

STATE OF NEW YORK

844

2017-2018 Regular Sessions

IN ASSEMBLY

January 9, 2017

Introduced by M. of A. GUNTHER, CUSICK, TITONE, JAFFEE, COLTON, MOSLEY, BARRETT, MONTESANO, CROUCH -- Multi-Sponsored by -- M. of A. ARROYO, McDONOUGH, PAULIN, RIVERA, SANTABARBARA -- read once and referred to the Committee on Mental Health

AN ACT to amend the mental hygiene law, in relation to defining a bill of rights for persons with autism or autism spectrum disorders

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

1 Section 1. The mental hygiene law is amended by adding a new section
2 16.39 to read as follows:

3 § 16.39 Bill of rights for persons with autism or autism spectrum disorders.
4

5 (a) Both early intervention and continuing treatment are integral to
6 the healthcare of those diagnosed with autism or autism spectrum disorders.
7 Insurance companies shall not discriminate against individuals
8 with such diagnoses by imposing financial burdens and barriers to treat-
9 ment such as differential deductibles, disparate co-pays, spending caps,
10 and arbitrary limits on access to medically necessary inpatient and/or
11 outpatient services.

12 (b) All persons with autism or autism spectrum disorders shall have
13 the following rights:

14 (1) the right to an increased investment in high-quality research on
15 the origin, diagnosis and treatment of autism and autism spectrum disorders;
16

17 (2) the right to access, and have their parents and/or guardians
18 access, a comprehensive continuum of care based on the patient's needs-
19 -including a full range of psychosocial, behavioral, pharmacological and
20 educational services--regardless of the cost;

21 (3) the right to receive treatment within a coordinated system of care
22 where all agencies delivering services (including but not limited to

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

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1 health, mental health, child welfare, juvenile justice and education)
2 work together to optimize treatment outcome;

3 (4) the right to receive in-home care, as well as treatment in commu-
4 nity-based settings as close to home as possible;

5 (5) the right to receive care from highly qualified professionals who
6 act in the best interests of the patient and family;

7 (6) the right to treatment that is family-driven and patient-focused.
8 Parents and/or guardians (and patients when appropriate) must have the
9 primary decision-making role with regard to treatment;

10 (7) the right to receive, and have their parents and/or guardians
11 receive, all information regarding the risks, benefits and anticipated
12 outcomes of all available treatment options that is necessary to facili-
13 tate educated decisions and informed consent;

14 (8) the right to access, and have their parents and/or guardians
15 access, mental health professionals with appropriate training and expe-
16 rience. Primary care professionals providing mental health services
17 must have access to consultation and referral resources from qualified
18 mental health professionals; and

19 (9) the right to appropriate monitoring of pharmaceutical treatment
20 for mental disorders, both to optimize the benefits and to minimize any
21 risks or potential side-effects associated with such treatments.

22 § 2. This act shall take effect immediately.