

## **ACS State Affairs Legislative Update – May 8, 2026**

### **STATE AFFAIRS WORKGROUP**

Arnold Baskies, MD, FACS (NJ); Christina Colosimo, DO, FACS (CA); Ali Kasraeian, MD, FACS (FL); Kevin Koo, MD, FACS (MN); David Santos, MD, FACS (TX); and Kelly Swords, MD, FACS (CA). The Workgroup plays a critical role in identifying state advocacy priorities, setting new policy objectives, and evaluating state advocacy grant applications among other duties.

### **ACS STATE AFFAIRS PRIORITY ISSUES**

- Prior Authorization/Downcoding
- Restrictive Covenants
- Private Equity/Corporate Practice of Medicine
- Scope of Practice
- Cancer
- Rural Surgery
- Professional Liability
- Continuing Medical Education/Maintenance of Certification
- Trauma

For more information regarding ACS State Affairs Policy Priorities in your state, please contact Catherine Hendricks, State Affairs Manager, at [chendricks@facs.org](mailto: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: Arkansas (4/29); Connecticut (2/4); Florida (3/13); Georgia (4/2); Idaho (4/2); Indiana (2/27); Iowa (5/3); Kansas (4/11); Kentucky (4/15); Maine (4/29); Maryland (4/13); Mississippi (4/15); Nebraska (4/17) New Mexico (2/19); Oregon (3/6); South Dakota (3/30); Tennessee (4/23); Utah (3/6); Washington (3/12); West Virginia (3/14); Wisconsin (3/17); and Wyoming (3/11). Alabama is in special session to redraw their congressional districts. State legislative session information for 2026 can be found [here](#).

### **IN THE NEWS**

#### **[Modernizing The Medicare Physician Fee Schedule: What Problem Are We Trying to Solve?](#)**

The article urges policymakers to pause before increasing primary care reimbursement through the Medicare Physician Fee Schedule and to evaluate the effects of recent changes. It contends there is little evidence that shifting funds to primary care improves the physician workforce supply or overall health outcomes, and it warns doing so could harm access to specialty care. The

authors also challenge claims that primary care is uniquely undercompensated, noting existing billing opportunities and recent policy changes already favor it, and advocate for a more evidence-based, balanced approach to preserve both primary and specialty care rather than redistributing resources without any clear benefit.

### **About the Authors**

Michael J. Sutherland, MD FACS and Thomas C. Tsai, MD FACS are employed by the American College of Surgeons (ACS). Don J. Selzer, MD FACS serves as an Indiana at-large representative to the ACS Board of Governors and the Vice Chair of the ACS General Surgery Coding and Reimbursement Committee. Christopher Senkowski, MD FACS serves as chair of the ACS General Surgery Coding and Reimbursement Committee and adviser to the American Medical Association's Relative Value Update Committee. Charles D. Mabry, MD FACS has held a variety of roles in the ACS, including representing the organization for 20 years as an adviser on the American Medical Association (AMA)/Specialty Society Relative Value Update Committee, which develops values for CPT codes.

## **LEGISLATIVE TRACKING**

### **MINNESOTA**

#### [HF 5119](#) – Cancer

Introduced by Representative Dan Wolgamott (D), HF 5119 requires a feasibility study on creating a mobile lung cancer screening program; the study will look at how to deploy mobile units with CT scanners and health professionals to provide screenings in underserved areas; the study must estimate costs, identify needed services, highlight regions with screening barriers, and project how many people could be screened each year. The bill was introduced in the House and referred to the Health Finance and Polity Committee.

### **NEW JERSEY**

#### [A 4852](#) – Telemedicine

Introduced by Assemblymember Andrea Katz (D), A 4852 allows state licensed physicians to prescribe Schedule II controlled substances provided through audio and video without an in-person exam. The bill was introduced in the Assembly and referred to the Health Committee.

#### [A 4957](#) – Telemedicine

Introduced by Assemblymember Chris Tully (D), A 4957 removes the initial in-person examination and subsequent in-person visits every three months for controlled substance prescriptions through telemedicine provided the encounter is conducted using real-time, two-way audio-visual communication, the prescription is for a legitimate medical purpose, and all actions comply with applicable federal and state laws. The bill was introduced in the Assembly and referred to the Health Committee.

#### [A 4958](#) – Scope of Practice

Introduced by Assemblymember Lisa Swain (D), A 4958 changes the professional title "physician assistant" to "physician associate." The bill was introduced in the Assembly and referred to the Health Committee.

#### [S 4090](#) – Cancer

Introduced by Senator Raj Mukherji (D), S 4090 establishes a comprehensive campaign to educate the public about pancreatic cancer, its symptoms, risk factors, diagnostic procedures, and available treatments. The bill was introduced in the Senate and referred to the

## **NEW YORK**

### [A 11203](#) – Professional Liability

Introduced by Assemblymember Charles Lavine (D), A 11203 makes several changes to professional liability lawsuits; medical malpractice lawsuits must be filed within two years and six months from when the plaintiff knew or should have known of the alleged negligence or from the last treatment date, with an absolute seven-year cap except in cases of fraudulent concealment; plaintiff must provide treatment dates, provider names, a general statement of alleged malpractice, injury descriptions, duration of incapacity, and claimed damages. The bill was introduced in the Assembly and referred to the Judiciary Committee.

### [K 1267](#) – Cancer/Prior Authorization

Introduced by Assemblymember Jen Lunsford (D), K 1267 proclaims May 2026 as Melanoma Awareness Month to raise awareness for melanoma and skin cancer. The resolution was introduced in the Assembly and referred to the Calendar.

### [S 10232](#) – Cancer/Prior Authorization

Introduced by Senator Pete Harkham (D), S 10232 eliminates prior authorization for cancer treatments that meet Category One or Category Two-A of the National Comprehensive Cancer Network guidelines. The bill was introduced in the Senate and referred to the Insurance Committee.

### [S 10241](#) – Prior Authorization/Artificial Intelligence

Introduced by Senator Michelle Hinchey (D), S 10241 requires health insurers notify patients and providers when artificial intelligence (AI) is used, and to disclose the criteria, data sets, and outcomes associated with AI algorithms; only qualified clinical peer reviewers can make final adverse coverage decisions, and they must consider individual patient circumstances and document their review process. The bill was introduced in the Senate and referred to the Insurance Committee.

## **OHIO**

### [SB 436](#) – Scope of Practice

Introduced by Senator George Lang (R), SB 436 changes the professional title “physician assistant” to “physician associate”; does not change the scope of practice. The bill was introduced in the Senate and is awaiting referral to a committee.

## **SOUTH CAROLINA**

### [HB 5164](#) – Surgical Smoke

Introduced by Representative Lee Hewitt (R), HB 5164 requires all licensed hospitals and ambulatory surgical facilities to adopt and implement policies to reduce exposure to surgical smoke during procedures likely to generate it using a smoke evacuation system. The bill was introduced in the House and referred to the Medical, Military, Public and Municipal Affairs Committee.

**WASHINGTON**

**[HB 1155](#) – Restrictive Covenant **ENACTED****

Introduced by Representative Liz Berry (D), HB 1155 bans noncompetition covenants in employment contracts; renders any restrictive covenant void and unenforceable. Governor Janet Mills (D) signed the bill into law March 23.