STATE OF NEW YORK

1412

2021-2022 Regular Sessions

IN SENATE

January 12, 2021

Introduced by Sen. RIVERA -- 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 establishing the asthma prevention and education program

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

Section 1. Legislative findings and purpose. The legislature finds that asthma is a chronic, potentially life-threatening, respiratory illness that affects over a million New Yorkers, including many thousands of children and adolescents. Asthma is the leading cause of school absences attributed to chronic conditions. Asthma is also directly linked to large and growing inpatient bills for medicaid and other health care payers. Therefore, the legislature finds that establishing a comprehensive statewide asthma prevention management and control program which coordinates the efforts of individuals, families, health care providers, schools and community-based organizations is in the public interest and would benefit the people of the state of New York.

§ 2. The public health law is amended by adding a new article 27-BB to read as follows:

ARTICLE 27-BB

ASTHMA DISEASE MANAGEMENT AND CONTROL

Section 2725. Asthma disease management and control program.
2726. Study of asthma incidence and prevalence.
2727. Asthma disease advisory panel.
2728. Annual report.

§ 2725. Asthma disease management and control program. 1. There is hereby created within the department the asthma disease management and control program (hereinafter referred to in this article as the "program"). The purpose of the program is to promote asthma disease management and education and outreach about asthma to people who suffer

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

LBD06804-01-1

from asthma and their families, health care providers, and the general public.

2. Services to be provided by the program may include:

(a) asthma disease management and case management for patients and their families;

(b) asthma outreach and screening;

(c) the promotion of awareness of the causes of asthma;

(d) education on prevention strategies;

(e) education on proper disease management practices; and

(f) education on available treatment modalities.

3. The commissioner shall make grants within the amounts appropriated therefore to local health agencies, health care providers, schools, school based health centers and community-based organizations, and other organizations with demonstrated interest and expertise in serving persons with asthma to provide the services set out in this section. Grant recipients shall be government entities or not-for-profit organizations.

The commissioner may coordinate grants under this subdivision with the availability of grants from other sources. The commissioner may also accept or seek grants from other sources to enhance the amounts appropriated to the program.

§ 2726. Study of asthma incidence and prevalence. 1. The department shall study the incidence and prevalence of asthma in the state's population and current disease management practices. Such study shall include:

(a) the cause and nature of the disease;

(b) behavioral and environmental triggers;

(c) an assessment of the need for patient-centered case management to meet specific physical and environmental needs of patients;

(d) outcome evaluations, including, but not limited to, patient perceptions of improvement, signs and symptoms of asthma, pulmonary function, history of asthma exacerbations, pharmacotherapy, assessment of hospital emergency room visits for asthma, and patient-provider communication; and

(e) an assessment of the ability of providers, including non-professionals and health care professionals such as physicians, nurses, pharmacists and respiratory therapists, to systemically instruct and develop asthma management plans for patients and frequently review with patients and their families how to manage and control their asthma.

2. The department shall gather data for monitoring the occurrence, frequency, incidence, cause, effect and severity of asthma.

(a) The department may require the following to report data under this subdivision:

i. the statewide planning and research cooperative system (SPARCS);

ii. health maintenance organizations licensed pursuant to article forty-three of the insurance law or certified pursuant to this chapter or an independent practice association certified or recognized pursuant to this chapter;

iii. other insurers;

iv. the Medicaid (title XIX of the federal social security act) program;

v. health facilities;

vi. health care practitioners;

vii. patients: self reporting;

viii. the department of environmental conservation; and

ix. any other source the commissioner deems appropriate.

(b) The department shall compile and analyze data gathered under paragraph (a) of this subdivision and correlate it with data as to places of employment, areas of residence, schools attended, environmental factors including proximity to source of pollution and such other data as the department deems appropriate.

(c) The department shall maintain and compile reported data in a manner suitable for research purposes and shall collect and make such data available to persons in the manner set forth in subdivision three of this section.

3. Any data collected or reported shall not contain the name of any patient, his or her social security number, or any other information which would permit a patient to be identified. The department shall develop a unique, confidential identifier to be used in the collection of patient information as required by this section.

§ 2727. Asthma disease advisory panel. There is hereby created within the department an asthma disease advisory panel. The advisory panel shall advise the commissioner regarding the implementation of programs, studies and reports authorized under this article. The governor shall appoint eleven members to the advisory panel. Two of the members shall be appointed upon the recommendation of the speaker of the assembly, two of the members shall be appointed upon the recommendation of the temporary president of the senate, one of the members shall be appointed upon the recommendation of the minority leader of the assembly, and one of the members shall be appointed upon the recommendation of the minority leader of the senate. The appointees shall be persons knowledgeable in the causes and management of asthma and shall have demonstrated commitment to improving the detection of asthma and the delivery of services to people with asthma. At least one member shall represent the interests of persons with asthma and at least one member shall be knowledgeable of environmental factors relating to asthma.

§ 2728. Annual report. Commencing on the first of January next succeeding the effective date of this section and annually thereafter, the commissioner, in consultation with the advisory panel, shall submit a report regarding the status and accomplishments of the program and provide recommendations to the governor, the temporary president and the minority leader of the senate, and the speaker and the minority leader of the assembly.

§ 3. This act shall take effect on the one hundred eightieth day after it shall have become a law. Effective immediately the addition, amendment and/or repeal of any rule or regulation necessary for the implementation of this act on its effective date is authorized to be made and completed on or before such date.