

7031

I N S E N A T E

March 8, 2010

Introduced by Sen. VOLKER -- read twice and ordered printed, and when printed to be committed to the Committee on Health

AN ACT to amend the public health law, in relation to the observational care unit demonstration program

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 2802-b to read as follows:

3 S 2802-B. OBSERVATIONAL CARE UNIT DEMONSTRATION PROGRAM. 1. NOTWITH-
4 STANDING ANY OTHER PROVISION OF LAW TO THE CONTRARY, THE COMMISSIONER IS
5 AUTHORIZED TO APPROVE UP TO FIVE MEDICAL PRACTICES WITHIN THE STATE IN
6 UNDERSERVED RURAL AREAS OF THE STATE TO OPERATE OBSERVATIONAL CARE UNITS
7 BY AND WITHIN SUCH MEDICAL PRACTICES. FOR PURPOSES OF THIS SECTION,
8 "OBSERVATIONAL CARE" SHALL MEAN THOSE SERVICES FURNISHED BY A MEDICAL
9 PRACTICE ON PREMISES, INCLUDING USE OF A BED AND PERIODIC MONITORING BY
10 A MEDICAL PRACTICE'S NURSING OR OTHER STAFF, WHICH ARE REASONABLE AND
11 NECESSARY TO EVALUATE AN OUTPATIENT'S CONDITION OR DETERMINE THE NEED
12 FOR A POSSIBLE ADMISSION TO A HOSPITAL AS AN INPATIENT OR CONTINUE TO
13 NEED SPECIALIZED MEDICAL, NURSING AND OTHER HOSPITAL ANCILLARY SERVICES
14 AND ARE NOT YET APPROPRIATE FOR DISCHARGE.

15 2. IN ORDER TO RECEIVE APPROVAL FROM THE COMMISSIONER TO OPERATE AN
16 OBSERVATIONAL UNIT AND TO PROVIDE OBSERVATIONAL CARE SERVICES, A MEDICAL
17 PRACTICE SHALL FILE AN APPLICATION ON FORMS PRESCRIBED BY OR ACCEPTABLE
18 TO THE COMMISSIONER.

19 (A) THE COMMISSIONER SHALL ACT UPON SUCH APPLICATIONS IN A MANNER
20 CONSISTENT WITH SECTION TWENTY-EIGHT HUNDRED TWO OF THIS ARTICLE
21 PROVIDED THAT THE COMMISSIONER MAY NOT WAIVE REVIEW AND RECOMMENDATION
22 BY THE STATE HOSPITAL REVIEW AND PLANNING COUNCIL. IN THE STATE HOSPITAL
23 REVIEW AND PLANNING COUNCIL'S EVALUATION OF APPLICATIONS AND THE COMMIS-
24 SIONER ACTING UPON SUCH APPLICATIONS, PRIORITY SHALL BE GIVEN TO APPLI-
25 CANTS WHO ARE SERVING PATIENTS LOCATED IN A MEDICALLY UNDERSERVED RURAL
26 SERVICE AREA. FURTHER, IN THE STATE HOSPITAL REVIEW AND PLANNING COUNCIL
27 EVALUATING APPLICATIONS AND THE COMMISSIONER ACTING UPON SUCH APPLICA-
28 TIONS, CONSIDERATION SHALL ALSO BE GIVEN TO THE GEOGRAPHIC DISTRIBUTION

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

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1 OF APPLICANTS THROUGHOUT THE STATE, SO THAT APPLICATIONS MAY BE APPROVED
2 FROM THE VARIOUS GEOGRAPHIC REGIONS OF THE STATE.

3 (B) THE CARE PROVIDED IN AN OBSERVATIONAL CARE UNIT SHALL BE LIMITED
4 IN DURATION NOT TO EXCEED TWENTY-FOUR HOURS AND DESIGNED TO RESOLVE A
5 PATIENT'S ACUTE CARE MEDICAL PROBLEMS, TEST, DIAGNOSE, STABILIZE AND
6 TREAT RAPIDLY PATIENTS WHO ARE IN NEED OF A LEVEL OF TREATMENT NOT
7 REQUIRING IMMEDIATE INPATIENT ADMISSION TO A HOSPITAL FACILITY AND
8 APPROPRIATE DISCHARGE OF SUCH A PATIENT TO A HOME, RESIDENTIAL HEALTH
9 CARE FACILITY OR OTHER APPROPRIATE SETTING.

10 (C) IN ORDER TO BE APPROVED TO OPERATE AN OBSERVATIONAL CARE UNIT AND
11 TO PROVIDE OBSERVATIONAL CARE SERVICES, AN APPLICANT MUST COMPLY WITH
12 AND MEET ALL APPLICABLE REQUIREMENTS OF AND CONDITIONS OF PARTICIPATION
13 UNDER TITLE XVIII OF THE FEDERAL SOCIAL SECURITY ACT (MEDICARE).

14 3. THE COMMISSIONER SHALL REPORT TO THE GOVERNOR AND THE LEGISLATURE
15 CONCERNING THE IMPLEMENTATION OF THIS SECTION AND THE OPERATION OF
16 OBSERVATIONAL CARE UNITS WITHIN THREE YEARS AFTER THE EFFECTIVE DATE OF
17 THIS SECTION.

18 S 2. This act shall take effect immediately.