



Legislation Text

---

File #: Int 1625-2019, Version: B

---

Int. No. 1625-B

By Council Members Rivera, Chin, Ampry-Samuel, Adams, Ayala, Levine, Rose, Moya, Louis, Rosenthal, Barron, Lander, Koslowitz, Cumbo, Gibson, Cornegy, Kallos, D. Diaz, Cabán and Brooks-Powers

A Local Law to amend the administrative code of the city of New York, in relation to requiring the department of health and mental hygiene to make available FDA-approved methods of non-surgical contraception and long-acting reversible contraception at its health centers, health stations, health clinics and other health facilities

Be it enacted by the Council as follows:

Section 1. Section 17-184 of the administrative code of the city of New York, as added by local law 19 for the year 2003, is amended to read as follows:

§ 17-184 Availability of [emergency] contraception. a. Definitions. For the purposes of this section, the following terms have the following meanings:

Emergency contraception. The term "emergency contraception" means one or more medications, used separately or in combination, to be administered to or self-administered by a patient in a dosage and manner intended to prevent pregnancy when used within a medically recommended amount of time following unprotected or inadequately protected vaginal receptive sexual intercourse and dispensed for that purpose in accordance with professional standards of practice, and which has been found safe and effective for such use by the United States food and drug administration.

Long-acting reversible contraception. The term "long-acting reversible contraception" means one or more reversible contraceptive methods, including, but not limited to, intrauterine devices and subdermal contraceptive implants, to be inserted or removed by trained clinicians in accordance with accepted standards of medical practice, in a manner intended to prevent pregnancy for an extended period of time without user action,

and which has been found safe and effective for such use by the United States food and drug administration.

b. Availability. The department shall make available non-surgical contraception which has been found safe and effective for such use by the United States food and drug administration, emergency contraception [at each], and long-acting reversible contraception, to all patients served by health [center] centers, health [station] stations, health [clinic] clinics or other health [facility] facilities operated or maintained by the department which also [offers] offer services relating to the diagnosis and treatment of sexually transmitted [diseases. For purposes of this section, the term "emergency contraception" shall mean one or more prescription drugs, used separately or in combination, to be administered to or self-administered by a patient in a dosage and manner intended to prevent pregnancy when used within a medically recommended amount of time following sexual intercourse and dispensed for that purpose in accordance with professional standards of practice, and which has been found safe and effective for such use by the United States food and drug administration.] infections. The department shall provide information on free or low-cost access to the administration, insertion, and removal of long-acting reversible contraception methods. Timely referrals will be provided to such health centers, health stations, health clinics, or other health facilities which offer long-acting reversible contraception, as well as to qualified family planning providers, if needed, for other services.

c. Cultural sensitivity training. The department shall annually offer training to all employees of health centers, health stations, health clinics, and other health facilities maintained by the department which also offer services relating to the diagnosis and treatment of sexually transmitted infections. The training should include, but not be limited to:

1. The history of the provision of long-acting contraceptive, including the history of sterilization abuse;
2. Comprehensive, scientifically accurate information about the full range of contraceptive options in a medically ethical and culturally sensitive manner; and
3. Implicit and explicit biases which can result in the harm of a patient, particularly those which can

impede the fair and equal treatment of all patients.

§ 2. This local law takes effect 1 year after it becomes law.

SIL/HKA

LS #10810

12/1/21 8:22pm