

STATE OF NEW YORK

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
2 amended by adding a new paragraph (c) to read as follows:

3 (c) "Questionnaire" means an assessment tool administered by a
4 licensed health care professional, to detect maternal depression such as
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
20 that the pregnant patient suffers from maternal depression.

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.
25 Assessment for maternal depression must be repeated when, in the profes-
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 italics (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 (d) Maternal health care providers providing pediatric care to an
6 infant shall invite the infant's mother to complete a questionnaire at
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 care provider may share results from an assessment with the mother's
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.