7865

IN SENATE

January 13, 2022

Introduced by Sen. BROUK -- read twice and ordered printed, and when printed to be committed to the Committee on Women's Issues

AN ACT to amend the public health law, in relation to maternal depression screenings

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

1 Section 1. Subdivision 1 of section 2500-k of the public health law is amended by adding a new paragraph (c) to read as follows: 2 (c) "Questionnaire" means an assessment tool administered by a 3 licensed health care professional, to detect maternal depression such as 4 5 the Edinburgh Postnatal Depression Scale, the Postpartum Depression 6 Screening Scale, the Beck Depression Inventory, the Patient Health Ques-7 tionnaire, or other validated assessment methods as approved by the 8 commissioner. 9 § 2. Subdivisions 3 and 4 of section 2500-k of the public health law, 10 subdivision 4 as renumbered by chapter 463 of the laws of 2017, are 11 renumbered subdivisions 4 and 5 and a new subdivision 3 is added to read 12 as follows: 13 3. Maternal depression screenings. (a) Maternal health care providers 14 providing prenatal care at a prenatal visit shall invite each pregnant 15 patient to complete a questionnaire and shall review the completed ques-16 tionnaire in accordance with the formal opinions and recommendations of 17 the American College of Obstetricians and Gynecologists. Assessment for 18 maternal depression must be repeated when, in the professional judgment 19 of the maternal health care provider, a reasonable possibility exists that the prequant patient suffers from maternal depression. 20 21 (b) Maternal health care providers providing postnatal care to persons 22 who gave birth shall invite each patient to complete a questionnaire and 23 shall review the completed questionnaire in accordance with the formal 24 opinions of the American College of Obstetricians and Gynecologists. Assessment for maternal depression must be repeated when, in the profes-25 26 sional judgment of the maternal health care provider, a reasonable 27 possibility exists that the pregnant patient suffers from maternal 28 depression.

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

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1	(c) It is recommended that maternal health care providers make the
2	best efforts practicable to contact the person who gave birth within
3	twenty-one days from the date of delivery and use industry practices to
4	detect maternal depression pursuant to this section.
5	<u>(d) Maternal health care providers providing pediatric care to an</u>
б	<u>infant shall invite the infant's mother to complete a questionnaire at</u>
7	any well-child check-up at which the mother is present prior to the
8	infant's first birthday, and shall review the completed questionnaire in
9	accordance with the formal opinions and recommendations of the American
10	College of Obstetricians and Gynecologists, in order to ensure that the
11	health and well-being of the infant is not compromised by an undiagnosed
12	condition of maternal depression in the mother. Assessment for maternal
13	depression must be repeated when, in the professional judgment of the
14	maternal health care provider, a reasonable possibility exists that the
15	pregnant patient suffers from maternal depression.
16	(e) Consent from the mother must be obtained before a maternal health
17	<u>care provider may share results from an assessment with the mother's</u>
18	primary licensed health care professional, unless the mother is deter-
19	mined to present a danger to herself or others.
20	§ 3. This act shall take effect on the one hundred eightieth day after
21	it shall have become a law. Effective immediately, the addition, amend-
22	ment and/or repeal of any rule or regulation necessary for the implemen-
23	tation of this act on its effective date are authorized to be made and
24	completed on or before such effective date.