STATE OF NEW YORK

7702

2023-2024 Regular Sessions

IN SENATE

October 13, 2023

Introduced by Sen. WEBB -- read twice and ordered printed, and when printed to be committed to the Committee on Rules

AN ACT to amend the public health law, in relation to establishing a maternal health bill of rights

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 2803-c-2 to read as follows:

§ 2803-c-2. Maternal health bill of rights. 1. a. The commissioner shall require that every health care facility and health care professional who could reasonably foresee having pregnant persons as patients shall adopt and make public the maternal health bill of rights, and shall treat such patients in accordance with the provisions of such bill of rights.

b. Each facility shall post and provide copies of such bill of rights at the initial appointment, the time of pre-booking and at the time of admission to each maternity patient, and upon request to the general public. Such information shall also be provided by every diagnostic and treatment center offering prenatal and/or maternity services.

c. The department shall translate and make available to all facilities the maternal health bill of rights in the ten most common non-English languages spoken by individuals with limited-English proficiency in New York state as based on the most recent United States census.

d. For the purposes of this section:

i. "Treatment" shall mean any and all known medical procedures, tests, medications, and/or care indicated as medically appropriate; and

ii. "Patient" shall mean any pregnant person who is a patient of or receiving care or diagnosis by a health care professional or facility.

2. The maternal health bill of rights shall include, but not be limited to the following:

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

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a. Every patient shall have the right to receive courteous, fair and respectful care and treatment free from mental and physical abuse and discrimination based on race, creed, color, national origin, sexual orientation, gender preference and/or gender presentation;

b. Every patient shall have the right to receive adequate and appropriate medical care, to be informed of their medical condition and all treatment options available and medically indicated, as well as the practitioner's methods of performing or administering such treatments, in addition to any and all known potential direct and indirect effects and risks of such treatment on both the patient and the fetus or fetuses;

c. Every practitioner shall receive informed consent from pregnant patients prior to the performance of any treatment and such consent may not be achieved through any form of coercion or appeals to conscience or morality, allowing the pregnant person to choose, without pressure, which medical treatment agreed to throughout pregnancy and delivery;

d. Every decisionally capable patient shall have the right to refuse and/or revoke consent for any and all treatments even if refusal could result in the loss of life to either the patient or fetus or fetuses;

e. Every patient shall have the right to have their preferences for labor and delivery, whether provided in a written birthing plan or verbally to the provider to be followed by all providers of care and the birthing facility, including but not limited to: birthing position, birthing setting, cultural or religious practices and rituals, use of and access to doulas and/or midwives, electronic fetal monitoring, and birth interventions including episiotomy, amniotomy, use of forceps, vacuum extraction, anesthetics, augmentation of labor, cesarean and vaginal birth after previous cesarean section (VBAC), as long as preferences are medically indicated as safe and not determined to cause harm or create an undue burden on the facility, interrupt hospital procedure or interfere with the provision of care of or create a risk to other patients within the facility;

f. Every patient shall have the right to receive a referral for mental health services when said patient or fetus or fetuses has experienced any adverse outcome as a result of any treatment and/or refusal of any treatment but such mental health services may not be required and patients maintain the right to refuse services;

g. Every patient shall have the right to have privacy in treatment and in caring for personal needs, confidentiality in the treatment of personal and medical records, and security in storing personal possessions;

h. Every patient shall have the right to request a room, doctor or nurse change at any point, and all facilities or providers shall grant such change, if able;

i. Every patient shall have the right to present grievances on behalf of themselves or others, to the facility's staff or administrator, government officials, or to any other person without fear of retaliation or reprisal, and to join with other patients or individuals within or outside of the facility to work for improvements in patient care, as well as to be informed of the mechanisms to report mistreatment, abuse, or suspected bias or discrimination in care; and

j. Every patient shall have the right to be provided information on postnatal services and resources available in their county of residence and to be informed of the warning signs of postpartum depression and to be provided with the 988 Suicide & Crisis Lifeline information upon discharge.

3. Each facility shall prepare a written plan and provide appropriate staff training to implement each patient's rights included in the statement.

4. Each facility shall provide the telephone number and website information for the office of professional medical conduct in the department and the office of the professions in the state education department, in which a patient may report any misconduct that the patient feels may have occurred.

5. Nothing in this section shall be construed to prohibit or negate any other patient rights or care mandates as defined in section twenty-eight hundred three-c and section twenty-eight hundred three-n of this article or other section or article of law.

§ 2. Section 266 of the public health law is amended by adding a new subdivision 7 to read as follows:

7. The department shall post and maintain the maternal health bill of rights established pursuant to section twenty-eight hundred-c-2 of this chapter on the website established under subdivision one of this section.

§ 3. This act shall take effect on the ninetieth day after it shall have become a law.