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

2492

2015-2016 Regular Sessions

I N A S S E M B L Y

January 16, 2015

Introduced by M. of A. MOSLEY -- read once and referred to the Committee on Higher Education

AN ACT to amend the education law, in relation to the establishment of the interagency task force on health literacy

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

Section 1. Legislative intent. 1. It is the intent of the legislature to improve health care access and outcomes, and reduce unnecessary health care spending by addressing the issue of health literacy. Health literacy is the degree to which an individual, or individuals, have the capacity to obtain, process and understand basic health care information and services necessary for them to make appropriate health decisions.

2. A patient's health literacy may be affected if they have low education skills, cultural barriers to seeking health care, or limited English proficiency (LEP). Demographically, individuals with health literacy challenges often are represented disproportionately in the following groups: older adults, minority and/or immigrant populations, lower-income populations, and medically underserved populations.

3. Although New York has some existing health literacy initiatives, the legislature finds that a comprehensive statewide health literacy task force is a necessary and valuable step toward eliminating as much as practicable the negative outcomes that health literacy challenges create in the state.

S 2. The education law is amended by adding a new section 238-b to read as follows:

S 238-B. INTERAGENCY TASK FORCE ON HEALTH LITERACY. 1. THERE IS HEREBY ESTABLISHED WITHIN THE STATE UNIVERSITY OF NEW YORK, AN INTERAGENCY TASK FORCE ON HEALTH LITERACY TO BE ADMINISTERED ACCORDING TO THE PROVISIONS OF THIS SECTION. SUCH TASK FORCE SHALL ASSIST THE HEALTH AND HUMAN SERVICE AGENCIES OF THIS STATE IN STUDYING HEALTH LITERACY AND DEVELOPING RECOMMENDATIONS FOR IMPROVING HEALTH LITERACY IN THIS STATE.

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

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2. THE SUNY CHANCELLOR SHALL APPOINT A MEMBER OF THE SUNY SCHOOL OF PUBLIC HEALTH FACULTY TO CHAIR THE TASK FORCE.

3. THE FOLLOWING REPRESENTATIVES SHALL BE INVITED TO SERVE ON THE TASK FORCE:

(A) THREE REPRESENTATIVES FROM STATE HOSPITALS TO BE SELECTED BY THE TEMPORARY PRESIDENT OF THE SENATE AND THE SPEAKER OF THE ASSEMBLY;

(B) THE COMMISSIONER OF THE NEW YORK STATE DEPARTMENT OF HEALTH;

(C) THE COMMISSIONER OF THE OFFICE OF CHILDREN AND FAMILY SERVICES;

(D) A REPRESENTATIVE FROM THE MEDICAL SOCIETY OF THE STATE OF NEW YORK;

(E) A REPRESENTATIVE FROM THE NEW YORK CHAPTER, AMERICAN ACADEMY OF PEDIATRICS;

(F) A REPRESENTATIVE FROM THE NEW YORK COOPERATIVE EXTENSION;

(G) A REPRESENTATIVE FROM THE ALBANY COLLEGE OF PHARMACY;

(H) A REPRESENTATIVE FROM THE LONG ISLAND UNIVERSITY A.M. SCHWARTZ COLLEGE OF PHARMACY AND ALLIED HEALTH PROFESSIONS;

(I) A REPRESENTATIVE FROM THE STATE UNIVERSITY OF NEW YORK AT BUFFALO SCHOOL OF PHARMACY AND PHARMACEUTICAL SCIENCES;

(J) A REPRESENTATIVE FROM THE NEW YORK STATE OCCUPATIONAL HEALTH CLINIC NETWORK;

(K) A REPRESENTATIVE FROM THE NEW YORK STATE OFFICE OF MINORITY HEALTH;

(L) A REPRESENTATIVE FROM THE NEW YORK STATE DEVELOPMENTAL DISABILITIES PLANNING COUNCIL;

(M) A REPRESENTATIVE FROM THE HEALTH INSURANCE INDUSTRY;

(N) A REPRESENTATIVE FROM THE EMPIRE STATE MEDICAL ASSOCIATION;

(O) THE COMMISSIONER OF THE NEW YORK CITY DEPARTMENT OF HEALTH AND MENTAL HYGIENE;

(P) A REPRESENTATIVE FROM THE NEW YORK CITY DEPARTMENT FOR THE AGING;

(Q) A REPRESENTATIVE FROM THE HEALTH LITERACY PROJECT PARTNERSHIP OF THE NEW YORK CITY MAYOR'S OFFICE AND UNITED WAY OF NEW YORK CITY; AND

(R) A REPRESENTATIVE FROM THE NEW YORK STATE HEALTH FOUNDATION.

