

August 2018

Georgia Academy of Family Physicians

Annual Report of the Legislative Committee

The 154th Georgia General Assembly adjourned Sine Die Thursday, March 29, 2018. Governor Deal had 40 calendar days to consider legislation favorably adopted by the General Assembly. Bills not signed into law or vetoed by May 8, 2018 became law July 1, 2018 or pursuant to their effective date.

Outcome of the 2018 Georgia Academy's Legislative Priorities

Rural Broadband & Telemedicine

Support connectivity and broadband throughout the state of Georgia to enhance electronic prescribing, electronic health records and telehealth initiatives. **It's a Win!**

[**SB 402**](#), by Sen. Gooch, is entitled the 'Achieving Connectivity Everywhere (ACE) Act' and attempts to increase incentives for companies to expand broadband internet and cable services connectivity to rural areas of Georgia. It provides for an exception on taxes for specific right of ways, to promote the expansion of broadband services through planning, deployment and incentives. [This bill passed and signed by the Governor.](#)

APRN Independent Practice

Oppose independent scope of practice for advance nurse practitioners who provide services in counties with a population of less than 50,000. **It's a Win!**

Senate Health & Human Services Chair, Renee Unterman authored [**SB 351**](#) to allow for the independent practice of advanced practice nurse practitioners in a rural county with a population of 50,000 or less according to the United States decennial census of 2010. Counties with a military base or installation are required to exempt the military personnel and their dependents living in the county from the definition for purposes of the proposed definition. The measure was amended in Committee to strike the independent practice provision; and inserted a new provision to increase the number of APRNs physician may supervise from 4 to 8. The Senate Committee Substitute to SB 351 was amended to [**HB 927**](#) and [**HB 301**](#). Status: SB 351, HB 927 and HB 301 failed final adoption.

Preceptor Tax Incentive Program (PTIP)

Support House Bill 301/Senate Bill 301 – The current PTIP program was implemented in July 2014 and offers up to a \$10,000 deduction for precepting medical/osteopathic, APRN, or PA students. The current bill would have changed the tax deduction to a tax credit. **So close – but did not pass.**

The Committee Substitute to [**HB 301**](#) changes the PTIP program from a tax deduction to a tax credit for physicians, advanced practice registered nurses and physician assistants who provide uncompensated preceptorship training. The provisions of HB 301 were added to [**SB 432**](#) related to the Georgia Tax Credit Business Case Act. Status: HB 301 and SB 432 failed final consideration.

Prescription Drug Monitoring Program

Support additional funding and legislation to improve of the Prescription Drug Monitoring Program. (House Bill 782). **It's a win!**

[HB 782](#) amends the prescription drug monitoring program (PDMP) to clarify statutory provisions and improve implementation. Specifically, the bill allows the Department of Public Health to share information in the PDMP with other states and law enforcement and patient's electronic health record. It also includes provisions that allow unlicensed delegates who work with prescribers and dispensers to register and access the PDMP. The provisions of HB 782 were added to [SB 407](#). Status: House sent SB 407 as amended to Governor who signed it into law.

Distracted Driving & Hands-Free Technology

Support HB 673 requires drivers to use hands-free technology when using cell phones and other electronic devices while driving. **It's a win!**

H.B. 673 will 1) increase the fine for distracted driving from \$150 to \$900 for repeat offenders and 2) increase the penalty from 1 point assessed against a driver's license to up to 4 points for repeat offenders, while drivers who accumulate 15 points in a 24-month period would lose their license. H.B. 673 would allow drivers to make "one swipe" on their phones to make or answer a call. They would also be allowed to use map apps. Status: House sent to Governor who signed it into law.

Tobacco Taxes

Oppose any legislation that would reduce state tobacco taxes. **It's a win!**

The House voted down [HB 877](#), by Rep. Chad Nimmer, Wednesday evening by a vote of 59-109 ([House Vote # 656](#)). The bill proposed to lessen the tax rate on modified risk tobacco products by 50 percent which are included in such modified risk tobacco product order issued by the secretary of the United States Department of Health and Human Services pursuant to 21 U.S.C. Section 387k(g)(1); or by 25 percent for any product included in a modified risk tobacco order issued by the Secretary pursuant to 21 U.S.C. Section 387k(g)(2). Status: House failed third reading.

