

6227

2015-2016 Regular Sessions

I N A S S E M B L Y

March 18, 2015

Introduced by M. of A. MORELLE, ROBINSON, LAVINE, COOK, RIVERA, HOOPER, MOYA, McDONALD, ROBERTS, LUPARDO, BROOK-KRASNY, ROSENTHAL, GUNTHER, MAGNARELLI -- Multi-Sponsored by -- M. of A. ABBATE, ARROYO, BRENNAN, GALEF, MAGEE, MOSLEY -- read once and referred to the Committee on Health

AN ACT to amend the social services law, in relation to establishing a health technology assessment committee within the medical assistance program; and to repeal section 365-d of such law relating to early and periodic screening diagnosis and treatment outreach demonstration projects

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

1 Section 1. Section 365-d of the social services law is REPEALED and a
2 new section 365-d is added to read as follows:
3 S 365-D. HEALTH TECHNOLOGY ASSESSMENT COMMITTEE. 1. THE DEPARTMENT
4 SHALL CONVENE A HEALTH TECHNOLOGY ASSESSMENT COMMITTEE. THE COMMITTEE
5 SHALL, AT THE REQUEST OF THE COMMISSIONER, PROVIDE ADVICE AND MAKE
6 RECOMMENDATIONS REGARDING COVERAGE OF HEALTH TECHNOLOGY FOR PURPOSES OF
7 THE MEDICAL ASSISTANCE PROGRAM. THE COMMISSIONER SHALL CONSULT SUCH
8 COMMITTEE PRIOR TO ANY DETERMINATION TO EXCLUDE FROM COVERAGE ANY HEALTH
9 TECHNOLOGY FROM THE MEDICAL ASSISTANCE PROGRAM. FOR PURPOSES OF THIS
10 SECTION, "HEALTH TECHNOLOGY" MEANS MEDICAL DEVICES AND SURGICAL PROCE-
11 DURES USED IN THE PREVENTION, DIAGNOSIS AND TREATMENT OF DISEASE AND
12 OTHER MEDICAL CONDITIONS.
13 2. (A) THE HEALTH TECHNOLOGY ASSESSMENT COMMITTEE SHALL CONSIST OF
14 THIRTEEN MEMBERS, SEVEN OF WHOM SHALL BE APPOINTED BY THE COMMISSIONER,
15 THREE MEMBERS SHALL BE APPOINTED BY THE TEMPORARY PRESIDENT OF THE
16 SENATE, AND THREE MEMBERS SHALL BE APPOINTED BY THE SPEAKER OF THE
17 ASSEMBLY. MEMBERS SHALL SERVE THREE YEAR TERMS; EXCEPT THAT FOR THE
18 INITIAL APPOINTMENTS TO THE COMMITTEE, THREE MEMBERS APPOINTED BY THE
19 COMMISSIONER, AND ONE OF THE MEMBERS APPOINTED BY THE TEMPORARY PRESI-

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

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1 DENT OF THE SENATE AND BY THE SPEAKER OF THE ASSEMBLY, SHALL SERVE ONE
2 YEAR TERMS, THREE MEMBERS APPOINTED BY THE COMMISSIONER, AND ONE OF THE
3 MEMBERS APPOINTED BY THE TEMPORARY PRESIDENT OF THE SENATE AND BY THE
4 SPEAKER OF THE ASSEMBLY, SHALL SERVE TWO YEAR TERMS; AND THE REMAINING
5 THREE MEMBERS SHALL SERVE THREE YEAR TERMS. COMMITTEE MEMBERS MAY BE
6 REAPPOINTED UPON THE COMPLETION OF THEIR TERMS. WITH THE EXCEPTION OF
7 THE CHAIRPERSON, NO MEMBER OF THE COMMITTEE SHALL BE AN EMPLOYEE OF THE
8 STATE OR ANY POLITICAL SUBDIVISION OF THE STATE, OTHER THAN FOR HIS OR
9 HER MEMBERSHIP ON THE COMMITTEE, EXCEPT FOR EMPLOYEES OF HEALTH CARE
10 FACILITIES OR UNIVERSITIES OPERATED BY THE STATE, A PUBLIC BENEFIT
11 CORPORATION, THE STATE UNIVERSITY OF NEW YORK OR MUNICIPALITIES.

