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

4969

2011-2012 Regular Sessions

I N A S S E M B L Y

February 9, 2011

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

AN ACT to amend the public health law, in relation to costs related to the care of a patient with a hospital acquired infection

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

Section 1. Section 2807 of the public health law is amended by adding a new subdivision 20 to read as follows:

20. (A) NOTWITHSTANDING ANY INCONSISTENT PROVISION OF LAW, NO HEALTH CARE COVERAGE PLAN, INCLUDING MEDICAID, SHALL PURCHASE, PAY FOR OR MAKE REIMBURSEMENT FOR TREATMENT AND/OR ANY OTHER COSTS RELATED TO THE CARE OF A PATIENT INFLICTED WITH A HOSPITAL ACQUIRED INFECTION DEEMED PREVENTABLE BY THE COMMISSIONER AND THE PREVALENCE OF WHICH AT SAID HOSPITAL IS EXCESSIVE OR OTHERWISE BEYOND NORMALLY ACCEPTABLE STANDARDS.

(B) IN DETERMINING THE TYPE OR NATURE OF EXCESSIVE PREVENTABLE HOSPITAL ACQUIRED INFECTION, THE COMMISSIONER SHALL CONSULT WITH THE ADVISORY COMMITTEE ON PREVENTABLE HOSPITAL INFECTIONS CREATED IN PARAGRAPH (C) OF THIS SUBDIVISION. SUCH DETERMINATION SHALL BE BASED UPON THE FOLLOWING FACTORS:

(I) THE PREVENTABLE NATURE OF A PARTICULAR TYPE OF INFECTION;

(II) THE REASONABLY ACCEPTABLE RATE AND EXPECTED LEVEL OF INFECTION AT A PARTICULAR INSTITUTION BASED UPON THE NATURE OF THE INSTITUTION AND THE POPULATION IT SERVES;

(III) THE HISTORY AND EFFICACY OF INFECTIOUS DISEASE CONTROL, REPORTING AND SCREENING EFFORTS AT SAID INSTITUTION;

(IV) THE HISTORICAL COMPLIANCE RECORD OF THE INSTITUTION IN RELATION TO HOSPITAL ACQUIRED INFECTION CONTROL, REPORTING AND SCREENING REQUIREMENTS; AND

(V) ANY OTHER FACTOR DEEMED RELEVANT BY THE COMMISSIONER.

(C) THERE IS HEREBY CREATED WITHIN THE DEPARTMENT, THE ADVISORY COMMITTEE ON PREVENTABLE HOSPITAL INFECTIONS. SUCH COMMITTEE SHALL

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

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CONSIST OF SEVENTEEN MEMBERS, WITH THE COMMISSIONER OR HIS OR HER DESIGNEE ACTING AS CHAIRPERSON. THE MEMBERSHIP OF THE COMMITTEE SHALL BE APPOINTED BY THE COMMISSIONER AND SHALL CONSIST OF AT LEAST ONE REPRESENTATIVE OF EACH OF THE FOLLOWING GROUPS:

(I) HOSPITAL INDUSTRY;

(II) HEALTH INSURANCE INDUSTRY;

(III) HEALTH CARE CONSUMER ORGANIZATIONS;

(IV) HOSPITAL EMPLOYEE ORGANIZATIONS;

(V) INFECTIOUS DISEASE CONTROL EXPERTS, AS DETERMINED BY THE COMMISSIONER;

(VI) THE SUPERINTENDENT OF INSURANCE OR HIS OR HER DESIGNEE;

(VII) THE COMMISSIONER OR HIS OR HER DESIGNEE;

(VIII) MEDICAL ORGANIZATIONS;

(IX) NURSING HOME INDUSTRY; AND

(X) NURSING ORGANIZATIONS.

(D) NO HOSPITAL SHALL DENY ADMITTANCE OR TREATMENT TO OR REFER TO ANOTHER HOSPITAL FOR ADMITTANCE OR TREATMENT UNLESS MEDICALLY NECESSARY, ANY INDIVIDUAL INFLICTED WITH A HOSPITAL ACQUIRED INFECTION. ANY HOSPITAL ADMITTING OR TREATING AN INDIVIDUAL WITH A HOSPITAL ACQUIRED INFECTION, SHALL PROVIDE ALL SERVICES NECESSARY TO TREAT THE INFECTION AND SHALL BEAR ALL COSTS RELATED TO SUCH TREATMENT.

(E) THE COMMISSIONER SHALL PROMULGATE SUCH RULES AND REGULATIONS AS MAY BE NECESSARY AND PROPER TO CARRY OUT THE PROVISIONS OF THIS SUBDIVISION INCLUDING PROTOCOLS FOR INFECTIOUS DISEASE CONTROL, REPORTING, SCREENING AND TREATMENT.

S 2. This act shall take effect on the one hundred twentieth day after it shall have become a law; provided, however, that effective immediately, the addition, amendment and/or repeal of any rule or regulation necessary for the implementation of this act on its effective date are authorized and directed to be made and completed on or before such effective date.