State Legislative Update – January 5, 2024

For more information regarding ACS State Affairs Policy Priorities in your state, please contact Catherine Hendricks, State Affairs Manager, at chendricks@facs.org or Cory Bloom, State Affairs Associate, at cbloom@facs.org.

STATE AFFAIRS WORKGROUP
Arnold Baskies, MD, FACS (NJ); Ali Kasraeian, MD, FACS (FL); Kevin Koo, MD, FACS (MN); and Kelly Swords, MD, FACS (CA). The Workgroup will play 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
- Trauma System Funding & Development
- Cancer Screening, Testing, and Treatment
- Insurance & Administrative Burden
- Professional Liability
- Criminalization of Physician Care
- Access to Surgical Care
- Health Equity

ACS GRANT PROGRAM
State Chapters are eligible to apply for ACS State Advocacy Grants and may use funds towards their annual state advocacy day. Funds provided through the grant can be applied towards expenses such as travel costs for members, catering, venue rentals, printing, and more. To learn more information regarding the ACS State Advocacy Grants, apply here.

UPCOMING EVENTS
Wisconsin Advocacy Day, Madison, January 23, 2024
Puerto Rico Advocacy, San Juan, February 22-24, 2024

IN THE NEWS
NEW YORK
Assembly Bill 6698, the Grieving Families Act, seeking to amend the state statute governing who can file a wrongful death lawsuit and how long they have to file it, was vetoed by the governor for a second year in a row.

The latest version of the bill “again introduces the potential for significant unintended consequences” that had “not been ameliorated,” Hochul wrote in a December 29 veto memo. She cited concerns about increased insurance premiums for consumers and health care institutions, namely public hospitals who serve disadvantaged communities.

“While I remain open to working collaboratively to find holistic solutions that support impacted families without introducing potential unintended consequences, I believe that further deliberations are needed,” Hochul wrote in her veto memo.
STATE MEDICAL BOARDS

VIRGINIA
The Virginia Board of Medicine reminds licensees of their continuing medical education (CME) requirements. Virginia requires 60 hours of CME per biennial license renewal cycle, which expires on the last day of the licensee’s birth month. During the renewal years of 2020, 2021, and 2022, a number of licensees did not affirm they had accomplished the total number of CME hours required for renewal of their license. At the February 23, 2023 meeting, the Board voted to waive its enforcement of CME for 2020, 2021, and 2022, but moving forward any CME deficiencies will be subject to sanctions based on their Guidance Document 85-14. Read the December newsletter here.

NORTH CAROLINA
The North Carolina Medical Board (NCMB) published Lessons from NCMB’S Disciplinary Committee: Misunderstandings during physician examinations in their December newsletter. The NCMB has received an increased number of complaints involving allegations of inappropriate touching or sexual misconduct during a physical exam and have found many of these situations are the result of a miscommunication between the physician and patient on the medical necessity of the physical exam and failure to prepare the patient for how the examination will be conducted. Read the December newsletter here.

STATUS OF LEGISLATIVE SESSIONS
Thirteen states are in regular or special session. Twenty-three are pre-filing for the 2024 session. Montana, Nevada, North Dakota, and Texas have no regular session in even-numbered years. Wyoming only considers budget issues in its brief (20 day) session. Legislative session information can be found here.

LEGISLATIVE TRACKING

CALIFORNIA
AB 1570 – Scope of Practice
Introduced by Assemblymember Evan Low (D), AB 1570 authorizes an optometrist certified to treat glaucoma to obtain certification to perform specified advanced procedures (lasers, surgery, and injections) if the optometrist meets the specified education, training, examination, and other requirements; excludes neuromuscular blockers for the practice of optometry. The bill was introduced and referred to the Business, Professions, and Consumer Protection Committee.

HAWAII
HB 663 – Cancer
Introduced by Representative Della Au Belatti (D), HB 663 amends state insurance law to expand categories of women required to be covered for mammogram screenings; requires the existing health insurance mandate for coverage of low-dose mammography to include digital mammography and breast tomosynthesis; requires health care providers to be reimbursed at rates accurately reflecting the resource costs specific to each service, including any increased resource cost after January 1, 2023. The bill was introduced and referred to the following: Health Committee, Consumer Protection, and Commerce Committee, and the Finance Committee.
SB 272 – Cancer
Introduced by Senator Kurt Favella (R), SB 272 amends state insurance law to mandate health insurers to cover mandated services for mammography on terms at least as favorable as the terms for other radiological examinations. The bill was introduced and referred to both the Senate Health and Human Services Committee and the Commerce and Consumer Protection Committee.

