6253

2011-2012 Regular Sessions

IN ASSEMBLY

March 10, 2011

Introduced by M. of A. LANCMAN, TITONE, KELLNER, N. RIVERA -- Multi-Sponsored by -- M. of A. ABINANTI, GLICK, MAGEE, PHEFFER, RUSSELL, TOWNS -- read once and referred to the Committee on Judiciary

AN ACT to amend the public health law, in relation to enacting the "medical malpractice savings act"

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

Section 1. This act shall be known and may be cited as the "medical malpractice savings act".

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- 3 S 2. Legislative findings. From 2003 to 2009, New York-Presbyterian 4 Hospital/Weill Cornell Medical Center implemented a comprehensive 5 obstetric patient safety program in order to reduce medical errors improve patient care. To evaluate its effect on compensation payments 6 7 and sentinel events, data was gathered on medical malpractice compen-8 sation payments and sentinel events retrospectively from 2003, when the 9 program was initiated, through 2009. Average yearly medical malpractice compensation payments decreased from \$27,591,610 between 2003-2006 to 10 \$2,550,136 between 2007-2009, while sentinel events decreased from 5 in 11 to none in 2008 and 2009. Clearly, instituting a comprehensive 12 13 obstetric patient safety program increases patient safety and decreases medical malpractice compensation payments. The success of the New York-14 Presbyterian Hospital/Weill Cornell Medical Center comprehensive obstet-15 16 ric patient safety program should be replicated throughout the state 17 under the direction and guidance of the department of health.
- 18 S 3. The public health law is amended by adding a new section 2803-t 19 to read as follows:
- 20 S 2803-T. COMPREHENSIVE OBSTETRIC PATIENT SAFETY PROGRAMS. THE DRAWING ON THE EXAMPLE OF THE OBSTETRICS SAFETY PROGRAM 21 COMMISSIONER, 22 IMPLEMENTED BY NEW YORK-PRESBYTERIAN HOSPITAL/WEILL CORNELL 23 DESCRIBED IN THE FEBRUARY 2011 ISSUE OF THE AMERICAN JOURNAL 24 OF OBSTETRICS & GYNECOLOGY, SHALL PROMULGATE RULES AND REGULATIONS

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

LBD10066-02-1

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REQUIRING ALL FACILITIES WITH OBSTETRICAL PROGRAMS LICENSED UNDER THIS ARTICLE TO ESTABLISH AND IMPLEMENT A COMPREHENSIVE OBSTETRICS SAFETY PROGRAM TO REDUCE MEDICAL ERRORS AND IMPROVE PATIENT OUTCOMES.

- 2. ALL COVERED FACILITIES SHALL BE REQUIRED TO REPORT THE RESULTS OF SUCH PROGRAMS, INCLUDING DEATHS, INJURIES AND MALPRACTICE PAYMENTS AND OTHER MALPRACTICE COSTS TO THE COMMISSIONER AND SUCH INFORMATION SHALL 5 6 7 BE MADE AVAILABLE TO THE GOVERNOR AND LEGISLATURE IN AN ANNUAL REPORT. FAILURE TO IMPLEMENT A COMPREHENSIVE OBSTETRICAL SAFETY PROGRAM AND/OR 8 9 FAILURE TO REPORT THE SAFETY AND MALPRACTICE EXPERIENCE OF SUCH A 10 PROGRAM SHALL BE GROUNDS FOR THE COMMISSIONER TO INVESTIGATE THE STAND-ARD OF CARE AT SUCH A HOSPITAL AND TAKE APPROPRIATE CORRECTIVE AND 11 12 DISCIPLINARY ACTION.
- 13 S 4. This act shall take effect immediately provided, however, that 14 the commissioner of health shall promulgate any necessary rules and 15 regulations within one hundred eighty days after such effective date.