

ACS State Affairs Legislative Update – March 27, 2026

STATE AFFAIRS WORKGROUP

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ACS STATE AFFAIRS PRIORITY ISSUES

- Prior Authorization
- Restrictive Covenants
- Private Equity/Corporate Practice of Medicine
- Scope of Practice
- Cancer/Biomarker
- Rural Surgery
- Telemedicine
- Professional Liability
- Continuing Medical Education/Maintenance of Certification
- Trauma funding
- Pre-hospital blood

For more information regarding ACS State Affairs Policy Priorities in your state, please contact Catherine Hendricks, State Affairs Manager, at chendricks@facs.org. To view a complete list of bills ACS State Affairs is tracking, visit our online [State Legislative Tracker](#).

ACS GRANT PROGRAM

State Chapters are eligible to apply for ACS State Advocacy Grants and may use funds towards their annual state advocacy day, to hire a lobbyist, or other relevant advocacy functions such as travel costs for members, catering, venue rentals, printing, and more. To learn more information regarding the ACS State Advocacy Grants, apply [here](#).

STATUS OF LEGISLATIVE SESSIONS

Legislatures not in session: Montana; Nevada; North Dakota; and Texas have no legislative session in 2026. The following legislatures have adjourned: Florida (3/13); Indiana (2/27); New Mexico (2/19); Oregon (3/6); Utah (3/6); Virginia (3/14); Washington (3/12); West Virginia (3/14); Wisconsin (3/17); and Wyoming (3/11). State legislative session information for 2026 can be found [here](#).

STATE ADVOCACY DAYS

California: April 8; Sacramento

New York State Advocacy Day Briefing

March 9–10, 2026 | Albany, NY

Members of the New York Chapter of the American College of Surgeons (NY ACS), in partnership with the Medical Society of the State of New York (MSSNY) and other specialty

societies, participated in Advocacy Day at the State Capitol in Albany, engaging directly with lawmakers on issues impacting patient care and surgical practice. Fellows met with key legislators and participated in policy briefings and a health panel featuring legislative leaders and the State Commissioner of Health. NY ACS focused its advocacy on concerns related to Anthem Blue Cross Blue Shield insurance practices and scope of practice issues. Organized legislative visits allowed Fellows to share frontline perspectives and reinforce the importance of physician engagement in shaping sound health policy.

Arizona Surgery Advocacy Day

March 16, 2026 | Phoenix, AZ

On March 16, members of the Arizona Chapter of the American College of Surgeons (ACS) held Surgery Advocacy Day at the State Capitol, combining four Stop the Bleed (STB) trainings with legislative outreach on key patient care issues. STB instructors provided hands-on STB training to more than 35 legislative staff and members of the public while meeting with lawmakers to advocate for bills supporting bleeding control kits and training in schools (SB 1299/HB 2076). Participants engaged directly with state legislators, reinforcing the importance of physician advocacy in shaping health policy, improving emergency preparedness, and protecting patients across Arizona.

LEGISLATIVE TRACKING

ALABAMA

HB 300 – Cancer **ENACTED**

Introduced by Representative Frances Holk-Jones (R), HB 300 requires health insurers to provide no cost sharing breast cancer screening and diagnostic imaging. Governor Kay Ivey (R) signed the bill into law March 4.

HJR 123 – Cancer **ENACTED**

Introduced by Representative David Faulkner (R), HJR 123 designates March 2026 as Colorectal Cancer Awareness month. Governor Kay Ivey (R) signed the bill into law March 5.

SB 19 – Cancer **ENACTED**

Introduced by Senator Steve Livingston (R), SB 19 requires health insurers to provide no cost sharing prostate cancer for all men over 50 and high-risk men over 40; high-risk includes African American men and men who have a father, brother, or son to whom any of the following apply: received a diagnosis of prostate cancer, developed prostate cancer, death caused by prostate cancer, received a diagnosis of a cancer that is known to be associated with a higher risk of prostate cancer, carries a genetic marker known to be associated with an increased risk of prostate cancer. Governor Kay Ivey (R) signed the bill into law February 26.

