

6417--A

2015-2016 Regular Sessions

I N A S S E M B L Y

March 24, 2015

Introduced by M. of A. SIMON, ARROYO, BARRON, BRENNAN, COOK, COLTON, MOSLEY, SKOUFIS, STECK, WALKER, ROBINSON, DAVILA, SEAWRIGHT -- Multi-Sponsored by -- M. of A. BLAKE, SALADINO, SCHIMEL -- 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 the closure of hospitals

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

1 Section 1. This act shall be known and maybe cited as the "local input
2 in community healthcare act".

3 S 2. The public health law is amended by adding a new section 2801-i
4 to read as follows:

5 S 2801-I. CLOSURE OF HOSPITALS. 1. NOTWITHSTANDING ANY PROVISION OF
6 LAW TO THE CONTRARY, THE CLOSURE OF A GENERAL HOSPITAL OR SURRENDER OF
7 AN OPERATING CERTIFICATE PURSUANT TO THIS ARTICLE SHALL BE SUBJECT TO
8 REVIEW AND APPROVAL BY THE COMMISSIONER.

9 2. (A) NO LATER THAN THIRTY DAYS AFTER RECEIPT OF AN APPLICATION FOR
10 CLOSURE OF A GENERAL HOSPITAL IN A CITY WITH A POPULATION OF ONE MILLION
11 OR MORE, THE COMMISSIONER SHALL SUBMIT A WRITTEN REPORT TO THE COMMUNITY
12 BOARD, THE CITY PLANNING COMMISSION, THE CITY COUNCIL MEMBER REPRESENT-
13 ING THE AREA WITHIN WHICH THE FACILITY IS LOCATED, THE PRESIDENT OF THE
14 BOROUGH WITHIN WHICH THE FACILITY IS LOCATED, THE CONGRESSIONAL REPRE-
15 SENTATIVE FOR THE DISTRICT IN WHICH THE FACILITY IS LOCATED, AND THE
16 STATE SENATOR AND THE ASSEMBLY MEMBER REPRESENTING THE AREA WITHIN WHICH
17 THE FACILITY IS LOCATED, OR THE CITY DEPARTMENT OF HEALTH. SUCH WRITTEN
18 REPORT SHALL INCLUDE:

19 (1) THE ANTICIPATED IMPACT OF THE GENERAL HOSPITAL'S CLOSURE ON ACCESS
20 TO HEALTH CARE SERVICES BY MEMBERS OF THE SURROUNDING COMMUNITIES,

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

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1 INCLUDING BUT NOT LIMITED TO RECIPIENTS OF MEDICAL ASSISTANCE FOR NEEDY
2 PERSONS, THE UNINSURED, AND UNDERSERVED POPULATIONS;

3 (2) SPECIFIC MEASURES THE DEPARTMENT AND OTHER PARTIES HAVE TAKEN OR
4 WOULD TAKE TO AMELIORATE SUCH ANTICIPATED IMPACT ON THE COMMUNITIES;

5 (3) ANY FURTHER RECOMMENDATIONS REGARDING ACCESS TO HEALTH CARE
6 SERVICES IN COMMUNITIES IMPACTED BY THE CLOSURE;

7 (4) AN ASSESSMENT OF THE ABILITY OF THE STATE TO ASSUME FINANCIAL
8 RESPONSIBILITY OR IDENTIFY AN ALTERNATE OPERATOR; AND

9 (5) COMPLETE COPIES OF THE APPLICATION OR REQUEST FOR CLOSURE.

10 (B) THE COMMISSIONER SHALL ALSO MAKE A FULL COPY OF SUCH REPORT AVAIL-
11 ABLE TO THE PUBLIC ON THE DEPARTMENT'S WEBSITE.

