STATE OF NEW YORK

8474

IN SENATE

May 8, 2018

Introduced by Sen. HANNON -- read twice and ordered printed, and when printed to be committed 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 230-e to read as follows:

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§ 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 the speaker of the assembly and two members shall be appointed on the recommendation of the temporary president of the senate and shall consist of two representatives of the office-based surgery industry, one representative of health plans, one representative of the accreditation agencies, one representative of a statewide society representing physicians and two consumers and shall be co-chaired by the superintendent of financial services and the commissioner. Such representatives of the workgroup must represent different regions of the state. The members shall receive no compensation for their services but shall be allowed 15 their actual and necessary expenses incurred in the performance of their duties.

2. The workgroup shall review the history of office-based surgery since enactment of accreditation requirements for office-based surgery entities pursuant to section two hundred thirty-d of this title and any impacts including trends, upwards or downwards, in size, specialty and geographic distribution of office-based surgery practices and compar-22 isons with other out-patient surgical settings especially related to patient access, safety and rates of reimbursement paid by health plans. Based on this review, such workgroup shall make recommendations regarding 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.

LBD15775-01-8

S. 8474 2

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

- (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;
 - (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 (q) patient claims data from all health plans both public and private as well as charge data from medical professionals and hospitals avail-12 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 (h) other issues deemed appropriate by members of the workgroup and 15
- 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 surgery is available in every region in this state, including the most 23 common specialties and subspecialty services; and 24
 - (c) other issues deemed appropriate by the members of the workgroup and either the superintendent of financial services or the commissioner.
- 27 4. The workgroup shall report its findings and make recommendations for legislation and regulations to the governor, the speaker of the 28 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.

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33 § 2. This act shall take effect immediately.