962--A

2013-2014 Regular Sessions

IN ASSEMBLY

(PREFILED)

January 9, 2013

- Introduced by M. of A. KELLNER, CROUCH, FINCH, GOTTFRIED -- Multi-Sponsored by -- M. of A. CURRAN, CUSICK, HEVESI, LENTOL, LUPARDO, MARKEY, MOSLEY, WALTER -- read once and referred to the Committee on Health -reported and referred to the Committee on Ways and Means -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee
- AN ACT to amend the public health law, in relation to providing that persons with hemophilia and other clotting protein deficiencies who are otherwise eligible for the Child Health Plus program shall have access to reimbursement for outpatient blood clotting factor concentrates and other necessary treatments and services

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

Section 1. Legislative findings. Hemophilia is a rare hereditary 1 bleeding disorder resulting from a deficiency in blood proteins known as 2 clotting factors. Without an adequate supply of clotting factors, indi-3 4 viduals can experience prolonged bleeding following routine medical and 5 dental procedures, trauma, and a range of physical activities. Additionally, 6 individuals with hemophilia often experience spontaneous 7 internal bleeding that can cause severe joint damage, chronic pain, and 8 even death.

9 Prior to the 1970s, individuals with hemophilia seldom lived beyond 10 the age of 30 years. Early treatment consisted of whole blood and plasma 11 transfusions at hospitals. These treatments were difficult, time consum-12 ing and only minimally effective. The advent of commercially prepared 13 blood clotting factors in the 1980s represented a major advance in 14 treatment, both in terms of efficacy and convenience. Most importantly, 15 these advances allowed for home infusion.

16 In addition to hemophilia, there are several other disorders resulting 17 from blood protein deficiencies. These include Von Willebrand Disease

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

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1 (VWD), the most common bleeding disorder, affecting approximately two 2 million Americans. Individuals with the severest form of VWD rely on 3 clotting factor treatments similar to those used by individuals with 4 hemophilia.

Clotting factor products produced today (derived from plasma or recombinant technology) are very safe and highly effective medications. 5 6 7 Access to therapies has vastly improved both the health outcomes and 8 quality of life for the majority of patients and their families. Many patients today are on a prophylactic regimen to prevent bleeding 9 10 episodes. This preventative regimen together with the coordinated care 11 provided by hemophilia treatment centers have significantly reduced visits to emergency rooms, hospitalizations and joint damage. Further, 12 the ability to manage hemophilia and other bleeding disorders outside of 13 14 the hospital setting have helped improve attendance for school-aged 15 children, decreased absenteeism from work for adult patients and care-16 givers, vastly improved the ability of affected persons to join the work force, and minimized life disruptions for the entire family. 17

Presently, New York state is the only state in the U.S. preventing access to lifesaving outpatient clotting factor products for individuals that qualify for the State Children's Health Insurance Program.

21 The legislature finds that having a policy that prohibits otherwise 22 eligible individuals from accessing lifesaving medications not only violates the spirit of these very important programs, it discriminates 23 against a vulnerable group of individuals whose health care costs are 24 25 deemed to be high and fundamentally undermines the programs' overall goal of ensuring that low-income children and families have access to 26 quality health care. The legislature further finds that costs to the 27 state for allowing individuals who qualify for Child Health Plus to 28 29 access the outpatient clotting products at home, the recommended model of care, will be much less than the long-term costs the state will very 30 likely end up paying through the Medicaid program for individuals who 31 32 later develop debilitating complications and are deemed unable to work.

This legislation is intended to modify existing state law by allowing for the coverage of lifesaving clotting factor products prescribed for use at home by persons with hemophilia and other clotting protein deficiencies who are eligible for the Child Health Plus program.

37 S 2. Subdivision 7 of section 2510 of the public health law, as 38 amended by section 21 of part B of chapter 109 of the laws of 2010, is 39 amended to read as follows:

40 "Covered health care services" means: the services of physicians, 7. optometrists, nurses, nurse practitioners, midwives and other related 41 42 professional personnel which are provided on an outpatient basis, 43 including routine well-child visits; diagnosis and treatment of illness 44 and injury; inpatient health care services; laboratory tests; diagnostic x-rays; prescription and non-prescription drugs and durable medical equipment; radiation therapy; chemotherapy; hemodialysis; OUTPATIENT 45 46 47 BLOOD CLOTTING FACTOR PRODUCTS AND OTHER TREATMENTS SERVICES AND 48 FURNISHED IN CONNECTION WITH THE CARE OF HEMOPHILIA AND OTHER BLOOD emergency room services; hospice 49 CLOTTING PROTEIN DEFICIENCIES; 50 services; emergency, preventive and routine dental care, including 51 medically necessary orthodontia but excluding cosmetic surgery; emergency, preventive and routine vision care, including eyeglasses; speech and 52 hearing services; and, inpatient and outpatient mental health, alcohol 53 54 and substance abuse services as defined by the commissioner in consulta-55 tion with the superintendent. "Covered health care services" shall not 56 include drugs, procedures and supplies for the treatment of erectile 1 dysfunction when provided to, or prescribed for use by, a person who is 2 required to register as a sex offender pursuant to article six-C of the 3 correction law, provided that any denial of coverage of such drugs, 4 procedures or supplies shall provide the patient with the means of 5 obtaining additional information concerning both the denial and the 6 means of challenging such denial.

7 S 3. Paragraph a of subdivision 7 of section 2510 of the public health 8 law, as amended by chapter 526 of the laws of 2002, is amended to read 9 as follows:

10 a. "Primary and preventive health care services" means: the services physicians, optometrists, nurses, nurse practitioners, midwives and 11 of 12 other related professional personnel which are provided on an outpatient basis, including routine well-child visits; diagnosis and treatment of 13 14 illness and injury; laboratory tests; diagnostic x-rays; prescription 15 drugs; radiation therapy; chemotherapy; hemodialysis; OUTPATIENT BLOOD CLOTTING FACTOR PRODUCTS AND OTHER TREATMENTS AND SERVICES FURNISHED IN 16 CONNECTION WITH THE CARE OF HEMOPHILIA AND OTHER BLOOD CLOTTING 17 PROTEIN 18 DEFICIENCIES; emergency room services; hospice services; and, outpatient 19 alcohol and substance abuse services as defined by the commissioner in 20 consultation with the superintendent.

21 S 4. This act shall take effect on the first of April next succeeding 22 the date upon which it shall have become a law, provided that the amend-23 ments to subdivision 7 of section 2510 of the public health law made by 24 section two of this act shall be subject to the expiration and reversion 25 of such subdivision pursuant to subdivision 4 of section 47 of chapter 2 26 of the laws of 1998, as amended, when upon such date the provisions of 27 section three of this act shall take effect.