Adoption

Oppose any legislation that could discriminate patients against their race, creed, religion or sexual orientation. The Georgia Academy joined the *Georgia Prosters* Coalition to oppose any legislation that could impact health care or the business community related to anti-discrimination. **It's a win!**

SB 375 - Adoption bill that would allow tax-payer funded organizations religious exemptions for not placing children with same-sex couples. Georgia Academy joined the Chamber sponsored "Georgia Prosters" coalition to oppose SB 375 and all similar "religious freedom" bills that could harm Georgia's patients. Status: Passed the Senate but did not pass out of the House.

State Budget – It's a Win (Medicaid codes increased in 2017 for family physicians maintained for 2018-2019 State Budget!)

The House and Senate Budget Conferees unveiled a revised FY 2019 Budget ([HB 684](#)) with an additional \$194,759,788 in spending, the result of a long-awaited increase in the state tax revenue estimate from Governor Deal. On the Governor's recommendation, \$166,747,626 of that funding went directly to public education, providing for full funding of the Quality Basic Education formula for the first time since at least 2002. Among the other notable allocations in the compromise agreement:

- \$92.3 million in Medicaid funds to replace Tenet settlement funds;
- \$45.7 million in new funding for Medicaid baseline expense growth;

- \$32.2 million in Medicaid funds for reinstatement of the Health Insurance Provider Fee;
- \$300,000 for the start-up of the Rural Health Systems Innovation Center;
- \$1,500,000 for the start-up of the Health Coordination and Innovation Council;
- Increase funds to support the annual onsite inspection of narcotic treatment programs pursuant to the passage of HB 249 and SB 88 (2017 Session);
- Quasi-statutory language directing the Georgia Department of Community Health to include language in all managed care contracts requiring the plan sponsor to annually report the following to the department: all pharmacy claims, the amount paid to the pharmacy provider per claim, including but not limited to the cost of the drug reimbursement; dispensing fees; copayments; and the amount charged to the plan sponsor for each claim by its pharmacy benefit manager;
- \$5.2 million for Direct Graduate Medical Education (GME) Medicaid reimbursement for GRE expansion programs.
- \$5.5 million to increase the triage payment rate by \$10 for urban hospitals and \$20 for rural hospitals.

Additional Health Policy-Related Legislation

Balance Billing

The two-year-old fight among insurers, patient advocates, hospitals and physicians around billing for surprise out-of-network services continues. All parties involved agree the practice should be curtailed, but there is little agreement on how to do so.

House Insurance Committee Chairman Richard Smith introduced [HB 678](#) to shift the debate from out-of-network compensation to billing transparency. The bill allows patients to ask health care organizations to be informed of the providers participating in a scheduled procedure, whether those providers are in the patient's insurer's network, and the associated fees and insurance payments exceeded. However, if an out-of-network provider becomes necessary in a procedure, the legislation requires the organization to bill the provider's fees within 90 days of adjudication of the claim; and resolve payment disputes within 90 days. The Department of Insurance resolves disputes through mandatory arbitration.

[SB 359](#), by Sen. Chuck Hufstetler, the 'Consumer Coverage and Protection for Out-of-Network Medical Care Act' protects consumers from out-of-network surprise bills in emergency situations. The bill requires insurers to reimburse providers a percentage of the usual and customary cost for out-of-network health care services.

The underlying provisions of HB 678 (House Transparency Bill) were amended to SB 8 related to Surprise Billing (Senate Fair Health Bill) and the Senate's model surprise billing act (SB 359) was amended to [HB 314](#). Status: SB 359, SB 8, HB 678 and HB 314 failed final adoption.

Health Care Provider Reimbursement

[HB 818](#) permits an individual healthcare provider to choose which form of electronic funds transfer he or she uses with an insurer; and prohibits insurers to require use of its own EFT or credit card, with fees, be used. Status: House sent to Governor and signed into law.

