATION ON MATERNAL AND POST-PARTUM DEPRESSION IN INFORMATIONAL LEAFLETS SHALL BE MADE AVAILABLE TO PATIENTS IN THE TOP SIX LANGUAGES SPOKEN IN THE STATE, OTHER THAN ENGLISH, ACCORDING TO THE LATEST AVAILABLE DATA FROM THE UNITED STATES CENSUS BUREAU.

S 5. Paragraph (b) of subdivision 1 of section 2803-n of the public health law, as added by chapter 56 of the laws of 1996, is amended to read as follows:

(b) Maternity care shall also include, at minimum, parent education, assistance and training in breast or bottle feeding, EDUCATION ON MATERNAL DEPRESSION AND MATERNAL DEPRESSION SCREENING AND REFERRAL, and the performance of any necessary maternal and newborn clinical assessments. Notwithstanding this requirement, nothing in this paragraph is intended to result in the hospital charging any amount for such services in addition to the applicable charge for the maternity inpatient hospital admission.

S 6. Item (ii) of subparagraph (A) of paragraph 10 of subdivision (i) of section 3216 of the insurance law, as added by chapter 56 of the laws of 1996, is amended to read as follows:

(ii) Maternity care coverage shall also include, at minimum, parent education, assistance and training in breast or bottle feeding, EDUCATION ON MATERNAL DEPRESSION AND MATERNAL DEPRESSION SCREENING AND REFERRAL, and the performance of any necessary maternal and newborn clinical assessments.

S 7. Item (ii) of subparagraph (A) of paragraph 5 of subsection (k) of section 3221 of the insurance law, as added by chapter 56 of the laws of 1996, is amended to read as follows:

(ii) Maternity care coverage shall also include, at minimum, parent education, assistance and training in breast or bottle feeding, EDUCATION ON MATERNAL DEPRESSION AND MATERNAL DEPRESSION SCREENING AND REFERRAL, and the performance of any necessary maternal and newborn clinical assessments.

S 8. Subparagraph (B) of paragraph 1 of subsection (c) of section 4303 of the insurance law, as amended by chapter 661 of the laws of 1997, is amended to read as follows:

(B) Maternity care coverage also shall include, at minimum, parent education, assistance and training in breast or bottle feeding, EDUCATION ON MATERNAL DEPRESSION AND MATERNAL DEPRESSION SCREENING AND REFERRAL, and the performance of any necessary maternal and newborn clinical assessments.

S 9. The insurance law is amended by adding a new section 3217-g to read as follows:

S 3217-G. MATERNAL DEPRESSION SCREENINGS. NO INSURER SUBJECT TO THIS ARTICLE SHALL BY CONTRACT, WRITTEN POLICY OR PROCEDURE LIMIT A PATIENT INSURED'S DIRECT ACCESS TO SCREENING AND REFERRAL FOR MATERNAL DEPRESSION FROM A PROVIDER OF OBSTETRICAL, GYNECOLOGIC, OR PEDIATRIC SERVICES.

S 10. This act shall take effect on the one hundred eightieth day after it shall have become a law; provided that (a) sections six, seven, eight and nine of this act shall apply to contracts entered into, amended or delivered on or after the first of January after this act becomes a law; and (b) effective immediately, the addition, amendment and/or repeal of any rule or regulation necessary for the implementation of this act on its effective date is authorized and directed to be made and completed by the commissioner of health on or before such effective date.