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

9651--A

Cal. No. 782

I N A S S E M B L Y

May 14, 2014

Introduced by M. of A. BENEDETTO, GOTTFRIED, SIMOTAS, MOSLEY, CLARK -- Multi-Sponsored by -- M. of A. CAMARA, KEARNS, RIVERA -- read once and referred to the Committee on Health -- passed by Assembly and delivered to the Senate, recalled from the Senate, vote reconsidered, bill amended, ordered reprinted, retaining its place on the order of third reading

AN ACT to amend the public health law, in relation to including concussions within the New York state traumatic brain injury program

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

Section 1. Section 2741 of the public health law, as added by chapter 196 of the laws of 1994, is amended to read as follows:

S 2741. Definitions. As used in this article[, the term "traumatic]:

1. "TRAUMATIC brain injury" means an acquired injury to the brain caused by an external physical force resulting in total or partial disability or impairment and shall include but not be limited to damage to the central nervous system from anoxic/hypoxic episodes or damage to the central nervous system from allergic conditions, toxic substances and other acute medical/clinical incidents. Such term shall include, but not be limited to, open and closed brain injuries that may result in mild, moderate or severe impairments in one or more areas, including cognition, language, memory, attention, reasoning, abstract thinking, judgment, problem-solving, sensory perceptual and motor abilities, psychosocial behavior, physical functions, information processing and speech. Such term shall not include progressive dementias and other mentally impairing conditions, depression and psychiatric disorders in which there is no known or obvious central nervous system damage, neurological, metabolic and other medical conditions of chronic, congenital or degenerative nature or brain injuries induced by birth trauma.

2. "CONCUSSION" MEANS A MILD TRAUMATIC INJURY TO THE BRAIN THAT IS CHARACTERIZED BY IMMEDIATE AND TRANSIENT ALTERATION OF MENTAL STATUS AND LEVEL OF CONSCIOUSNESS, RESULTING FROM MECHANICAL FORCE OR TRAUMA.

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

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S 2. Subdivisions 3, 5 and 7 of section 2742 of the public health law, as added by chapter 196 of the laws of 1994, are amended to read as follows:

3. to develop and maintain a clearinghouse of information on traumatic brain injuries AND CONCUSSIONS, including but not limited to, resources that support the development and implementation of community-based services and rehabilitation;

5. to develop innovative educational programs on the causes and prevention of traumatic brain injuries AND CONCUSSIONS, with an emphasis on outreach campaigns. Such programs and information shall include, but not be limited to, treatment and services for persons with traumatic brain injury AND/OR A CONCUSSION and their families;

7. to gather and disseminate statistics and conduct investigations and research relating to the causes and prevention of traumatic brain injuries AND CONCUSSIONS and the treatment of such injuries, including the methods and procedures for rehabilitation, including from time to time, such publications for distribution to appropriate scientific organizations;

S 3. Section 2744 of the public health law is amended by adding a new subdivision 4 to read as follows:

4. (A) WITHIN THE TRAUMATIC BRAIN INJURY SERVICES COORDINATING COUNCIL THERE SHALL BE ESTABLISHED A CONCUSSION MANAGEMENT ADVISORY COMMITTEE WHICH SHALL DEVELOP RECOMMENDATIONS SPECIFIC TO CONCUSSION MANAGEMENT, ACADEMIC SCHOLARSHIP, AND PUBLIC AWARENESS FOR SUBMISSION TO THE TRAUMATIC BRAIN INJURY SERVICES COORDINATING COUNCIL FOR CONSIDERATION. THE COMMITTEE SHALL CONSIST OF MEMBERS APPOINTED FROM THE MEMBERSHIP OF THE TRAUMATIC BRAIN INJURY SERVICES COORDINATING COUNCIL BY A MAJORITY VOTE OF THE COUNCIL. ADDITIONAL COMMITTEE MEMBERS MAY BE APPOINTED BY THE COMMISSIONER AND SHALL HAVE DEMONSTRATED EXPERIENCE WITH OR EXPERTISE IN ONE OF THE FOLLOWING AREAS: PUBLIC HEALTH EXPERTISE RELATED TO MILD TRAUMATIC BRAIN INJURIES AND CONCUSSIONS, ACADEMIC RESEARCH IN THE AREA OF TRAUMATIC BRAIN INJURIES AND CONCUSSION MANAGEMENT, AND PUBLIC AWARENESS EXPERIENCE RELATED TO THE RECOGNITION OF MILD TRAUMATIC BRAIN INJURIES AND CONCUSSIONS. COMMITTEE MEMBERSHIP SHALL NOT EXCEED TWELVE MEMBERS. THE COMMITTEE MAY CONSULT WITH A MEMBER OR MEMBERS OF THE PUBLIC WHO HAVE DEMONSTRATED EXPERTISE AND INTEREST IN MILD TRAUMATIC BRAIN INJURIES AND CONCUSSIONS.

(B) THE RECOMMENDATIONS OF THE ADVISORY COMMITTEE SHALL INCLUDE, BUT NOT BE LIMITED TO:

(I) METHODS TO RAISE PUBLIC AWARENESS OF MILD TRAUMATIC BRAIN INJURIES AND CONCUSSIONS;

(II) THE DEVELOPMENT OF OUTREACH SERVICES TO PROVIDE COORDINATED INFORMATION REGARDING THE RECOGNITION AND MANAGEMENT OF MILD TRAUMATIC BRAIN INJURIES AND CONCUSSIONS; AND

(III) THE DEVELOPMENT OF A CLEARINGHOUSE OF ACADEMIC RESEARCH AND SCIENTIFIC FINDINGS RELATED TO THE RECOGNITION, MANAGEMENT, AND TREATMENT OF MILD TRAUMATIC INJURIES AND CONCUSSIONS.

S 4. This act shall take effect immediately.