SB 273 – Cancer
Introduced by Senator Kurt Favella (R), SB 273 amends state insurance law by expanding coverage of breast cancer screening and imaging to include an annual mammogram for a woman of any age having an above-average risk for breast cancer, risk factor screening for women 30 years of age and older, and additional supplemental imaging for any woman, regardless of age, as deemed medically necessary by the American College of Radiology guidelines. The bill was introduced and referred to both the Health and Human Services Committee and the Commerce and Consumer Protection Committee.

SB 600 – Cancer
Introduced by Senator Joy San Buenaventura (D), SB 600 amends state insurance law to expand categories of women required to be covered for mammogram screenings; requires the existing health insurance mandate for coverage of low-dose mammography to include digital mammography and breast tomosynthesis; requires health care providers to be reimbursed at rates accurately reflecting the resource costs specific to each service, including any increased resource cost after January 1, 2023. The bill was introduced and referred to the following Senate Committees: Health and Human Services, Commerce and Consumer Protection, and Ways and Means.

MASSACHUSETTS

H 1103 – Cancer
Introduced by Representative James Murphy (D), H 1103 provides for no increase in cost-sharing for a baseline mammogram, which may include tomosynthesis, ultrasound evaluation, MRI or additional testing; screenings/exams annually for women thirty-five and up, women with a history of breast cancer, other breast cancer risk factors, or as deemed medically necessary by the woman’s health care provider. The bill was introduced and referred to the Financial Services Committee.

H 4135 – Firearms
Introduced by the House Ways and Means Committee, H 4135 amends laws related to firearms, licenses, and permits including: ammunition, antique firearms, assault-style firearms and penalties for violations related to the possession of firearms while under the influence of intoxicating substances. The bill was introduced and referred to the Ways and Means Committee.

H 4139 – Firearms
Introduced by the Ways and Means Committee, H 4135 amends laws related to firearms, licenses, and permits including: ammunition, antique firearms, assault-style firearms and penalties for violations related to the possession of firearms while under the influence of intoxicating substances. The bill was introduced referred to the Ways and Means Committee.
**S 711** – Cancer
Introduced by Senator Michael Rush (D), S 711 provides for no increase in cost-sharing for a baseline mammogram, which may include tomosynthesis, ultrasound evaluation, MRI or additional testing; screenings/exams annually for women thirty-five and up, women with a history of breast cancer, other breast cancer risk factors, or as deemed medically necessary by the woman’s health care provider. The bill was introduced and referred to the Financial Services Committee.

**MISSOURI**

**HB 1561** – Scope of Practice
Introduced by Representative Bennie Cook (R), HB 1561 expands the scope of practice for nurse anesthetists by allowing them to provide anesthesia care without the following: a collaborative practice arrangement, the supervision of a physician, dentist, or podiatrist, and the completion of a certificate of controlled substance prescriptive authority from the board of nursing. The bill was pre-filed in the House.

**HB 1881** – Scope of Practice
Introduced by Representative Patty Lewis (D), HB 1561 expands the scope of practice for nurse anesthetists by allowing them to provide anesthesia care without the following: a collaborative practice arrangement, the supervision of a physician, dentist, or podiatrist, and the completion of a certificate of controlled substance prescriptive authority from the board of nursing. The bill has been pre-filed in the House.

**SB 910** – Scope of Practice
Introduced by Senator Ben Brown (R), SB 910 proposes a significant expansion of scope of practice for nurse anesthetists, allowing them to do the following: select, issue orders for, and administer certain controlled substances during anesthesia care, provide pre- and post-anesthesia care for various medical procedures without a collaborative practice arrangement, develop a plan of anesthesia care for a procedure or treatment, and order necessary tests and interpret diagnostic procedures during the period of anesthesia care. The bill was pre-filed in the Senate.

**NEW HAMPSHIRE**

**SB 304** – Criminalization
Introduced by Senator Kevin Avard (R), SB 304 creates a cause of action for medical injuries relating to the administration of gender-transitioning treatment. The bill was pre-filed in the Senate.