Low THC Oil Patient Registry

[HB 65](#) creates the Joint Study Commission on Low THC Medical Oil Access to study the in-state access of medical cannabis and low THC oil, including the security and control of all aspects of the process from acquisition and planting of the seeds to final destruction of any unused portion of the plant; quality control of all aspects of the manufacturing process including

product labeling and independent testing for purity and safety; as well as all aspects of dispensing the final product including security, competency of the dispensing staff, training on dosing and proper delivery methods. The current law was also expanded to include post-traumatic stress disorder. Status: House sent to Governor and signed into law.

Other Issues of Note

[HB 519](#), by Rep. Cooper, requires health benefit plans to utilize certain clinical review criteria to establish step therapy protocols for prescription drugs. The bill also creates four exceptions to override step therapy protocols: (1) a drug is contraindicative or may do harm to the patient (2) a drug in the protocol is expected to be ineffective (3) the patient has already failed on a specific drug in the protocol or (4) the patient is on a drug that is already working. The step therapy provisions were amended to [SB 325](#) and adopted by committee. Status: HB 519 and SB 325 failed final adoption.

[HB 769](#), authored by Rep. Jasperse, implements recommendations from the Rural House Development Council relating to health care issues. The bill:

- Allows for remote order entry of prescriptions in hospital pharmacies by Georgia-licensed pharmacist who is physically located out of the state.
- Requires DCH to take all reasonable steps to streamline and expedite the credentialing and billing processes for state medical plans, including but not limited to examining the potential for a uniform billing platform or portal.
- Establishes the Rural Center for Health Care Innovation and Sustainability within DCH's State Office of Rural Health.
- Allows for micro-hospitals that have 2-7 beds and provide 24/7 services in counties of fewer than 50,000 residents.
- Calls for the establishment of a grant program to increase the number of physicians who remain in Georgia to practice in medically underserved rural areas of the state.
- Increases the Rural Healthcare Tax Credit from 90% to 100%.

Status: House sent to Governor and signed into law.

Smoke Free Atlanta

The Georgia Academy joined the American Cancer Society and other health care advocacy groups to serve as a partner to support "Smoke Free Atlanta." The Atlanta City Council will be taking this up in the fall.

In 2005, the Georgia Smoke-free Air Act of 2005 was enacted and it allows smoking in bars and restaurants that do not employ people under the age of 18 or allow them to enter, allows for smoking rooms and smoking areas in workplaces with ventilation systems, and allows smoking rooms at Hartsfield Jackson International Airport.

The state law is not preemptive, meaning counties and municipalities may pass local smoke-free laws more restrictive than the state law. Efforts to pass local ordinances stronger than the state law have been difficult, and eleven years after implementation of the state law, many workers and patrons, especially those in bars, clubs and adult entertainment establishments remain unprotected from secondhand smoke. **This is the case in Atlanta as well.**

2018 Legislative Day at the Capitol

On Thursday, February 15th over 150 family physicians, internists, pediatricians, and OB/Gyn physicians joined together to take our legislative initiatives to the State Capitol. Governor Nathan Deal attended the event and made remarks to the physicians in attendance. Over 19 legislators also joined us to give updates on their key issues.

Family Medicine Legislative Champion of the Year

State Senator Steve Gooch was selected as the 2018 Family Medicine Legislative Champion. He was pivotal in passing Achieving Connectivity Everywhere (ACE) in 2018. This will help rural health and telemedicine/broadband throughout Georgia. He has also been very supportive of patients for fair compensation – a bill that the GAFF supported that would have transformed medical malpractice insurance.

Senator Steve Gooch was elected to the Georgia State Senate in 2010. Senator Gooch is a Republican representing the 51st District, which includes Fannin, Union, Gilmer, Lumpkin, White, Dawson and parts of Pickens and Forsyth counties. Senator Gooch was elected as the Majority Whip of the Senate Majority Caucus in 2014. Prior to serving as the Senate Majority Whip, Senator Gooch served as the Secretary of the Senate Majority Caucus and as chair of the Senate Transportation Committee. Senator Gooch serves as Vice-Chairman of the Transportation Committee and Secretary of the Appropriations Committee. He currently serves as the Executive Director for the Development Authority of Lumpkin County and is a former Georgia Department of Transportation board member. Prior to being elected to the Georgia State Senate, he served as the sole Lumpkin County Commissioner.