2187--A

2017-2018 Regular Sessions

IN ASSEMBLY

January 17, 2017

Introduced by M. of A. MORELLE -- read once and referred to the Committee on Health -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee

AN ACT to amend the social services law and the public health law, in relation to pediatric day-respite centers and care

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

1	Section 1. The social services law is amended by adding a new section
2	367-j to read as follows:
3	<u>§ 367-j. Pediatric day-respite centers and care. 1. As used in this</u>
4	section, the following terms shall have the following meanings:
5	(a) "Pediatric day-respite center" means a facility that provides a
б	structured day program of therapeutic social, developmental, and educa-
7	tional activities and programs, as well as onsite health care and pedia-
8	tric day-respite services for up to ten consecutive hours per day to
9	medically fragile children under twenty-one years of age.
10	(b) "Pediatric day-respite care" means up to ten consecutive hours of
11	daytime relief for a medically fragile child's parent or guardian, and
12	developmentally appropriate programming for the child, including but not
13	limited to pediatric nursing services and supervision, meals, social
14	activities, and group educational enrichment programs.
15	(c) "Medically fragile child" means a child under twenty-one years of
16	age who is at risk of hospitalization or institutionalization, including
17	but not limited to a child who is technologically-dependent for life or
18	health-sustaining functions, requires a complex medication regimen or
19	medical interventions to maintain or to improve his or her health
20	status, or is in need of ongoing assessment or intervention to prevent
21	serious deterioration of his or her health status or medical compli-
22	cations that place his or her life, health or development at risk, but
23	who is capable of being cared for at home (including if provided with

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

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<u>management services and continuous nursing services</u>). <u>2. Services, including nursing services, that (a) would otherwise be</u> <u>reimbursable under this title, (b) are pediatric day-respite care, (c)</u>
reimbursable under this title, (b) are pediatric day-respite care, (c)
are provided at a pediatric day-respite center, and (d) are provided to
a medically fragile child enrolled in medical assistance under this
title, shall be reimbursable under this title.
3. The commissioner shall make regulations under this section, includ-
ing procedures and requirements for an entity to qualify as a pediatric
<u>day-respite center.</u>
§ 2. The public health law is amended by adding a new section 2512 to
read as follows:
§ 2512. Pediatric day-respite centers and care. 1. As used in this
section, the following terms shall have the following meanings:
(a) "Pediatric day-respite center" means a facility that provides a
structured day program of therapeutic social, developmental, and educa-
tional activities and programs, as well as onsite health care and pedia-
tric day-respite services for up to ten consecutive hours per day to
medically fragile children under twenty-one years of age.
(b) "Pediatric day-respite care" means up to ten consecutive hours of
daytime relief for a medically fragile child's parent or guardian, and
developmentally appropriate programming for the child, including but not
limited to pediatric nursing services and supervision, meals, social
activities, and group educational enrichment programs.
(c) "Medically fragile child" means a child under twenty-one years of
age who is at risk of hospitalization or institutionalization, including
but not limited to a child who is technologically-dependent for life or
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health-sustaining functions, requires a complex medication regimen or medical interventions to maintain or to improve his or her health status, or is in need of ongoing assessment or intervention to prevent serious deterioration of his or her health status or medical compli- cations that place his or her life, health or development at risk, but who is capable of being cared for at home (including if provided with
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47 other actions reasonably necessary to implement this act on such date.