**NEW JERSEY**

**A 1255** – Prior Authorization
Introduced by Assemblyman Sterley Stanley (D), A 1255 updates standards for prior authorization of health care services; mandating payers provide clinical criteria guidelines, materials required for claim submission, descriptions of the claim, the payer’s policy for reducing payment, and any policy updates online within 30 days of the changes taking place; and payers must respond to a health care provider request for prior authorization by approving or denying based on the covered person’s health benefits. The bill was introduced and referred to the Assembly Health Committee.
A 5757 – Telemedicine
Introduced by Assemblyman Herb Conaway, Jr. (D), A 5757 extends certain payment parity regarding telemedicine for one year; does not apply to services provided by a telemedicine provider who does not practice in-person care in NJ. The bill was introduced and referred to the Assembly Health Committee.

S 1794 – Prior Authorization
Introduced by Senator Vin Gopal (D), S 1794 updates requirements and standards for prior authorization of health care services, including the following: claim submission and processing, timelines for payment, reasons for non-payment or disputes, overdue payments, and penalties, claim reimbursement and appeals, vendor compliance and regulations, and regulatory guidelines. The bill was introduced and referred to the Senate Commerce Committee.

S 4127 – Telemedicine
Introduced by Senator Vin Gopal (D), S 4127 amends state law to require health insurers to reimburse telehealth services at the same rate as a service provided in-person; only applies to telehealth services delivered by organizations who do not provide in-person health care services. The bill was introduced and referred to the Health, Human Services and Senior Citizens Committee.

NEW YORK
A 1196 – Cancer - ENACTED
Introduced by Senator Roxanne Persaud (D), SB 1196 amends state insurance law to require health insurers and Medicaid to provide coverage for biomarker testing for the purposes of diagnosis, treatment, management, or ongoing monitoring of a patient’s disease or condition when supported by scientific evidence. Governor Kathy Hochul (D) signed the bill into law December 22, 2023.

A 6698 – Professional Liability VETOED
Introduced by Assemblymember Helene Weinstein (D), A 6698 amends state law regarding professional liability damages to include: reasonable funeral expenses; reasonable medical care, including but not limited to doctors, nursing, attendant care, treatment, hospitalization of the decedent, and medicines; grief or anguish caused by the decedent's death; loss of love, society, protection, comfort, companionship, and consortium; and loss of nurture, guidance, counsel, advice, training, and education resulting from the decedent's death. Governor Kathy Hochul (D) vetoed the bill December 29, 2023.

OHIO
SB 126 – Restrictive Covenants
Introduced by Senator Terry Johnson (R), SB 126 outlines how a nonprofit hospital may require an employee, as a condition of employment, to agree at the conclusion of employment, the employee will refrain from obtaining employment for a period not to exceed six months and within a radius of fifteen miles of the hospital; a specific address must be provided to calculate the fifteen miles. The bill was introduced and referred to the Senate Health Committee.
PENNSYLVANIA

HB 1663 – Insurance
Introduced by Representative Arvind Venkat (D), HB 1663 requires health insurers to disclose the use of artificial intelligence-based algorithms in the utilization review process. The bill was introduced and referred to the House Insurance Committee.

WASHINGTON

SB 5184 – Scope of Practice
Introduced by Senator Ann Rivers (D), SB 5184 establishes the scope of practice for anesthesiologist assistants, detailing their authorized responsibilities, tasks, and limitations including: supervision, responsibilities, documentation, certifications, and establishes a regulatory framework and disciplinary measures. The bill was introduced and referred to the Senate Health and Long-Term Care Committee (CB).

SB 5790 – STOP THE BLEED ®
Introduced by Senator Manka Dhingra (D), SB 5790 mandates schools in Washington state to maintain and provide bleeding control equipment on campus, store accessible bleeding control equipment, and ensure at least two employees per school are trained in Stop the Bleed. The bill has been pre-filed in the Senate.

WISCONSIN

SB 121 – Cancer
Introduced by Senator Rachael Cabral-Guevara (R), SB 121 requires health insurance policies to provide coverage for supplemental breast screening examinations or diagnostic breast examinations for an individual who is at increased risk of breast cancer, as determined in accordance with the most recent applicable guidelines of the National Comprehensive Cancer Network, or has heterogeneously or extremely dense breast tissue, as defined by the Breast Imaging-Reporting and Data System established by the American College of Radiology. This bill was introduced and referred to the Senate Health Committee.

To view a complete list of bills ACS State Affairs is tracking, visit our online State Legislative Tracker.