ALASKA

SB 281 – Scope of Practice

Introduced by the Senate Health and Social Services Committee, SB 281 creates the Rural Health Transformation Program Advisory Council within the health department (DOH); empowers the DOH to set grant criteria for using federal funds for underserved populations; allows a physician assistant to practice without a collaborative agreement if they are working at a facility directed by a licensed physician, a health care facility licensed by the health department,

a health care facility that is operated by the federal government, a tribal organization, a federally qualified health center or rural health clinic; or a veterans' facility. The bill was introduced in the Senate and referred to the Health and Social Services Committee.

CALIFORNIA

[SR 83](#) – Cancer **ADOPTED**

Introduced by Senator Jerry McNerney (D), SR 83 designates March 2026 as Colorectal Cancer Awareness Month to raise awareness and promote education about the importance of early detection and screening for colorectal cancer, particularly among high-risk and underserved populations. The bill was introduced in the Senate and Adopted.

CONNECTICUT

[HB 5316](#) – Private Equity

Introduced by the Joint Committee on Banking, HB 5316 prohibits real estate investment trusts (REITs) from acquiring or increasing any operational control over hospitals or health systems; bars hospitals and health systems from entering into sale-leaseback transactions involving the main campus of a hospital where a hospital sells its real property and then leases it back from the buyer. The bill was introduced in the House and referred to the Joint Committee on Banking.

GEORGIA

[HR 1891](#) – Scope of Practice

Introduced by Representative Alan Powell (R), HR 1891 creates a study committee to examine and make recommendations on the delegation authority and supervision of advanced practice providers; the committee will consist of nine members with the following breakdown: three members of the Georgia House of Representatives, one advanced practice registered nurse, one physician, one physician assistant, one representative from the nursing board, one representative from the medical board, one representative from the hospital association. The bill was introduced in the House and is awaiting referral to a committee.

[SR 634](#) – Cancer **ADOPTED**

Introduced by Senator Chuck Hufstetler (R), SR 634 supports efforts to improve prevention, early detection, and equitable care for lung cancer; commends Intuitive for its technological innovations in lung cancer diagnosis and treatment. The bill was introduced in the Senate and adopted.

[SR 689](#) – Cancer **ADOPTED**

Introduced by Senator Michael Rhett (D), SR 689 commends several organizations and individuals for their leadership in advancing cervical cancer education, prevention, and health equity; highlights ongoing disparities and the importance of continued advocacy. The bill was introduced in the Senate and adopted.

[SR 916](#) – Cancer **ADOPTED**

Introduced by Senator Kay Kirkpatrick (R), SR 916 designates March 9, 2026, as Skin Cancer Awareness Day to promote public awareness and education about the risks and prevention of skin cancer. The bill was introduced in the Senate and adopted.

HAWAII

[HCR 35](#) – Proton Beam Therapy

Introduced by Representative Cory Chun (D), HCR 35 requests the state auditor assess the effects of requiring health insurers to provide coverage for medically necessary proton beam therapy for cancer treatment. The bill was introduced in the House and referred to the Health Committee.

[SCR 51](#) – Proton Beam Therapy

Introduced by Senator Joy San Buenaventura (D), SCR 51 requests the state auditor assess the effects of requiring health insurers to provide coverage for medically necessary proton beam therapy for cancer treatment. The resolution was introduced in the Senate and referred to the Ways and Means Committee.

[SCR 182](#) – Trauma

Introduced by Senator Angus McKelvey (D), SCR 182 requests the governor and health department to work with the U.S. Department of Defense and other military partners to explore establishing a military-civilian trauma partnership. The bill was introduced in the Senate and referred to the Public Safety, Intergovernmental, and Military Affairs Committee.

IDAHO

[H 945](#) - Artificial Intelligence

Introduced by the House Ways and Means Committee, H 945 establishes a comprehensive regulatory framework for the licensure, oversight, and integration of artificial intelligence (AI) in the delivery of clinical medical services; creates a new class of health care provider, the Artificial Intelligence Augmented and Autonomous Service Provider (AAASP), which may operate clinical AI services under state licensure; distinguishes between various types of AI (advisory, supervised autonomous, fully autonomous, and informational) and clinical condition categories (chronic, critical, noncritical, preventive, and time-sensitive), specifying which AI applications require licensure and which are exempt; provides for the development of reimbursement codes and pilot programs for AAASP services, with state funding allocated for initial Board operations and reimbursement for services not yet recognized by federal programs. The bill was introduced in the House and referred to the Business Committee.

