STATE OF NEW YORK

8162--A

2023-2024 Regular Sessions

IN ASSEMBLY

October 18, 2023

Introduced by M. of A. CUNNINGHAM, BURDICK -- read once and referred to the Committee on Veterans' Affairs -- recommitted to the Committee on Veterans' Affairs in accordance with Assembly Rule 3, sec. 2 -- 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 veterans' services law and the public health law, in relation to establishing a maternity care coordination program for pregnant and postpartum veterans

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

Section 1. Paragraphs (g) and (h) of subdivision 3 of section 19 of the veterans' services law are amended and two new paragraphs (i) and (j) are added to read as follows:

(g) inclusion of the contributions women veterans have made on behalf of the United States and this state on the department's official website; [~~and~~]

(h) preparation of reports on topics including, but not limited to, the demographics of women veterans, the number of women veterans listed by county, and the unique needs of the women veterans population, to the extent such information is available, to the commissioner on the status of women veterans within New York state[~~.~~]*;*

(i) development and implementation of a maternity care program, in consultation with the United States Department of Veterans Affairs, the department of health and the office of mental health, to improve the capacity of maternity care providers to address the unique needs of pregnant and postpartum veterans, particularly regarding mental and behavioral health conditions; and

(j) conspicuously posting on the department's website a link to the federal women veterans call center number 1-855-VA-WOMEN.

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

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§ 2. The veterans' services law is amended by adding a new section 29-b to read as follows:

§ 29-b. Veteran maternity care. The women veterans coordinator shall administer a veteran maternity care program. The duties and responsibilities of the women veterans coordinator with respect to such program shall be:

1. Serving as a liaison between the United States department of veterans affairs (VA) including VA maternity care coordinators located in the state, the department of health and the office of mental health to facilitate better coordination of veteran maternity care in the state and cooperation in addressing issues related to veteran reproductive mental health care;

2. Providing information to maternity care providers and expectant veterans regarding identifying and treating common mental and physical conditions experienced by veterans that can heighten the risk of pregnancy complications;

3. Providing guidance and referral information on maternity care and benefits available to veterans including the VA's maternity care coordination program at all events including but not limited to, seminars required under subdivision six of section four of this article;

4. Developing a system for rapid consultation and referral linkage services for obstetricians and primary care providers statewide who provide care for expectant veterans with service-connected disabilities that may impact a veteran's maternal health;

5. Providing guidance on the identification of signs and symptoms of mental health conditions in expectant veterans to maternity care providers;

6. Raising awareness among maternity care providers of the federal Veterans Community Care Program established pursuant to 38 U.S.C § 1703 and considering ways to encourage and incentivize participation in such program. The coordinator shall make information relevant to such providers available on the department's website, including but not limited to, links to the any continuing medical education material or courses for non-department medical professionals provided on the internet website of the U.S. Department of Veterans Affairs pursuant to section 123 of the VA Maintaining Internal Systems and Strengthening Integrated Outside Networks Act of 2018 (P.L.115-182);

7. Convening as necessary, in conjunction with the commissioners of health and mental health, a workgroup of stakeholders, including but not limited to, hospitals, federal, state, and local health officials, obstetricians, midwives, pediatricians, veterans and veterans advocates to study and evaluate:

(a) ways to improve the capacity of maternity health care providers to deliver high-quality, timely and veteran-centered care;

(b) barriers and challenges in identifying and treating expectant veterans with reproductive health conditions and other service-connected disabilities that may increase the risk of pregnancy and postpartum complications; and

(c) gaps in the services and care provided to pregnant veterans by the federal government and the desirability, feasibility and efficacy of support by the state for such services including but not limited to, home deliveries, services by doulas, and deliveries by direct-entry midwives;

8. Establishing standard protocols and training for health care providers treating pregnant veterans and defining responsibilities for how local suicide prevention coordinators, maternity care coordinators

and women's health clinical leaders should work together to support pregnant veterans with elevated risk factors for suicide; and

9. Collaborating with the maternal mortality review board established pursuant to section twenty-five hundred nine of the public health law to identify trends in the demographics and causes of maternal mortality among veterans. The findings of such collaboration shall be reported to the governor and the legislature at least annually.

