

S T A T E O F N E W Y O R K

S. 6993

A. 10094

S E N A T E - A S S E M B L Y

March 4, 2010

IN SENATE -- Introduced by Sen. HASSELL-THOMPSON -- read twice and ordered printed, and when printed to be committed to the Committee on Health

IN ASSEMBLY -- Introduced by M. of A. N. RIVERA -- read once and referred to the Committee on Health

AN ACT to amend the public health law, in relation to information and access to reconstructive surgery following breast cancer surgery

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

1 Section 1. Section 2803-o of the public health law, as added by chap-
2 ter 20 of the laws of 1997, is amended to read as follows:
3 S 2803-o. Hospital care for mastectomy, lumpectomy, and lymph node
4 dissection patients. 1. When a general hospital provides mastectomy
5 surgery, lymph node dissection or a lumpectomy, inpatient care shall be
6 offered for a period as determined by the attending physician in consul-
7 tation with the patient to be medically appropriate.
8 2. (A) EVERY GENERAL HOSPITAL THAT PROVIDES MASTECTOMY SURGERY, LYMPH
9 NODE DISSECTION OR A LUMPECTOMY SHALL PROVIDE INFORMATION TO THE PATIENT
10 CONCERNING THE OPTION OF RECONSTRUCTIVE SURGERY FOLLOWING SUCH PROCE-
11 DURES, INCLUDING THE AVAILABILITY OF COVERAGE FOR RECONSTRUCTIVE
12 SURGERY, IN ACCORDANCE WITH THE PROVISIONS OF SECTIONS THREE THOUSAND
13 TWO HUNDRED SIXTEEN, THREE THOUSAND TWO HUNDRED TWENTY-ONE AND FOUR
14 THOUSAND THREE HUNDRED THREE OF THE INSURANCE LAW AND APPLICABLE
15 PROVISIONS OF FEDERAL LAW. THE INFORMATION SHALL BE PROVIDED TO THE
16 PATIENT IN WRITING AND IN ADVANCE OF OBTAINING HER CONSENT TO THE SURGI-
17 CAL PROCEDURE. THE INFORMATION PROVIDED SHALL INCLUDE AT LEAST THE
18 FOLLOWING:
19 (I) A DESCRIPTION OF THE VARIOUS RECONSTRUCTIVE OPTIONS THAT EXIST
20 POST-SURGERY AND THE ADVANTAGES AND DISADVANTAGES OF EACH;
21 (II) A DESCRIPTION OF THE PROVISIONS ASSURING COVERAGE BY PUBLIC AND
22 PRIVATE INSURANCE PLANS OF THE COSTS RELATED TO POST-SURGERY RECONSTRUC-
23 TIVE SURGERY UNDER FEDERAL AND STATE LAW;

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

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1 (III) A DESCRIPTION OF HOW A PATIENT MAY ACCESS RECONSTRUCTIVE CARE,
2 INCLUDING THE POTENTIAL OF TRANSFERRING CARE TO A FACILITY THAT PROVIDES
3 RECONSTRUCTIVE CARE OR CHOOSING TO PURSUE RECONSTRUCTION AFTER
4 COMPLETION OF BREAST CANCER SURGERY AND CHEMO/RADIOTHERAPY, IF
5 WARRANTED;
6 (IV) SUCH OTHER INFORMATION AS MAY BE REQUIRED BY THE COMMISSIONER.
7 (B) THE FAILURE BY A GENERAL HOSPITAL TO PROVIDE THE REQUIRED INFORMA-
8 TION MAY SUBJECT THE GENERAL HOSPITAL TO ENFORCEMENT AND CORRECTIVE
9 ACTION IN ACCORDANCE WITH THE PROVISIONS OF THIS ARTICLE BUT SHALL NOT
10 SERVE AS THE BASIS FOR ANY OTHER CIVIL LIABILITY.
11 S 2. This act shall take effect January 1, 2011.