4. FOR THE PURPOSES OF THIS SECTION THE FOLLOWING TERMS SHALL HAVE THE FOLLOWING MEANINGS:

(A) "CHANCELLOR" SHALL MEAN THE CHANCELLOR OF THE SUNY SCHOOLS OF PUBLIC HEALTH IN ALBANY.

(B) "HEALTH LITERACY" SHALL MEAN AN INDIVIDUAL'S ABILITY TO READ, UNDERSTAND, AND ACT APPROPRIATELY ON HEALTH CARE INFORMATION.

(C) "TASK FORCE" MEANS THE INTERAGENCY TASK FORCE ON HEALTH LITERACY.

5. THE TASK FORCE SHALL BE CHARGED WITH STUDYING AND EVALUATING THE HEALTH LITERACY OF THE RESIDENTS OF THIS STATE. THE TASK FORCE SHALL:

(A) EXAMINE THE ABILITY OF RESIDENTS TO ACCESS AVAILABLE HEALTH SERVICES AND COMMUNICATE WITH HEALTH CARE PROVIDERS;

(B) IDENTIFY BARRIERS THAT PREVENT RESIDENTS WITH LOW HEALTH LITERACY FROM RECEIVING HEALTH CARE;

(C) IDENTIFY GROUPS AT RISK FOR LOW HEALTH LITERACY;

(D) EXAMINE WHETHER PROVIDING APPROPRIATE HEALTH INFORMATION TO AND INCREASING THE HEALTH LITERACY OF THE BENEFICIARIES OF PUBLIC HEALTH SERVICES WOULD INCREASE THE EFFICIENCY OF HEALTH CARE PROVIDERS AND DECREASE EXPENDITURES;

(E) EXAMINE THE IMPACT ON HEALTH LITERACY OF:

(I) RISING HEALTH CARE COSTS;

(II) INCREASINGLY COMPLEX HEALTH TREATMENTS;

(III) AN INDIVIDUAL'S AGE; AND

(IV) CULTURAL AND LINGUISTIC DIVERSITY.

6. THE SUNY SCHOOLS OF PUBLIC HEALTH IN ALBANY SHALL PROVIDE THE STAFF NECESSARY TO ASSIST THE TASK FORCE IN PERFORMING ITS DUTIES.

7. NO LATER THAN DECEMBER FIFTEENTH, TWO THOUSAND SIXTEEN, THE TASK FORCE SHALL REPORT TO THE LEGISLATURE ON ITS FINDINGS UNDER SUBDIVISION FIVE OF THIS SECTION. IN ADDITION, THE REPORT SHALL INCLUDE A LIST OF PROPOSED RULES AND REGULATIONS AND ANY NECESSARY LEGISLATION. THE TASK FORCE SHALL ALSO MAKE RECOMMENDATIONS TO THE LEGISLATURE ON STRATEGIES FOR:

(A) IMPROVING THE HEALTH LITERACY OF THE RESIDENTS OF THIS STATE.

(B) PROMOTING THE USE OF PLAIN LANGUAGE BY HEALTH CARE PROVIDERS.

(C) SIMPLIFYING THE ENROLLMENT FORMS AND PROCEDURES FOR ACCESSING HEALTH INSURANCE PLANS SERVING INDIVIDUALS IN GROUPS IDENTIFIED AS AT RISK FOR LOW HEALTH LITERACY.

(D) DEVELOPING RESOURCES FOR HEALTH CARE PROVIDERS AND RESIDENTS OF THIS STATE TO INCREASE HEALTH LITERACY.

(E) DEVELOPING PROGRAMS TO AID THE RESIDENTS OF THIS STATE IN UNDERSTANDING HEALTH CARE INFORMATION.

(F) DEVELOPING EDUCATIONAL CURRICULA TO INCREASE HEALTH LITERACY.

(G) DEVELOPING EASY-TO-UNDERSTAND PRINT AND ELECTRONIC INFORMATION ON HEALTH ISSUES.

(H) FUNDING THE RECOMMENDATIONS OF THE TASK FORCE.

S 3. This act shall take effect December 1, 2015.