

8061--A

2013-2014 Regular Sessions

I N   A S S E M B L Y

June 17, 2013

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Introduced by M. of A. ABINANTI -- read once and referred to the Committee on Mental 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 mental hygiene law, in relation to establishing the diagnostic and statistical manual of mental disorders (DSM-5) implementation council; and providing for the repeal of such provisions upon expiration thereof

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

1     Section 1. Legislative intent. The legislature finds that early,  
2     continuous and appropriate treatment facilitates the best possible  
3     outcome for children diagnosed with autism spectrum disorder (ASD). The  
4     legislature further finds that while periodic reformation of diagnostic  
5     criteria is vital to ensure quality care, the legislature and state must  
6     be able to respond accordingly if such changes may impact individuals  
7     currently receiving treatment. Therefore, the legislature finds it  
8     appropriate to establish a council consisting of stakeholders, including  
9     parents and physicians, to advise the state and legislature on the  
10    implementation and impact of the transition from the fourth edition of  
11    the Diagnostic and Statistical Manual of Mental Disorders to the criteria  
12    implemented by the fifth edition to ensure that individuals who  
13    qualify under DSM-IV will continue to qualify under DSM-5. The legislature  
14    further finds that until such time that the state understands the  
15    impacts it is important to ensure the continued benefits and state  
16    services for individuals with a diagnosis.

17    S 2. The mental hygiene law is amended by adding a new section 16.38  
18    to read as follows:

19    S 16.38 DIAGNOSTIC AND STATISTICAL MANUAL OF MENTAL DISORDERS (DSM-5)  
20    IMPLEMENTATION COUNCIL.

21    1.(A) THE OFFICE SHALL ESTABLISH A DIAGNOSTIC AND STATISTICAL MANUAL  
22    OF MENTAL DISORDERS (DSM-5) IMPLEMENTATION COUNCIL.

23    (B) THE COUNCIL SHALL CONSIST OF NINETEEN MEMBERS, APPOINTED BY THE  
24    GOVERNOR. SIX SHALL BE PARENTS OR GUARDIANS, THREE OF WHOM WHO SHALL

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

LBD11530-06-4

1 HAVE CHILDREN DIAGNOSED WITH A PERVASIVE DEVELOPMENTAL DISORDER (PDD)  
2 UNDER THE FOURTH EDITION OF THE DIAGNOSTIC AND STATISTICAL MANUAL OF  
3 MENTAL DISORDERS (DSM-IV), AND THREE OF WHOM WHO SHALL HAVE CHILDREN  
4 DIAGNOSED WITH AN AUTISM SPECTRUM DISORDER (ASD) OR SOCIAL COMMUNICATION  
5 DISORDER (SCD) UNDER THE FIFTH EDITION OF THE DIAGNOSTIC AND STATISTICAL  
6 MANUAL OF MENTAL DISORDERS (DSM-5); FIVE SHALL BE REPRESENTATIVES OF  
7 PUBLIC OR PRIVATE PROVIDERS OF SERVICES TO INDIVIDUALS WITH ASDS, AT  
8 LEAST ONE OF WHOM SHALL BE A PSYCHIATRIST LICENSED TO PRACTICE IN THE  
9 STATE, AT LEAST ONE OF WHOM SHALL BE A REPRESENTATIVE OF A CENTER FOR  
10 AUTISM AND RELATED DISABILITIES LOCATED WITHIN THE STATE, AND AT LEAST  
11 ONE OF WHOM SHALL BE ASSOCIATED WITH A SCHOOL DISTRICT OR A BOARD OF  
12 COOPERATIVE EDUCATIONAL SERVICES; TWO SHALL BE REPRESENTATIVES OF ORGAN-  
13 IZATIONS THAT ADVOCATE FOR INDIVIDUALS WITH ASDS; TWO SHALL BE REPRESENTATIVES OF  
14 AUTHORIZED INSURERS ISSUING POLICIES PURSUANT TO ARTICLE  
15 THIRTY-TWO OR FORTY-THREE OF THE INSURANCE LAW; AND FOUR SHALL BE THE  
16 COMMISSIONER, THE COMMISSIONER OF EDUCATION, THE COMMISSIONER OF HEALTH,  
17 AND THE SUPERINTENDENT OF FINANCIAL SERVICES, OR THEIR APPROPRIATE  
18 DESIGNEES WITH SUFFICIENT AUTHORITY TO ENGAGE IN POLICY PLANNING AND  
19 IMPLEMENTATION ON BEHALF OF THEIR AGENCIES.