12 (B) THE MEMBERSHIP OF SUCH COMMITTEE SHALL BE AS FOLLOWS:

13 (I) THREE PERSONS LICENSED AND ACTIVELY ENGAGED IN THE PRACTICE OF
14 MEDICINE IN THIS STATE;

15 (II) ONE PERSON LICENSED AND ACTIVELY ENGAGED IN THE PRACTICE OF NURS-
16 ING AS A NURSE PRACTITIONER, OR IN THE PRACTICE OF MIDWIFERY IN THIS
17 STATE;

18 (III) ONE PERSON WHO IS A REPRESENTATIVE OF A HEALTH TECHNOLOGY OR
19 MEDICAL DEVICE ORGANIZATION WITH A REGIONAL, STATEWIDE OR NATIONAL
20 CONSTITUENCY;

21 (IV) ONE PERSON WITH EXPERTISE IN HEALTH TECHNOLOGY ASSESSMENT WHO IS
22 A HEALTH CARE PROFESSIONAL LICENSED UNDER TITLE EIGHT OF THE EDUCATION
23 LAW;

24 (V) THREE PERSONS WHO SHALL BE CONSUMERS OR REPRESENTATIVES OF ORGAN-
25 IZATIONS WITH A REGIONAL OR STATEWIDE CONSTITUENCY AND WHO HAVE BEEN
26 INVOLVED IN ACTIVITIES RELATED TO HEALTH CARE CONSUMER ADVOCACY;

27 (VI) ONE PERSON WHO IS A REPRESENTATIVE OF A HOSPITAL ORGANIZATION
28 WITH A REGIONAL, NATIONAL OR STATEWIDE CONSTITUENCY;

29 (VII) ONE PERSON WHO IS A REPRESENTATIVE OF A HEALTH INSURANCE OR
30 MANAGED CARE ORGANIZATION WITH A REGIONAL, NATIONAL OR STATEWIDE CONSTI-
31 TUENCY;

32 (VIII) ONE PERSON WHO IS A HEALTH ECONOMIST; AND

33 (IX) A MEMBER OF THE DEPARTMENT WHO SHALL ACT AS CHAIRPERSON AS DESIG-
34 NATED BY THE COMMISSIONER.

35 (C) THE COMMITTEE MAY INVITE AND CONSULT WITH SCIENTIFIC, TECHNICAL OR
36 CLINICAL EXPERTS WITH DEMONSTRATABLE EXPERIENCE OR KNOWLEDGE OF THE
37 TECHNOLOGY UNDER REVIEW.

38 3. THE HEALTH TECHNOLOGY ASSESSMENT COMMITTEE SHALL BE A PUBLIC BODY
39 UNDER ARTICLE SEVEN OF THE PUBLIC OFFICERS LAW AND SUBJECT TO ARTICLE
40 SIX OF THE PUBLIC OFFICERS LAW. THE DEPARTMENT SHALL PROVIDE INTERNET
41 ACCESS TO ALL MEETINGS OF SUCH COMMITTEE THROUGH THE DEPARTMENT'S
42 WEBSITE.

43 4. THE MEMBERS OF THE HEALTH TECHNOLOGY ASSESSMENT COMMITTEE SHALL
44 RECEIVE NO COMPENSATION FOR THEIR SERVICES BUT SHALL BE REIMBURSED FOR
45 EXPENSES ACTUALLY AND NECESSARILY INCURRED IN THE PERFORMANCE OF THEIR
46 DUTIES. COMMITTEE MEMBERS SHALL BE DEEMED TO BE EMPLOYEES OF THE DEPART-
47 MENT FOR PURPOSES OF SECTION SEVENTEEN OF THE PUBLIC OFFICERS LAW, AND
48 SHALL NOT PARTICIPATE IN ANY MATTER FOR WHICH A CONFLICT OF INTEREST
49 EXISTS.

50 5. THE HEALTH TECHNOLOGY ASSESSMENT COMMITTEE SHALL, AT THE REQUEST OF
51 THE COMMISSIONER, CONSIDER ANY MATTER RELATING TO HEALTH TECHNOLOGY
52 ASSESSMENT. THE COMMISSIONER SHALL PROVIDE MEMBERS OF THE COMMITTEE
53 WITH ANY EVIDENCE OR INFORMATION RELATED TO THE HEALTH TECHNOLOGY
54 ASSESSMENT INCLUDING, BUT NOT LIMITED TO, INFORMATION SUBMITTED BY
55 MEMBERS OF THE PUBLIC. THE COMMISSIONER SHALL PROVIDE SIXTY DAYS PUBLIC
56 NOTICE ON THE DEPARTMENT'S WEBSITE PRIOR TO ANY MEETING OF THE COMMITTEE

