## STATE OF NEW YORK

6345

2017-2018 Regular Sessions

## IN SENATE

May 11, 2017

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 physician-home care collaboratives supporting primary care, public health and medical management

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

Section 1. Paragraph (a) of subdivision 4 of section 2805-x of the public health law, as added by section 48 of part B of chapter 57 of the 2 laws of 2015, is amended to read as follows:

- (a) Hospital-home care-physician integration initiatives, including 5 but not limited to:
  - (i) transitions in care initiatives to help effectively transition patients to post-acute care at home, coordinate follow-up care and address issues critical to care plan success and readmission avoidance;
- (ii) clinical pathways for specified conditions, quiding patients' 10 progress and outcome goals, as well as effective health services use;
- (iii) application of telehealth/telemedicine services in monitoring and managing patient conditions, and promoting self-care/management, 12 improved outcomes and effective services use;
- 14 (iv) physician-home care agency collaboratives supporting primary 15 care, public health and medical management;
  - (v) facilitation of physician house calls to homebound patients and/or to patients for whom such home visits are determined necessary and effective for patient care management;
- [(v)] (vi) additional models for prevention of avoidable hospital 19 20 readmissions and emergency room visits;
- 21 [(vi)] (vii) health home development;
- 22 [(vii) development and demonstration of new models of inte-
- 23 grated or collaborative care and care management not otherwise achieva-
- 24 ble through existing models; and

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

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[(viii)] (ix) bundled payment demonstrations for hospital-to-post-acute-care for specified conditions or categories of conditions, in
particular, conditions predisposed to high prevalence of readmission,
including those currently subject to federal/state penalty, and other
discharges with extensive post-acute needs;

§ 2. This act shall take effect immediately.