STATE OF NEW YORK

8779

IN SENATE

July 15, 2020

Introduced by Sen. STEWART-COUSINS -- read twice and ordered printed, and when printed to be committed to the Committee on Rules

AN ACT to amend the public health law, in relation to aiding in the transition to adulthood for children with medical fragility living in pediatric nursing homes and other settings

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

Section 1. The public health law is amended by adding a new section 2808-e to read as follows:

§ 2808-e. Residential health care for children with medical fragility in transition to young adults and young adults with medical fragility. 1. For purposes of this section:

(a) "children with medical fragility" shall mean children up to twenty-one years of age who have a chronic debilitating condition or conditions, are at risk of hospitalization, are technology-dependent for life or health sustaining functions, require complex medication regimens or medical interventions to maintain or to improve their health status, and/or are in need of ongoing assessment or intervention to prevent serious deterioration of their health status or medical complications that place their life, health or development at risk.

(b) "young adults with medical fragility" shall mean individuals who meet the definition of children with medical fragility, but for the fact such individuals are aged twenty-one years or older.

(c) "pediatric residential health care facility" shall mean a free-standing facility or discrete unit within a facility authorized by the commissioner to provide extensive nursing, medical, psychological and counseling support services solely to children.

2. Notwithstanding any law, rule or regulation to the contrary, any child with medical fragility who has resided for at least thirty consecutive days in a pediatric residential health care facility and who has reached the age of twenty-one while a resident, may continue residing at such pediatric facility and receiving such services from the facility, provided that such young adult with medical fragility remains eligible for nursing home care.

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

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3. The commissioner is authorized to establish, with the written approval of the public health and health planning council pursuant to section twenty-eight hundred one-a of this article, one or more new residential health care facilities for the provision of nursing, medical, psychological and counseling support services appropriate to the needs of nursing home-eligible young adults with medical fragility, referred to herein below as a young adult facility, which such young adult facility may be proposed by an established or proposed operator of a pediatric residential health care facility or a discrete unit within an established nursing home in good standing.

4. A young adult facility established pursuant to subdivision three of this section may admit, from the community-at-large or upon referral from an unrelated facility, young adults with medical fragility who prior to reaching age twenty-one were children with medical fragility, and who are eligible for nursing home care and in need of extensive nursing, medical, psychological and counseling support services, provided that the young adult facility, to promote continuity of care, undertakes to provide priority admission to young adults with medical fragility transitioning from the pediatric residential health care facility operated by the entity that proposed the young adult facility and ensure sufficient capacity to admit such young adults as they approach or attain twenty-one years of age.

5. (a) For inpatient services provided to any young adults with medical fragility eligible for medical assistance pursuant to title eleven of article five of the social services law residing at any pediatric residential health care facility as authorized in subdivision two of this section, the commissioner shall reimburse such pediatric facility at the same rates of reimbursement approved by the commissioner for children with medical fragility residing at said pediatric residential health care facility pursuant to section twenty-eight hundred eight of this article.

(b) For inpatient services provided to any young adults with medical fragility eligible for medical assistance pursuant to title eleven of article five of the social services law at any young adult facility as authorized in subdivision three of this section, the commissioner shall establish the operating component of rates of reimbursement utilizing the same methodology used to establish the operating component of the rates pursuant to section twenty-eight hundred eight of this article for the free-standing pediatric residential health care facility described in subdivision three of this section, subject to adjustment as appropriate to account for any discrete expenses associated with caring for young adults with medical fragility, including addressing their distinct needs as young adults for psychological and counseling support services.

6. Subject to the foregoing, all other laws and regulations that apply to pediatric residential health care facilities, including exemptions from laws and regulations otherwise applicable to other residential health care facilities, shall also apply to any pediatric residential health care facility authorized in subdivision two of this section to provide inpatient services to young adults with medical fragility and to any young adult facility established pursuant to subdivision three of this section, and to any inpatient services provided by either such facility.

§ 2. This act shall take effect immediately.