

STATE OF NEW YORK

10929

IN ASSEMBLY

May 29, 2018

Introduced by M. of A. CAHILL -- read once and referred to the Committee on Health

AN ACT to amend the public health law, in relation to convening an office-based surgery workgroup to make recommendations regarding appropriate reforms or policy changes necessary and in the best interest of the public

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

1 Section 1. The public health law is amended by adding a new section
2 230-e to read as follows:

3 § 230-e. Office-based surgery workgroup. 1. An office-based surgery
4 workgroup shall be convened and shall consist of nine members appointed
5 by the governor. Two members shall be appointed on the recommendation of
6 the speaker of the assembly and two members shall be appointed on the
7 recommendation of the temporary president of the senate and shall
8 consist of two representatives of the office-based surgery industry, one
9 representative of health plans, one representative of the accreditation
10 agencies, one representative of a statewide society representing physi-
11 cians and two consumers and shall be co-chaired by the superintendent of
12 financial services and the commissioner. Such representatives of the
13 workgroup must represent different regions of the state. The members
14 shall receive no compensation for their services but shall be allowed
15 their actual and necessary expenses incurred in the performance of their
16 duties.

17 2. The workgroup shall review the history of office-based surgery
18 since enactment of accreditation requirements for office-based surgery
19 entities pursuant to section two hundred thirty-d of this title and any
20 impacts including trends, upwards or downwards, in size, specialty and
21 geographic distribution of office-based surgery practices and compar-
22 isons with other out-patient surgical settings especially related to
23 patient access, safety and rates of reimbursement paid by health plans.
24 Based on this review, such workgroup shall make recommendations regard-
25 ing appropriate reforms or policy changes necessary and in the best
26 interest of the public and considering the following factors:

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

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1 (a) current scientific or medical research directly examining office-
2 based surgery and patient outcomes;

3 (b) trends in access to out-patient surgical care;

4 (c) trends in reimbursement rates for out-patient surgical care across
5 all settings and the actual costs of out-patient surgical care;

6 (d) regional differences regarding access and costs;

7 (e) the impact rates of reimbursement across settings have on consum-
8 ers who access out-patient surgery services;

9 (f) the impact rates of reimbursement across settings have on health
10 plan premium costs;

11 (g) patient claims data from all health plans both public and private
12 as well as charge data from medical professionals and hospitals avail-
13 able through the all payer database and office-based surgery related
14 data required pursuant to section two hundred three-d of this title; and

15 (h) other issues deemed appropriate by members of the workgroup and
16 either the superintendent of financial services or the commissioner.

17 3. The workgroup shall review the availability of out-patient surgery
18 services in terms of patient access and cost by region of the state and
19 make recommendations taking into consideration the following factors:

20 (a) the extent to which office-based surgery is available in each
21 region in this state;

22 (b) the extent to which and diversity of specialties in office-based
23 surgery is available in every region in this state, including the most
24 common specialties and subspecialty services; and

25 (c) other issues deemed appropriate by the members of the workgroup
26 and either the superintendent of financial services or the commissioner.

27 4. The workgroup shall report its findings and make recommendations
28 for legislation and regulations to the governor, the speaker of the
29 assembly, the senate majority leader, the chairs of the insurance and
30 health committees in both the assembly and the senate, and the super-
31 intendent of financial services no later than April first, two thousand
32 nineteen.

33 § 2. This act shall take effect immediately.