12 3. SUCH COMMUNITY BOARD, CITY COUNCIL MEMBER, STATE SENATOR, ASSEMBLY
13 MEMBER, CONGRESSIONAL REPRESENTATIVE, AND BOROUGH PRESIDENT, CITY PLAN-
14 NING COMMISSION, OR CITY HEALTH DEPARTMENT MAY REVIEW AND MAKE RECOMMEN-
15 DATIONS BASED UPON SUCH WRITTEN REPORT BY THE COMMISSIONER WITHIN THIRTY
16 DAYS OF RECEIPT THEREOF. ANY RECOMMENDATION BY SUCH COMMUNITY BOARD,
17 CITY COUNCIL MEMBER, STATE SENATOR, ASSEMBLY MEMBER, CONGRESSIONAL
18 REPRESENTATIVE, BOROUGH PRESIDENT, OR CITY PLANNING COMMISSION, OR CITY
19 HEALTH DEPARTMENT OF SUCH CITY SHALL BE SUBMITTED TO THE COMMISSIONER.

20 4. UPON ANY DECISION BY THE COMMISSIONER TO APPROVE OR REJECT AN
21 APPLICATION FOR CLOSURE OF A GENERAL HOSPITAL IN A CITY WITH A POPU-
22 LATION OF ONE MILLION OR MORE, THE COMMISSIONER SHALL MAKE AVAILABLE TO
23 THE PUBLIC ON THE DEPARTMENT'S WEBSITE A WRITTEN REPORT INCLUDING:

24 (A) A SUMMARY OF THE ISSUES RAISED PURSUANT TO SUBDIVISION ONE OF
25 SECTION TWENTY-EIGHT HUNDRED ONE-G OF THIS ARTICLE AND A SUMMARY OF ANY
26 RECOMMENDATIONS SUBMITTED BY THE COMMUNITY BOARD, CITY COUNCIL MEMBER,
27 STATE SENATOR, ASSEMBLY MEMBER, CONGRESSIONAL REPRESENTATIVE, BOROUGH
28 PRESIDENT, CITY PLANNING COMMISSION, OR CITY HEALTH DEPARTMENT PURSUANT
29 TO SUBDIVISION THREE OF THIS SECTION;

30 (B) A STATEMENT OF THE REASONS WHY ANY SIGNIFICANT ALTERNATIVE RECOM-
31 MENDATIONS MADE PURSUANT TO SUBDIVISION ONE OF SECTION TWENTY-EIGHT
32 HUNDRED ONE-G OF THIS ARTICLE AND SUBDIVISION THREE OF THIS SECTION WERE
33 OR WERE NOT INCORPORATED INTO THE FINAL PLAN;

34 (C) A DESCRIPTION OF ANY CHANGES MADE TO THE PROPOSED PLAN AS A RESULT
35 OF THE ISSUES RAISED PURSUANT TO SUBDIVISION ONE OF SECTION TWENTY-EIGHT
36 HUNDRED ONE-G OF THIS ARTICLE AND THE RECOMMENDATIONS SUBMITTED BY THE
37 COMMUNITY BOARD, CITY COUNCIL MEMBER, STATE SENATOR, ASSEMBLY MEMBER,
38 CONGRESSIONAL REPRESENTATIVE, BOROUGH PRESIDENT, CITY PLANNING COMMIS-
39 SION, CITY HEALTH DEPARTMENT OR MEMBER OF THE PUBLIC PURSUANT TO SUBDI-
40 VISION THREE OF THIS SECTION; AND

41 (D) A COMPLETE COPY OF THE PROPOSED DECISION OF THE COMMISSIONER
42 REGARDING THE CLOSURE OF THE HOSPITAL, INCLUDING ALL PROPOSED TERMS,
43 CONDITIONS AND PLANS FOR PROVIDING HEALTH SERVICES TO THE AFFECTED
44 COMMUNITIES AND POPULATIONS.

