STATE OF NEW YORK

5160

2025-2026 Regular Sessions

IN ASSEMBLY

February 12, 2025

Introduced by M. of A. SOLAGES, BICHOTTE HERMELYN, CUNNINGHAM -- read once and referred to the Committee on Higher Education

AN ACT to amend the education law, in relation to requiring diversity, inclusion and elimination of bias training for certain medical personnel as part of continuing medical education requirements

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

Section 1. The education law is amended by adding a new section 6524-a to read as follows:

§ 6524-a. Mandatory diversity, inclusion and elimination of bias training. 1. All physicians, in order to maintain their license in good standing, shall complete biennial diversity, inclusion and elimination of bias training.

2. Such training courses shall be taught by individuals who are:

a. representative of the diversity of persons served by the New York health care system; and

b. academically trained in diversity, inclusion and the elimination of bias or possess prior experience educating medical professionals about diversity, inclusion and the elimination of bias.

3. Such training courses shall include, but not be limited to, the following:

a. information on implicit and explicit bias, equal access to medical care, serving a diverse population, diversity and inclusion initiatives, and sensitivity to cultural and other differences when interacting with members of the public or other medical personnel;

b. actionable steps medical personnel can take to recognize and address their own implicit biases;

c. a discussion of the historical reasons for, and the present consequences of, the implicit biases people hold based on the characteristics of another;

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

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d. examples of how implicit bias affects the perceptions, judgments, and actions of physicians and other medical personnel and how those perceptions, judgments, and actions result in unacceptable disparities in access to medical care;

e. the administration of implicit association tests to increase awareness of one's unconscious biases; and

f. strategies to address how unintended biases in decision making may contribute to health care disparities by shaping behavior and producing differences in medical treatment along lines of race, ethnicity, gender identity, sexual orientation, age, socioeconomic status, or other characteristics.

4. Beginning one year after the effective date of this section, all physicians licensed under this article shall complete two hours of training biennially.

§ 2. The education law is amended by adding a new section 6541-a to read as follows:

§ 6541-a. Mandatory diversity, inclusion and elimination of bias training. 1. All physician assistants, in order to maintain their license in good standing, shall complete biennial diversity, inclusion and elimination of bias training.

2. Such training courses shall be taught by individuals who are:

a. representative of the diversity of persons served by the New York health care system; and

b. academically trained in diversity, inclusion and the elimination of bias or possess prior experience educating medical professionals about diversity, inclusion and the elimination of bias.

3. Such training courses shall include, but not be limited to, the following:

a. information on implicit and explicit bias, equal access to medical care, serving a diverse population, diversity and inclusion initiatives, and sensitivity to cultural and other differences when interacting with members of the public or other medical personnel;

b. actionable steps medical personnel can take to recognize and address their own implicit biases;

c. a discussion of the historical reasons for, and the present consequences of, the implicit biases people hold based on the characteristics of another;

d. examples of how implicit bias affects the perceptions, judgments, and actions of physician assistants and other medical personnel and how those perceptions, judgments, and actions result in unacceptable disparities in access to medical care;

e. the administration of implicit association tests to increase awareness of one's unconscious biases; and

f. strategies to address how unintended biases in decision making may contribute to health care disparities by shaping behavior and producing differences in medical treatment along lines of race, ethnicity, gender identity, sexual orientation, age, socioeconomic status, or other characteristics.

4. Beginning one year after the effective date of this section, all physician assistants licensed under this article shall complete two hours of training biennially.

§ 3. The education law is amended by adding a new section 6905-a to read as follows:

§ 6905-a. Mandatory diversity, inclusion and elimination of bias training. 1. All nurses, in order to maintain their license in good

standing, shall complete biennial diversity, inclusion and elimination of bias training.

2. Such training courses shall be taught by individuals who are:

a. representative of the diversity of persons served by the New York health care system; and

b. academically trained in diversity, inclusion and the elimination of bias or possess prior experience educating medical professionals about diversity, inclusion and the elimination of bias.

3. Such training courses shall include, but not be limited to, the following:

a. information on implicit and explicit bias, equal access to medical care, serving a diverse population, diversity and inclusion initiatives, and sensitivity to cultural and other differences when interacting with members of the public or other medical personnel;

b. actionable steps medical personnel can take to recognize and address their own implicit biases;

c. a discussion of the historical reasons for, and the present consequences of, the implicit biases people hold based on the characteristics of another;

d. examples of how implicit bias affects the perceptions, judgments, and actions of nurses and other medical personnel and how those perceptions, judgments, and actions result in unacceptable disparities in access to medical care;

e. the administration of implicit association tests to increase awareness of one's unconscious biases; and

f. strategies to address how unintended biases in decision making may contribute to health care disparities by shaping behavior and producing differences in medical treatment along lines of race, ethnicity, gender identity, sexual orientation, age, socioeconomic status, or other characteristics.

4. Beginning one year after the effective date of this section, all nurses licensed under this article shall complete two hours of training biennially.

§ 4. This act shall take effect on the first of January next succeeding the date on which it shall have become a law.