STATE OF NEW YORK

5229

2025-2026 Regular Sessions

IN ASSEMBLY

February 12, 2025

Introduced by M. of A. SOLAGES -- read once and referred to the Committee on Health

AN ACT to amend the public health law, in relation to establishing a blood clot and pulmonary embolism policy workgroup; and providing for the repeal of such provisions upon expiration thereof

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

Section 1. Section 206 of the public health law is amended by adding a new subdivision 32 to read as follows:

32. (a) The commissioner shall establish a blood clot and pulmonary embolism policy workgroup. The workgroup shall be composed of health care providers, patients who have experienced blood clots, family members of patients who have died from blood clots, advocates, and other interested parties and associations. The governor, the temporary president of the senate and the speaker of the assembly shall each appoint two members to the workgroup. The commissioner shall appoint the chair of the workgroup.

(b) Members of the workgroup shall receive no compensation for their services, but may be paid their actual and necessary expenses incurred in serving the workgroup.

(c) It shall be the duty of the workgroup to study and issue recommendations pertaining to the incidence and treatment of blood clots and pulmonary embolisms within the state. The workgroup shall:

(i) Identify the aggregate number of people who experience blood clots and pulmonary embolisms each year in this state.

(ii) Identify how data is collected regarding blood clots, pulmonary embolisms, and adverse health outcomes associated with these conditions.

(iii) Identify how blood clots and pulmonary embolisms impact the lives of people in this state.

(iv) Identify the standards of care for blood clot surveillance, detection, and treatment.

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

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(v) Identify emerging treatments, therapies, and research relating to blood clots.

(vi) Develop a risk surveillance system to help health care providers identify patients who may be at a higher risk of forming blood clots and pulmonary embolisms.

(vii) Develop policy recommendations to help improve patient awareness of blood clot risks.

(viii) Develop policy recommendations to help improve surveillance and detection of patients who may be at a higher risk of forming blood clots in licensed health care facilities, including hospitals, nursing homes, assisted living facilities, residential treatment facilities, and ambulatory surgical centers.

(ix) Develop policy recommendations relating to guidelines used that affect the standard of care for patients at risk of forming blood clots.

(x) Develop policy recommendations relating to providing patients and their families with written notice of increased risks of forming blood clots.

(d) The chair is authorized to create subcommittees to help with research, scheduling speakers on important subjects, and drafting a workgroup report and policy recommendations.

(e) No later than one year after the effective date of this subdivision, the workgroup shall submit their recommendations in the form of a written report to the commissioner, the speaker of the assembly, the temporary president of the senate, the minority leader of the assembly and the minority leader of the senate.

(f) Upon receipt of the workgroup's report, the commissioner shall publish such recommendations on the department's website.

§ 2. This act shall take effect on the ninetieth day after it shall have become a law and shall expire and be deemed repealed two years and ninety days after it shall have become a law.