45 5. THE COMMISSIONER MAY ONLY APPROVE THE APPLICATION IF HE OR SHE
46 REASONABLY DETERMINES THAT THE NEEDS OF THE COMMUNITY AND IMPACTED
47 STAKEHOLDERS, INCLUDING BUT NOT LIMITED TO ACCESS TO EMERGENCY MEDICAL
48 CARE, CAN BE ADEQUATELY MET.

49 6. NO CLOSURE SHALL BE APPROVED UNDER THIS SECTION UNLESS THE COMMIS-
50 SIONER COMPLIES WITH THE PROVISIONS OF THIS SECTION AND THE PROVISIONS
51 OF SECTION TWENTY-EIGHT HUNDRED ONE-G OF THIS ARTICLE.

52 7. THE COMMISSIONER SHALL PROMULGATE ANY RULES NECESSARY TO EFFECTUATE
53 THE PROVISIONS OF THIS SECTION.

54 S 3. Subdivisions 1 and 2 of section 2801-g of the public health law,
55 as added by chapter 541 of the laws of 2010, are amended to read as
56 follows:

1 1. No later than [thirty] FORTY-FIVE days after [the] AN APPLICATION
2 FOR closure of a general hospital, the commissioner shall hold a public
3 community forum for the purpose of obtaining public input concerning the
4 anticipated impact of the general hospital's closure on access to health
5 care services by members of the surrounding community, including but not
6 limited to recipients of medical assistance for needy persons, the unin-
7 sured, and underserved populations, and options and proposals to amelio-
8 rate such anticipated impact. The commissioner shall afford community
9 members, health care providers, labor unions, payers, businesses [and],
10 consumers, THE COMMUNITY BOARD, THE CITY PLANNING COMMISSION, THE CITY
11 COUNCIL MEMBER REPRESENTING THE AREA WITHIN WHICH THE FACILITY IS
12 LOCATED, THE CONGRESSIONAL REPRESENTATIVE FOR THE DISTRICT IN WHICH THE
13 FACILITY IS LOCATED, THE PRESIDENT OF THE BOROUGH WITHIN WHICH THE
14 FACILITY IS LOCATED, AND THE STATE SENATOR AND ASSEMBLY MEMBER REPRES-
15 ENTING THE AREA WITHIN WHICH THE FACILITY IS LOCATED, a reasonable
16 opportunity to speak about relevant matters at such community forum. THE
17 COMMISSIONER SHALL ALSO ACCEPT COMMENTS SUBMITTED IN WRITING AT SUCH
18 PUBLIC FORUM AND BY MAIL WITHIN A REASONABLE TIMEFRAME. AT LEAST TEN
19 DAYS PRIOR TO SUCH COMMUNITY FORUM, THE COMMISSIONER SHALL RELEASE
20 PUBLICLY AND POST ON ITS WEBSITE A COMPLETE COPY OF THE COMMISSIONER'S
21 REPORT RELATED TO THE CLOSURE REQUIRED BY SUBDIVISION TWO OF SECTION
22 TWENTY-EIGHT HUNDRED ONE-I OF THIS ARTICLE.

23 2. No later than [sixty] THIRTY days after holding a community forum
24 pursuant to subdivision one of this section, the commissioner shall make
25 available to the public on the department's website [information] A
26 WRITTEN REPORT regarding:

27 (a) the anticipated impact of the general hospital's closure on access
28 to health care services by members of the surrounding community, includ-
29 ing but not limited to recipients of medical assistance for needy
30 persons, the uninsured, and underserved populations;

31 (b) specific measures the department and other parties have taken or
32 will take to ameliorate such anticipated impact; [and]

33 (c) any further recommendations regarding access to health care
34 services in communities impacted by the general hospital's closure; AND

35 (D) INFORMATION ABOUT TRANSITIONAL MEDICAL SERVICES TO THE IMPACTED
36 COMMUNITIES, INCLUDING BUT NOT LIMITED TO ARRANGEMENTS FOR CONTINUITY OF
37 CARE.

38 S 4. This act shall take effect immediately.