

STATE OF NEW YORK

8395

2025-2026 Regular Sessions

IN SENATE

June 7, 2025

Introduced by Sen. BROUK -- (at request of the Office of Mental Health)
-- 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 orders not to
resuscitate and decisions regarding life-sustaining treatment and
hospice care

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

1 Section 1. Section 2994-a of the public health law is amended by
2 adding a new subdivision 18-a to read as follows:

3 18-a. "Mental hygiene hospital" means any hospital as defined in
4 subdivision ten of section 1.03 of the mental hygiene law.

5 § 2. Subdivision 1-a of section 2994-b of the public health law, as
6 added by chapter 742 of the laws of 2023, is amended to read as follows:

7 1-a. This article shall also apply to decisions regarding orders not
8 to resuscitate, life-sustaining treatment, and hospice care for a
9 patient who lacks decision-making capacity in a mental hygiene hospital
10 [~~as defined by section 1.03 of the mental hygiene law~~].

11 § 3. Subparagraphs (ii) and (iii) of paragraph (b) of subdivision 3 of
12 section 2994-c of the public health law, as amended by chapter 708 of
13 the laws of 2019, are amended to read as follows:

14 (ii) In a general hospital or mental hygiene hospital, a health or
15 social services practitioner employed by or otherwise formally affil-
16 iated with the facility must independently determine whether an adult
17 patient lacks decision-making capacity if the surrogate's decision
18 concerns the withdrawal or withholding of life-sustaining treatment.

19 (iii) With respect to decisions regarding hospice care for a patient
20 in a general hospital, mental hygiene hospital, or residential health
21 care facility, the health or social services practitioner must be
22 employed by or otherwise formally affiliated with the general hospital,
23 mental hygiene hospital, or residential health care facility.

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

LBD10155-01-5

§ 4. Paragraph (c) of subdivision 5 of section 2994-d of the public health law, as amended by chapter 708 of the laws of 2019, is amended to read as follows:

(c) In a general hospital or mental hygiene hospital, if the attending practitioner objects to a surrogate's decision, under subparagraph (ii) of paragraph (a) of this subdivision, to withdraw or withhold nutrition and hydration provided by means of medical treatment, the decision shall not be implemented until the ethics review committee, including at least one physician, nurse practitioner or physician assistant who is not directly responsible for the patient's care, or a court of competent jurisdiction, reviews the decision and determines that it meets the standards set forth in this subdivision and subdivision four of this section.

§ 5. Subparagraphs (i) and (iii) of paragraph (b) of subdivision 5-a of section 2994-g of the public health law, as amended by chapter 708 of the laws of 2019, are amended to read as follows:

(i) in a general hospital or mental hygiene hospital, at least one other physician, nurse practitioner or physician assistant designated by the hospital must independently determine that ~~[he or she]~~ such physician, nurse practitioner or physician assistant concurs that the recommendation is consistent with such standards for surrogate decisions;

(iii) in settings other than a general hospital, mental hygiene hospital or residential health care facility, the medical director of the hospice, or a physician designated by the medical director, must independently determine that ~~[he or she]~~ such medical director or physician concurs that the recommendation is medically appropriate and consistent with such standards for surrogate decisions; provided that if the medical director is the patient's attending physician, a different physician designated by the hospice must make this independent determination; and

§ 6. Paragraph (c) of subdivision 5-a of section 2994-g of the public health law, as separately amended by chapters 622 and 708 of the laws of 2019, is amended to read as follows:

(c) The ethics review committee of the general hospital, mental hygiene hospital, residential health care facility or hospice, as applicable, including at least one physician, nurse practitioner or physician assistant who is not the patient's attending practitioner, or a court of competent jurisdiction, must review the decision and determine that it is consistent with such standards for surrogate decisions. This requirement shall not apply to decisions about routine medical treatment. Such decisions shall be governed by subdivision three of this section.

§ 7. The opening paragraph of subdivision 1 of section 2994-l of the public health law, as amended by chapter 40 of the laws of 2024, is amended to read as follows:

If a patient with an order to withhold or withdraw life-sustaining treatment is transferred from a mental hygiene facility to a hospital or from a hospital to a different hospital, including a mental hygiene hospital, any such order or plan shall remain effective until an attending practitioner first examines the transferred patient, whereupon an attending practitioner must either:

§ 8. Paragraph (a) of subdivision 4 of section 2994-m of the public health law, as amended by chapter 708 of the laws of 2019, is amended to read as follows:

(a) These procedures are required only when: (i) the ethics review committee is convened to review a decision by a surrogate to withhold or withdraw life-sustaining treatment for: (A) a patient in a residential

1 health care facility pursuant to paragraph (b) of subdivision five of
2 section twenty-nine hundred ninety-four-d of this article; (B) a patient
3 in a general hospital or mental hygiene hospital, pursuant to paragraph
4 (c) of subdivision five of section twenty-nine hundred ninety-four-d of
5 this article; or (C) an emancipated minor patient pursuant to subdivi-
6 sion three of section twenty-nine hundred ninety-four-e of this article;
7 or (ii) when a person connected with the case requests the ethics review
8 committee to provide assistance in resolving a dispute about proposed
9 care. Nothing in this section shall bar health care providers from first
10 striving to resolve disputes through less formal means, including the
11 informal solicitation of ethical advice from any source.

12 § 9. Paragraph (c) of subdivision 4 of section 2994-m of the public
13 health law, as amended by chapter 708 of the laws of 2019, is amended to
14 read as follows:

15 (c) When an ethics review committee is convened to review decisions
16 regarding hospice care for a patient in a general hospital, mental
17 hygiene hospital, or residential health care facility, the responsibil-
18 ities of this section shall be carried out by the ethics review commit-
19 tee of the general hospital, mental hygiene hospital, or residential
20 health care facility, provided that such committee shall invite a repre-
21 sentative from hospice to participate.

22 § 10. This act shall take effect on the one hundred eightieth day
23 after it shall have become a law.