20 (C) THE GOVERNOR SHALL APPOINT THE MEMBERS. SIX SHALL BE APPOINTED ON  
21 THE RECOMMENDATION OF THE TEMPORARY PRESIDENT OF THE SENATE AND SIX  
22 SHALL BE APPOINTED ON THE RECOMMENDATION OF THE SPEAKER OF THE ASSEMBLY,  
23 EACH OF WHOM SHALL RECOMMEND THREE MEMBERS AS FOLLOWS: ONE PARENT OF A  
24 CHILD WITH A PDD UNDER DSM-IV, ONE PARENT OF A CHILD WITH AN ASD OR SCD  
25 UNDER DSM-5; ONE REPRESENTATIVE OF PUBLIC OR PRIVATE PROVIDERS OF  
26 SERVICES TO INDIVIDUALS WITH ASDS.

27 (D) VACANCIES IN THE COUNCIL SHALL BE FILLED IN THE SAME MANNER AS  
28 ORIGINAL APPOINTMENTS.

29 2. DUTIES OF THE COUNCIL SHALL INCLUDE, BUT NOT BE LIMITED TO:

30 (A) GATHERING STAKEHOLDER INPUT REGARDING THE IMPLEMENTATION OF DSM-5  
31 CRITERIA, AND PROPOSED REGULATORY OR STATUTORY AMENDMENTS RELATING TO  
32 THE TRANSITION FROM DSM-IV.

33 (B) ASSISTING THE OFFICE, THE STATE EDUCATION DEPARTMENT, THE DEPART-  
34 MENT OF HEALTH AND THE DEPARTMENT OF FINANCIAL SERVICES IN PROMULGATING  
35 REGULATIONS AND GUIDANCE TO ENSURE THOSE WITH PDD DIAGNOSES UNDER DSM-IV  
36 RECEIVE THE SAME LEGAL ENTITLEMENTS AS THOSE WITH ASD AND SCD DIAGNOSES  
37 UNDER DSM-5.

38 (C) MONITORING STUDIES EVALUATING THE NEW DIAGNOSTIC CRITERIA; AS WELL  
39 AS ANY AMENDMENTS TO, OR GUIDANCE RELATING TO, DSM-5.

40 (D) PROVIDING RECOMMENDATIONS FOR STATUTORY AMENDMENTS RELATING TO THE  
41 TRANSITION TO DSM-5 FROM DSM-IV TO ENSURE THAT INDIVIDUALS WHO WOULD  
42 QUALIFY FOR BENEFITS AND STATE SERVICES UNDER DSM-IV WOULD CONTINUE TO  
43 QUALIFY UNDER DMS-5.

44 (E) PREPARE AND SUBMIT AN ANNUAL REPORT, THE FIRST OF WHICH SHALL BE  
45 SUBMITTED NO LATER THAN OCTOBER FIRST, TWO THOUSAND FIFTEEN, TO THE  
46 GOVERNOR AND LEGISLATURE ON THE STATUS OF THE TRANSITION TO DSM-5 FROM  
47 DSM-IV.

48 3. THE COUNCIL SHALL MEET AT LEAST TWO TIMES A YEAR. SPECIAL MEETINGS  
49 MAY BE CALLED AT THE REQUEST OF THE COMMISSIONER.

50 4. THE MEMBERS OF THE COUNCIL SHALL BE ALLOWED THEIR REASONABLE AND  
51 NECESSARY EXPENSES INCURRED IN THE PERFORMANCE OF THEIR DUTIES HERE-  
52 UNDER.

53 S 3. This act shall take effect immediately and shall expire and be  
54 deemed repealed three years after the effective date of this act.