INDIANA

[HB 1271](#) – Downcoding **ENACTED**

Introduced by Representative Julie McGuire (R), HB 1271 health insurers are prohibited from using automated systems, including artificial intelligence (AI), as the sole basis for downcoding claims without human review of the patient's medical record; insurers must disclose when AI is used to make adverse determinations or downcode claims, and cannot downcode solely based on diagnosis codes or in a discriminatory manner against providers treating complex or chronic conditions; when insurers downcode, they must provide detailed notifications to providers, including reasons, clinical criteria, original and revised codes, payment amounts, and information on the right to appeal; providers are guaranteed a clear, accessible appeal process with at least 180 days to file, and may appeal in batches for similar claims; restricts insurers and health maintenance organizations from retroactively auditing, recouping, or refunding paid claims more than one year after payment, and from retroactively auditing claims more than three

years after payment, except in cases of proven fraud as determined by a court. Governor Mike Braun (R) signed the bill into law March 4.

[HB 1358](#) – Trauma **ENACTED**

Introduced by Representative Brad Barrett (R), HB 1358 creates a trauma registry to collect and analyze data necessary to evaluate the delivery of trauma care in Indiana; requires Indiana medical schools to add nutrition and rural health training by 2030. Governor Mike Braun (R) signed the bill into law March 4.

[SB 189](#) – Insurance **ENACTED**

Introduced by Senator Scott Baldwin (R), SB 189 prohibits health insurers from imposing administrative fees or penalties on health care providers or facilities for care involving out-of-network providers; classifies such actions as unfair and deceptive insurance practices; strengthens network adequacy oversight. Governor Mike Braun (R) signed the bill into law March 5.

KANSAS

[HB 2223](#) – Scope of Practice **ENACTED**

Introduced by The Health and Human Services Committee, HB 2223 allows optometrists to use medical devices and prescribe, administer, or dispense pharmaceutical drugs through all routes except intraocular injections; removal of non-perforating foreign bodies from the eye; allows the use of lasers; explicitly excludes certain surgeries, such as retinal surgery and corneal transplants; mandates optometrists maintain a standard of care comparable to medical doctors in diagnosing and treating adult open-angle glaucoma. Governor Laura Kelly (D) signed the bill into law March 13.

KENTUCKY

[SR 53](#) – Cancer **ADOPTED**

Introduced by Senator Reginald Thomas (D), SR 53 commends the University of Kentucky Markey Cancer Center for pioneering cancer research and treatment, notably as the first U.S. site to trial a new immunotherapy for small cell lung cancer. The bill was introduced in the Senate and adopted.

LOUISIANA

[HB 1002](#) – Professional Liability

Introduced by Representative Josh Carlson (R), HB 1002 limits the admissible evidence for medical expenses when a claimant receives treatment under a letter of protection or does not submit charges to a health insurance provider; evidence is restricted to the amount the claimant's health insurance would have paid, plus the claimant's share of expenses, had the treatment been processed through insurance. The bill was introduced in the House and is awaiting referral to a committee.

[SB 275](#) – Insurance

Introduced by Senator Brach Myers (R), SB 275 requires health insurers to reimburse certified registered nurse anesthetists the same as physicians for equivalent services. The bill was introduced in the Senate and referred to the Insurance Committee.

MAINE

[LD 961](#) – Scope of Practice **ENACTED**

Introduced by Representative Kristi Mathieson (D), LD 961 allows advanced practice registered nurses to practice without supervision after a minimum mentorship period of 24 months under the supervision of a licensed physician or supervising nurse practitioner; the nursing board may change this in rulemaking. Governor Janet Mills (D) signed the bill into law February 17.

