

S01816 Summary:

BILL NO S01816
SAME AS SAME AS
SPONSOR RIVERA
COSPNSR
MLTSPNSR

Add §3620-a, Pub Health L

Directs the commissioner of health to promote home care's integration into the state's health continuum strategy to address public health priorities in disease prevention, intervention, population health improvement, associated health care cost reduction and research.

S01816 Text:

STATE OF NEW YORK

1816

2019-2020 Regular Sessions

IN SENATE

January 16, 2019

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

AN ACT to amend the public health law, in relation to integrating home care into the state's public health and prevention efforts

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

1 Section 1. The public health law is amended by adding a new section
2 3620-a to read as follows:

3 § 3620-a. Public health priority initiatives. 1. The commissioner
4 shall promote home care's integration into the state's health continuum
5 strategy to address public health priorities in disease prevention,
6 intervention, population health improvement, associated health care cost
7 reduction and research. Such integrated roles for home care shall be
8 promoted and incentivized on an agency voluntary basis. The commission-
9 er shall undertake these purposes through:

10 (a) Incorporation of home care agency direct care and care management
11 competencies in the department's prevention, primary care and public
12 health strategies;

13 (b) Promulgation of departmental guidance documents that describe and
14 assist home care agencies in exercising these roles;

15 (c) Promotion of evidence-based, best practices in public health and
16 prevention for use by home care agencies;

17 (d) Providing opportunities for home care staff training in public
18 health priority areas in the department's various training and educa-
19 tional programs for the health workforce and/or health care providers;

20 (e) Regulatory and procedural flexibility to optimize public health
21 triage and intervention by home care;

22 (f) Providing or making available public health and epidemiological
23 data for home care agency use in identifying, targeting and shaping
24 intervention;

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

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1 (g) To the extent of available funds, and upon approval of the direc-
2 tor of the budget, reimbursement supplementation to rates or premiums
3 issued under section thirty-six hundred fourteen of this article or
4 section forty-four hundred three-f of this chapter, respectively;

5 (h) Promotion of public health priority collaboratives under section
6 twenty-eight hundred five-x of this chapter; and

7 (i) Other means the commissioner determines appropriate.

8 2. Priority public health areas under this section may include, but
9 not be limited to:

10 (a) Sepsis education, patient screening and early intervention;

11 (b) Asthma and respiratory condition management, including home envi-
12 ronmental assessment;

13 (c) Falls prevention screening, education and prevention;

14 (d) Opioid management and overuse or abuse prevention, including
15 alternatives in pain management, and programs in palliative care;

16 (e) Medication management, including in care transitions and poly-
17 pharmacy populations;
18 (f) Pressure ulcer prevention and mitigation;
19 (g) Diabetes;
20 (h) Obesity;
21 (i) Cardiovascular health;
22 (j) Health care disparities;
23 (k) High risk prenatal and post-partum care;
24 (l) Immunizations; and
25 (m) Other priority areas in population health, and in the related
26 social determinants of health, that the commissioner may designate.

27 3. In implementing this section, the commissioner shall seek the
28 advice of representatives of home care providers, state associations
29 representative of home care, state associations representative of physi-
30 cians, state associations representative of county public health
31 services and others with home care and/or public health expertise whom
32 the commissioner may designate.

33 4. The commissioner is authorized to calculate cost savings achieved
34 from public health initiatives through home care which the commissioner
35 shall determine applicable, and upon approval of the state budget direc-
36 tor, may provide a portion of which as shared savings reinvestment to
37 participating providers. Such shared savings may be provided through
38 supplementation of their medical assistance reimbursement, or other
39 means which the commissioner determines.

40 5. The department shall collect and report to the legislature informa-
41 tion on the activities and impact of home care public health initiatives
42 as the department determines relevant, including information on cost
43 savings, and shall include recommendations for further support of the
44 goals of this section. This report shall be provided within eighteen
45 months of the effective date of this section.

46 § 2. This act shall take effect immediately. Effective immediately
47 the addition, amendment and/or repeal of any rule or regulation neces-
48 sary for the implementation of this act on its effective date are
49 authorized to be made on or before such date.