STATE OF NEW YORK

5448--A

2023-2024 Regular Sessions

IN ASSEMBLY

March 10, 2023

Introduced by M. of A. GUNTHER, JEAN-PIERRE -- read once and referred to the Committee on Health -- reported and referred to the Committee on Ways and Means -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee

AN ACT to amend the public health law, the social services law and the family court act, in relation to establishing the maternal-infant care centers pilot program; and providing for the repeal of such provisions upon expiration thereof

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 2509-d to read as follows:

§ 2509-d. Maternal-infant care centers pilot program. There shall be established a maternal-infant care centers pilot program whereby the commissioner, in consultation with the commissioner of addiction services and supports, shall certify or designate at least four maternal-infant care centers in areas of need in the state. Such centers shall provide cost effective, necessary services and enhance the quality of care for targeted populations in order to demonstrate the effectiveness of such program. Eligible infants shall be under one year of age and be experiencing withdrawal resulting from in utero exposure due to substance use disorder. Such infant withdrawal may be the result of conditions including, but not limited to, neonatal abstinence syndrome or neonatal opioid withdrawal syndrome. The program shall provide more appropriate settings and cost effective care for these infants than hospitals, while also providing supports and services to parents preparing to bring their infants home. Access to such supports shall continue for a period after the infant has left a center. The program shall implement evidence-based clinically appropriate practices shown to reduce the length of stay when compared to standard neonatal intensive care unit care, and support family unification when appropriate for the

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

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family receiving services. The evidence-based practices shall include, but not be limited to, rooming-in, encouraging breastfeeding, providing trauma-informed care to the parent-infant dyad, and evaluating the social determinants of health. Neither a diagnosis of neonatal abstinence syndrome or neonatal opioid withdrawal syndrome, nor admission to a maternal-infant care center, shall by itself constitute evidence of child abuse or maltreatment, or, by itself, justify a report to the state central register of child abuse and maltreatment.

The department shall be responsible for monitoring the quality, appropriateness and effectiveness of the centers and shall report to the legislature within one year of the establishment of the maternal-infant care centers and again within two years of the effective date of this section on the program's effectiveness.

§ 2. Section 420 of the social services law is amended by adding a new subdivision 3 to read as follows:

3. No penalties for failure to report, either criminal or civil, shall apply to individuals who are mandated reporters pursuant to section four hundred thirteen of this title and who do not report suspected abuse or maltreatment based only upon a diagnosis of neonatal abstinence syndrome or neonatal opioid withdrawal syndrome, or admission to a maternal-infant care center established pursuant to section twenty-five hundred nine-d of the public health law, in the absence of any other grounds to suspect abuse or maltreatment.

§ 3. Subparagraph (B) of paragraph (i) of subdivision (f) of section 1012 of the family court act, as amended by chapter 984 of the laws of 1981, is amended to read as follows:

(B) in providing the child with proper supervision or guardianship, by unreasonably inflicting or allowing to be inflicted harm, or a substantial risk thereof, including the infliction of excessive corporal punishment; or by misusing a drug or drugs; or by misusing alcoholic beverages to the extent that he loses self-control of his actions; or by any other acts of a similarly serious nature requiring the aid of the court; provided, however, that where the respondent is voluntarily and regularly participating in a rehabilitative program, including but not limited to a program offered at a maternal-infant care center established pursuant to section twenty-five hundred nine-d of the public health law, evidence that the respondent has repeatedly misused a drug or drugs or alcoholic beverages to the extent that he loses self-control of his actions shall not establish that the child is a neglected child in the absence of evidence establishing that the child's physical, mental or emotional condition has been impaired or is in imminent danger of becoming impaired as set forth in paragraph (i) of this subdivision; or

§ 4. This act shall take effect on the one hundred eightieth day after it shall have become a law, and shall expire and be deemed repealed 4 years after such date. 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 and directed to be made and completed on or before such effective date.