MISSISSIPPI

[HB 565](#) – Biomarker **ENACTED**

Introduced by Sam Creekmore IV (R), HB 565 requires health insurers, including Medicaid, to cover biomarker testing for disease diagnosis and management when supported by scientific evidence. Governor Tate Reeves (R) signed the bill into law March 16.

NEBRASKA

[LR 307](#) – Cancer **ADOPTED**

Introduced by Senator Dave Wordekemper (R), LR 307 designates January 2026 as Firefighter Cancer Awareness Month to honor firefighters, support those affected by occupational cancer, and promote awareness and prevention strategies. The bill was introduced in the Chamber and adopted.

NEW JERSEY

[A 4700](#) – Cancer

Introduced by Assemblymember Shanique Speight (D), A 4700 creates a pancreatic cancer public awareness and education program. The bill was introduced in the Assembly and referred to the Health Committee.

[S 4042](#) – Cancer

Introduced by Senator Doug Steinhardt (R), S 4042 creates a statewide program to increase lung cancer screening awareness and access for first responders and veterans through education, outreach, referral protocols, and data collection, without mandating new insurance benefits. The bill was introduced in the Senate and referred to the Health, Human Services, and Senior Citizens Committee.

NEW MEXICO

[HB 66](#) – Student Loans **ENACTED**

Introduced by Representative Christine Chandler (D), HB 66 prioritizes full-time licensed physicians and those practicing in underserved areas; licensed physicians may receive up to \$75,000 per year for four years (not exceeding their total educational debt); includes a four-year service requirement for physicians. Governor Luan Grisham (D) signed the bill into law March 6.

[HB 99](#) – Professional Liability **ENACTED**

Introduced by Representative Christine Chandler (D), HB 99 provides punitive damages may only be awarded if clear and convincing evidence shows malicious, willful, wanton, reckless, fraudulent, or bad faith conduct by the health care provider; punitive damages are capped at the

same level as the applicable monetary damages limit and cannot be paid from the Patient's Compensation Fund (PCF); revises damage caps in malpractice cases: \$750,000 per occurrence for independent providers (with inflation adjustments), \$1,000,000 for independent outpatient facilities, and a rising cap for hospitals (up to \$6 million in 2026, with future inflation adjustments); Payments made from the PCF for the cost of medical care and related benefits shall be made as expenses are incurred; removes hospitals and health care systems from the PCF by 2030. Governor Lujan Grisham (D) signed the bill into law March 6.

SB 20 – Step-Therapy/Prior Authorization **ENACTED**

Introduced by Senator Elizabeth Stefanics (D), SB 20 prohibits health insurers from requiring prior authorization (PA) and step-therapy requirements for prescription drugs to treat autoimmune disorders and cancer; once PA is granted, it cannot be required again for three years unless there is evidence of fraud, regulatory action affecting the drug, or the addition of a generic or biosimilar equivalent to the formulary; requires insurers use a streamlined PA processes, including the use of uniform forms and electronic portal systems for 24/7 submission and tracking of requests; requires PA determinations be made within seven days, or within 24 hours for expedited requests, with automatic approval if these timelines are not met. Governor Lujan Grisham (D) signed the bill into law March 6.

NEW YORK

A 10606 – Scope of Practice

Introduced by Assemblymember Alicia Hyndman (D), A 10606 regulates certified registered nurse anesthetists (CRNA); allows CRNAs to administer anesthesia and related care, conduct pre- and post-anesthesia evaluations, manage pain, and perform clinical support functions, in collaboration with a licensed physician and under a written practice agreement; a physician can collaborate with four CRNAs off-site, limit does not apply if the CRNAs are at the same site as the collaborating physician. The bill was introduced in the Assembly and referred to the Higher Education Committee.

OHIO

HB 52 – Scope of Practice **ENACTED**

Introduced by Representative Kellie Deeter (R), HB 52 allows certified registered nurse anesthetists to perform nursing care activities in consultation with a physician, rather than under direct supervision, including administering anesthesia. Governor Mik DeWine (R) signed the bill into law March 10.

HB 780 – Medicaid

Introduced by Representative Karen Brownlee (D), HB 780 eliminates Medicaid managed care and establishes an administrative services organization-based, provider-led model; requires all resulting cost savings to be reinvested into the Medicaid program. The bill was introduced in the House and is awaiting referral to a committee.

