STATE OF NEW YORK

990

2019-2020 Regular Sessions

IN SENATE

January 9, 2019

Introduced by Sens. YOUNG, AKSHAR, AMEDORE, FELDER, GALLIVAN, RANZENHOFER, RITCHIE -- read twice and ordered printed, and when printed to be committed to the Committee on Finance

AN ACT to amend the public health law, in relation to requiring facilities to screen newborns for neonatal abstinence syndrome through toxicological screening of infants' meconium or urine

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

Section 1. Legislative intent. The legislature hereby finds that neonatal abstinence syndrome (NAS) is a public health crisis affecting all levels of society in New York state. Newborns have an alarmingly high rate of testing positive for NAS as a result of high rates of addiction to narcotics and other drugs in many regions of the state. Addressing this public health crisis serves the public interest by helping to ensure that newborns in this state receive appropriate treatment as early as possible to prevent adverse health outcomes.

Between 2010 and 2012, there were 5,857 newborn drug-related diagnoses in this state, a rate of 83.8 diagnoses per 10,000 births. In each of those years, the number of newborns diagnosed with a drug-related illness increased. In the United States, between 2000 and 2009, the number of newborns reported to have neonatal abstinence syndrome nearly tripled. This is indicative of a public health crisis affecting all regions of the state and nation.

Current methods for detecting NAS are inadequate, relying heavily on newborn observation and questioning of the mother regarding opiate or narcotic use. In many instances, newborns are taken home after twenty-four to forty-eight hours. This time period may be inadequate for observation to detect NAS symptoms. Toxicological testing of a newborn's meconium or urine allows hospitals to detect NAS early, thereby enabling such facilities to begin treatment to prevent future adverse health outcomes.

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

LBD03088-01-9

§ 2. Paragraph 1 of subdivision (a) of section 2500-a of the public health law, as amended by chapter 307 of the laws of 2018, is amended to read as follows:

1. It shall be the duty of the administrative officer or other person in charge of each institution caring for infants twenty-eight days or less of age and the person required in pursuance of the provisions of section forty-one hundred thirty of this chapter to register the birth of a child, to cause to have administered to every such infant or child in its or his care a test for:

i. phenylketonuria,

ii. homozygous sickle cell disease,

iii. hypothyroidism,

iv. branched-chain ketonuria,

v. galactosemia,

vi. homocystinuria,

vii. critical congenital heart defects through pulse oximetry screening,

viii. with regard to any newborn infant who is identified as, or suspected of, having a hearing impairment as a result of a screening conducted pursuant to section twenty-five hundred-g of this title, cause to be administered to such infant a urine polymerase chain reaction (PCR) test for cytomegalovirus, unless the parent of the infant objects thereto; provided that if the commissioner determines that another test for cytomegalovirus is diagnostically equivalent to or better than the urine polymerase chain reaction test, the commissioner may, by regulation under this section, allow or require the use of that other test, [~~and~~]

ix. neonatal abstinence syndrome, and

[~~ix.~~] **x.** such other diseases and conditions as may from time to time be designated by the commissioner in accordance with rules or regulations prescribed by the commissioner.

§ 3. This act shall take effect on the one hundred eightieth day after it shall have become a law; provided, however, that if chapter 307 of the laws of 2018 shall not have taken effect on or before such date then section two of this act shall take effect on the same date and in the same manner as such chapter of the laws of 2018 takes effect. Effective immediately, the addition, amendment and/or repeal of any rule or regulation necessary for the implementation of this act on its effective date are authorized and directed to be made and completed on or before such effective date.