1 TO DEVELOP RECOMMENDATIONS CONCERNING HEALTH TECHNOLOGY COVERAGE DETER-
2 MINATIONS. SUCH NOTICE SHALL INCLUDE A DESCRIPTION OF THE PROPOSED
3 HEALTH TECHNOLOGY TO BE REVIEWED, THE CONDITIONS OR DISEASES IMPACTED BY
4 THE HEALTH TECHNOLOGY, THE PROPOSALS TO BE CONSIDERED BY THE COMMITTEE,
5 AND THE SYSTEMATIC EVIDENCE-BASED ASSESSMENT PREPARED IN ACCORDANCE WITH
6 THIS SUBDIVISION. THE COMMITTEE SHALL ALLOW INTERESTED PARTIES A
7 REASONABLE OPPORTUNITY TO MAKE AN ORAL PRESENTATION TO THE COMMITTEE
8 RELATED TO THE HEALTH TECHNOLOGY TO BE REVIEWED AND TO SUBMIT WRITTEN
9 INFORMATION. THE COMMITTEE SHALL CONSIDER ANY INFORMATION PROVIDED BY
10 ANY INTERESTED PARTY, INCLUDING, BUT NOT LIMITED TO, HEALTH CARE PROVID-
11 ERS, HEALTH CARE FACILITIES, PATIENTS, CONSUMERS AND MANUFACTURERS. FOR
12 ALL HEALTH TECHNOLOGIES SELECTED FOR REVIEW, THE COMMISSIONER SHALL
13 CONDUCT A SYSTEMATIC EVIDENCE-BASED ASSESSMENT OF THE HEALTH TECHNOLO-
14 GY'S SAFETY AND CLINICAL EFFICACY. THE ASSESSMENT SHALL USE ESTABLISHED
15 SYSTEMATIC REVIEW ELEMENTS, SUCH AS A PICO (POPULATION, INTERVENTION,
16 COMPARATOR AND OUTCOMES) STATEMENT, KEY QUESTIONS, PRESPECIFIED INCLU-
17 SION AND EXCLUSION CRITERIA, STUDY QUALITY ASSESSMENT, AND DATA SYNTHESIS.
18 UPON COMPLETION, THE SYSTEMATIC, EVIDENCE-BASED ASSESSMENT SHALL BE
19 MADE AVAILABLE TO THE PUBLIC.

20 6. THE COMMISSIONER SHALL PROVIDE NOTICE OF ANY COVERAGE RECOMMENDA-
21 TIONS DEVELOPED BY THE COMMITTEE BY MAKING SUCH INFORMATION AVAILABLE ON
22 THE DEPARTMENT'S WEBSITE. SUCH PUBLIC NOTICE SHALL INCLUDE: A SUMMARY OF
23 THE DELIBERATIONS OF THE COMMITTEE; A SUMMARY OF THE POSITIONS OF THOSE
24 MAKING PUBLIC COMMENTS AT MEETINGS OF THE COMMITTEE AND ANY SAFETY AND
25 HEALTH OUTCOMES DATA SUBMITTED BY ANY INTERESTED PARTY; THE RESPONSE OF
26 THE COMMITTEE TO THOSE COMMENTS, IF ANY; THE CLINICAL EVIDENCE UPON
27 WHICH THE COMMITTEE BASES ITS RECOMMENDATIONS; AND THE FINDINGS AND
28 RECOMMENDATIONS OF THE COMMITTEE INCLUDING A FINAL EVIDENCE-BASED
29 SYSTEMATIC ASSESSMENT.

30 7. THE COMMISSIONER SHALL PROVIDE PUBLIC NOTICE ON THE DEPARTMENT'S
31 WEBSITE OF HIS OR HER FINAL DETERMINATION, INCLUDING: THE NATURE OF THE
32 DETERMINATION; AN ANALYSIS OF THE IMPACT OF THE COMMISSIONER'S DETERMI-
33 NATION ON STATE PUBLIC HEALTH PLAN POPULATIONS AND PROVIDERS; AND THE
34 PROJECTED FISCAL IMPACT TO THE STATE PUBLIC HEALTH PLAN PROGRAMS OF THE
35 COMMISSIONER'S DETERMINATION. THE COMMISSIONER'S FINAL DETERMINATION
36 SHALL NOT OCCUR PRIOR TO THE THIRTIETH DAY FROM THE POSTING OF THE
37 COMMITTEE'S RECOMMENDATIONS AND FINDINGS ON THE DEPARTMENT'S WEBSITE.

38 8. THE RECOMMENDATIONS OF THE HEALTH TECHNOLOGY ASSESSMENT COMMITTEE,
39 MADE PURSUANT TO THIS SECTION, SHALL BE BASED ON A REVIEW OF THE
40 EVIDENCE PRESENTED TO THE COMMITTEE, INCLUDING CLINICAL EFFECTIVENESS,
41 PATIENT OUTCOMES, IMPACT ON AT RISK AND UNDERSERVED POPULATIONS, AND
42 SAFETY. THE COMMITTEE SHALL TRIENNIALLY REVIEW PREVIOUS RECOMMENDATIONS
43 OF THE COMMITTEE AND PERMIT ORAL PRESENTATIONS AND THE SUBMISSION OF NEW
44 EVIDENCE AT SUCH TRIENNIAL REVIEW. SUCH REVIEW SHALL OCCUR PURSUANT TO
45 THE PROCEDURE ESTABLISHED IN SUBDIVISIONS FIVE AND SIX OF THIS SECTION.
46 THE COMMISSIONER MAY ALTER OR REVOKE HIS OR HER FINAL DETERMINATION
47 AFTER SUCH TRIENNIAL REVIEW PURSUANT TO THE PROCEDURE ESTABLISHED IN
48 SUBDIVISION SEVEN OF THIS SECTION.

49 9. THE DEPARTMENT SHALL PROVIDE ADMINISTRATIVE SUPPORT TO THE COMMIT-
50 TEE.

51 S 2. This act shall take effect immediately.