

STATE OF NEW YORK

8392--A

2021-2022 Regular Sessions

IN ASSEMBLY

October 20, 2021

Introduced by M. of A. PAULIN, GUNTHER, L. ROSENTHAL, GOTTFRIED, ENGLE-BRIGHT, WOERNER, FAHY, TAYLOR, CARROLL, JACOBSON, GRIFFIN, SIMON, SEAWRIGHT, ASHBY, SAYEGH, BURDICK, JEAN-PIERRE -- Multi-Sponsored by -- M. of A. GALEF, LUPARDO, McDONOUGH -- read once and referred to the Committee on Health -- recommitted to the Committee on Health in accordance with Assembly Rule 3, sec. 2 -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee

AN ACT to amend the public health law and the insurance law, in relation to premium reduction for obstetric practitioners who complete a risk management strategies course

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 2506-a to read as follows:

§ 2506-a. Risk management strategies in obstetrics and midwifery courses. 1. In order to improve patient safety, birth outcomes and to promote informed consultation by patients with their physicians and licensed midwives during the prenatal through intrapartum and postpartum periods, the commissioner shall approve professional education courses for eligible physicians and licensed midwives as provided in subdivision four of this section that covers risk management strategies in obstetrics and midwifery as described in subdivision two of this section. Such risk management strategies courses shall be subject to such standards as the commissioner may prescribe by regulation. In prescribing such regulations, the commissioner may consult with the American Congress of Obstetricians and Gynecologists, New York State Association of Licensed Midwives and other health care organizations. An eligible physician or licensed midwife who successfully completes such risk management strategies course pursuant to this section shall receive continuing medical education credit and a certificate of completion.

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

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2. Courses on risk management strategies during the prenatal through intrapartum and postpartum periods shall promote evidence-based clinical guidelines and patient safety protocols from both the midwifery and obstetrical perspectives. Options for courses should be appropriate for the respective profession and may include information and education addressing risks associated with the practice of obstetrics and midwifery. Course options may include issues such as: methods to eliminate non-medically indicated (elective) deliveries prior to thirty-nine weeks gestation including the neonatal impact of late preterm births; vaginal births after cesarean births and the applicability to a trial of labor; reductions in cesarean births; monitoring of fetal well-being; management of pain in labor; management of maternal hemorrhage, including placenta accreta, hypertension in pregnancy, including pre-eclampsia and eclampsia, vaginal breech and prevention of shoulder dystocia; and other evidence-based guideline determined issues that improve the care and outcomes of women.

3. Attendance at any course approved by the commissioner pursuant to this section may be in person or through distance learning methods which evince that all participants are in attendance for the duration of the course and able to ask questions of the instructor.

4. Physicians who are board certified or are active candidates for board certification in obstetrics and physicians who are board certified or are eligible for board certification in family practice and provide obstetric services and midwives who are licensed in the state are eligible for a risk management strategies course.

5. The commissioner is authorized to prescribe any rules and regulations necessary to implement this section. In prescribing such rules and regulations, the commissioner shall consider the rules and regulations promulgated by the superintendent of financial services pursuant to subsection (e) of section two thousand three hundred forty-three of the insurance law and may consult with the superintendent of financial services.

§ 2. Subsection (e) of section 2343 of the insurance law, as added by chapter 642 of the laws of 1990, is amended and a new subsection (f) is added to read as follows:

(e) The superintendent may approve an actuarially appropriate premium reduction for an insured physician or licensed midwife who successfully completes a risk management course or a course authorized by the commissioner of health under section two thousand five hundred six-a of the public health law, which must be approved by the superintendent subject to such standards as the superintendent may prescribe by regulation. In prescribing such regulation the superintendent may consult with the commissioner of health.

(f) An insured physician or licensed midwife who successfully completes a course authorized by the commissioner of health under section two thousand five hundred six-a of the public health law shall not, during the period set forth in the superintendent's regulations prescribing standards for the premium reduction, also be eligible for additional premium reduction for an insured physician or licensed midwife's medical malpractice insurance policy for successful completion of a risk management course approved by the superintendent under part 152 of title 11 of the New York code of rules and regulations.

§ 3. This act shall take effect one year after it shall have become a law and shall apply to all insurance policies and contracts issued, renewed, modified or altered on and after such effective date. The commissioner of health and the superintendent of financial services are

1 authorized and directed to adopt, amend, suspend or repeal regulations
2 and take other actions necessary for the implementation of this act
3 prior to such effective date; provided, however, that such adoption,
4 amendment, suspension or repeal of regulations shall not have legal
5 effect until this act takes effect.