§ 3. The public health law is amended by adding a new section 2509-d to read as follows:

§ 2509-d. Veterans reproductive mental health care. 1. As used in this section:

(a) "Maternal health care provider" means a physician, midwife, nurse practitioner, physician assistant, or other health care practitioner acting within their lawful scope of practice, attending a pregnant veteran or a veteran up to one year after childbirth, including a practitioner attending the veteran's child up to one year after childbirth.

(b) "Women veterans coordinator" shall mean the women veterans coordinator appointed pursuant to section nineteen of the veterans' services law.

(c) "Veteran" shall have the same meaning as such term is defined in section one of the veterans' services law and shall also include a veteran who has a qualifying condition, as defined in section one of the veterans' services law, and has received a discharge other than bad conduct or dishonorable from such service, or is a discharged LGBT veteran, as defined in section one of the veterans' services law, and has received a discharge other than bad conduct or dishonorable from such service.

2. (a) The commissioner, in consultation with the commissioner of mental health and the women veterans coordinator, shall make available to maternal health care providers information on veterans reproductive mental health care. The information shall include, but not be limited to:

(i) the importance of identifying whether a patient has served in the military in providing adequate maternal health care to veterans;

(ii) ensuring that all pregnant veteran patients are appropriately screened for depression, intimate partner/domestic violence, military sexual trauma, post-traumatic stress disorder, anxiety, substance abuse, and postpartum depression;

(iii) a summary of the current evidence-based and professional guidelines for the screening of conditions listed in subparagraph (ii) of this paragraph;

(iv) validated, evidence-based tools for screening the conditions listed in subparagraph (ii) of this paragraph;

(vi) information about follow-up support for patients who may require further evaluation, referral, or treatment including, when available, information about specific community resources and entities licensed by the office of mental health; and

(vii) information on engaging support for the veteran, which may include communicating with the other parent of the child and other family members, as appropriate and consistent with patient confidentiality.

(b) The information on veterans reproductive mental health care shall be posted on the department's website. The commissioner shall, in collaboration with the commissioner of mental health and the women veterans coordinator, update and review the information on veterans reproductive mental health, as necessary.

3. The commissioner, in consultation with the commissioner of mental health and the women veterans coordinator, shall: (a) inform providers of the need to raise awareness about veterans reproductive mental health issues; and (b) provide information on the department and the office of mental health's websites regarding how to locate available providers who treat or provide support for veterans reproductive mental health issues including maternal depression including but not limited to, mental health professionals, other licensed professionals, peer support, not-for-profit corporations and other community resources.

4. The commissioner, in consultation with the women veterans coordinator, shall make any regulations necessary to implement this section.

§ 4. Subdivisions (g) and (h) of section 2522 of the public health law, subdivision (g) as amended and subdivision (h) as added by section 19 of part D of chapter 56 of the laws of 2012, are amended and a new subdivision (i) is added to read as follows:

(g) identification of regional perinatal health care system barriers and limitations that lead to poor perinatal outcomes and development of strategies to address such barriers and limitations; [~~and~~]

(h) coordination of service delivery by community-based organizations among health care providers and health plans using health information technology and uniform screening criteria for perinatal risk[~~.~~]**; and**

(i) promotion of training and continuing medical education opportunities in military cultural competency for providers of prenatal care to veterans. For purposes of this subdivision, the term "veteran" shall have the same meaning as such term is defined in section one of the veterans' services law and shall also include a veteran who has a qualifying condition, as defined in section one of the veterans' services law, and has received a discharge other than bad conduct or dishonorable from such service, or is a discharged LGBT veteran, as defined in section one of the veterans' services law, and has received a discharge other than bad conduct or dishonorable from such service.

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