OREGON

SB 1527 – Cancer **ENACTED**

Introduced by the Senate Health Care Committee, SB 1527 requires health insurers to provide no cost sharing cervical cancer screenings and follow-up exams. Governor Tina Kotek (D) signed the bill into law March 17.

PENNSYLVANIA

[SR 258](#) – Cancer

Introduced by Senator Devlin Robinson (R), SR 258 designates March 2026 as 'Colorectal Cancer Awareness Month' urging increased awareness, screening, and prevention efforts for colorectal cancer. The bill was introduced in the Senate and referred to the Rules and Executive Nominations Committee.

RHODE ISLAND

[SR 3141](#) – Cancer **ADOPTED**

Introduced by Senator Melissa Murray (D), SR 3141 designates March 2026 as 'Colorectal Cancer Awareness Month' emphasizing the importance of early detection, accessible screenings, and public education to reduce colorectal cancer incidence and mortality. The bill was introduced in the Senate and adopted.

SOUTH CAROLINA

[HR 5299](#) – Cancer **ADOPTED**

Introduced by Representative Sylleste Davis (R), HR 5299 declares March 2026 as Colorectal Cancer Awareness Month, encouraging public awareness and education about colorectal cancer screening and prevention. The bill was introduced in the House and Adopted.

UTAH

[HB 468](#) – Cancer **ENACTED**

Introduced by Representative Christine Watkins (R), HB 468 requires health insurers to provide no cost for medically necessary diagnostic and supplemental breast cancer examinations; examinations include contrast-enhanced mammography, diagnostic mammography, breast MRI, and breast ultrasound, and are considered medically necessary if provided in accordance with National Comprehensive Cancer Network guidelines. Governor Spencer Cox (R) signed the bill into law March 18.

[SB 31](#) – Scope of Practice **ENACTED**

Introduced by Senator Evan Vickers (R), SB 31 reduces the number of post graduate clinical hours a physician assistant (PA) needs before working independently from 10,000 to 8,500 hours; gives certified nurse anesthetists (CRNA) prescriptive authority. Governor Spencer Cox (R) signed the bill into law March 17.

[SJR 6](#) – Professional Liability **ADOPTED**

Introduced by Senator Scott Sandall (R), SJR 6 requires state courts to hold a separate trial to determine the liability of the defendant and a separate trial to determine the amount of damages owed by the defendant after liability is established. The bill was introduced in the Senate and adopted.

WISCONSIN

[AB 1109](#) – Prior Authorization/Artificial Intelligence

Introduced by Representative Angelito Tenorio (D), AB 1109 prohibits health insurers from using artificial intelligence (AI) to deny prior authorization requests based on medical necessity or experimental status; any denial for must instead be reviewed and decided by a licensed health care provider. The bill was introduced in the Assembly and referred to the Insurance Committee.

[SB 264](#) – Cancer **ENACTED**

Introduced by Senator Rachael Cabral-Guevara (R), SB 264 requires health insurers to provide no cost sharing coverage for diagnostic and supplemental breast cancer screenings. Governor Tony Evers (D) signed the bill into law March 19.

[SB 1163](#) – Prior Authorization

Introduced by Senator Kelda Roys (D), SB 1163 requires health insurers to maintain and publicly post a comprehensive list of services requiring prior authorization (PA); plans must clearly display current PA requirements, restrictions, and associated clinical review criteria on their websites; insurers must provide at least 60 days' advance written notice to practitioners and update its website prior to implementation; prohibits health care insurers from denying claims for lack of PA if the requirement was not in effect at the time of service. The bill was introduced in the Senate and referred to the Insurance, Housing, Rural Issues and Forestry Committee.

[SB 1164](#) – Out-of-Network

Introduced by Senator Kelda Roys (D), SB 1164 prohibits surprise billing for emergency medical services; ensures patients are not charged more than in-network rates for out-of-network care; establishes a process for payment disputes; prohibits prior authorization for emergency services. The bill was introduced in the Senate and referred to the Insurance, Housing, Rural Issues and Forestry Committee.