STATE OF NEW YORK

8048

2021-2022 Regular Sessions

IN ASSEMBLY

June 11, 2021

Introduced by M. of A. BICHOTTE HERMELYN -- read once and referred to the Committee on Health

AN ACT to amend the public health law, in relation to requiring the commissioner of health to prepare and distribute information regarding cervical insufficiency, requiring certain health care providers to provide maternity patients with information about cervical insufficiency and requiring certain health care providers to order a certain ultrasound test for pregnant patients

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

Section 1. This act shall be known and may be cited as the "Eli Parker Levitt Law".

§ 2. The public health law is amended by adding two new sections 2500-l and 2500-m to read as follows:

§ 2500-l. Cervical insufficiency; provision of information. 1. The commissioner shall develop information regarding cervical insufficiency, the risks it entails to a pregnant woman and her child, and medical testing available to diagnose such condition. Such information shall be posted on the department's website with other information available about prenatal care, shall be available upon request to members of the public, and shall be provided to maternal health care providers for distribution to their patients. In preparing the information regarding cervical insufficiency as provided in this subdivision, the commissioner shall consult with appropriate health care professionals, including but not limited to the American College of Obstetricians and Gynecologists and the New York State Association of Licensed Midwives. The commissioner shall ensure that all information is maintained and updated to reflect future changes to clinical guidelines.

2. Every maternal health care provider shall provide the information about cervical insufficiency developed and provided pursuant to subdivision one of this section to each pregnant patient under his or her care.

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

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3. As used in this section:

(a) "cervical insufficiency" means cervical dilation presumed to be due to weakness of cervical tissue, and not explained by another abnormality, that: (i) predisposes a pregnant patient to early labor; or (ii) contributes to or causes midterm miscarriage or premature delivery of a live fetus during the second trimester of the pregnancy; and

(b) "maternal health care provider" or "provider" shall mean a physician, midwife, nurse practitioner, or physician assistant, acting within his or her scope of practice, managing the pregnancy of a pregnant patient.

§ 2500-m. Cervical insufficiency; testing. 1. Unless contraindicated for the patient, each maternal health care provider as defined in section twenty-five hundred-l of this article, shall order a transvaginal ultrasound at least once between the sixteenth and twenty-fourth weeks of pregnancy for each pregnant patient under the provider's care whose pregnancy is of at least sixteen weeks duration.

2. Unless contraindicated for the patient, each maternal health care provider as defined in section twenty-five hundred-l of this article, shall order a transvaginal ultrasound every two weeks from the sixteenth week through the twenty-fourth week of pregnancy for each pregnant patient whose pregnancy is of at least sixteen weeks duration and who has any of the following:

(a) a history of early delivery between thirteen and thirty-seven weeks in any prior pregnancy;

(b) a history of any surgical procedure, including office procedures, performed on the patient's cervix, including but not limited to loop electrosurgical excision procedure (LEEP) and cone biopsy;

(c) multifetal pregnancies;

(d) a uterine unification defect, including but not limited to bicornuate, septate or unicornuate uterus, or any congenital structural defect of a kidney; or

(e) a history of prior delivery occurring at or near term by cesarean after obstructed labor.

3. Nothing in this section shall be construed to require a pregnant patient to proceed with a transvaginal ultrasound ordered in accordance with the provisions of this section.

§ 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 are authorized to be made and completed on or before such date.