

PAFP 2017-18 State Legislative Agenda - (As of October 4, 2018)

Nurse Practitioner Independence

PAFP opposes legislation that would eliminate collaborative agreements. Senator Camera Bartolotta (R-Washington) is the prime sponsor of [SB 25](#) and Rep. Jesse Topper (R-Bedford) is the prime sponsor of [HB 100](#). SB 25 passed the Senate on 4/26/17 and both bills reside in the House Professional Licensure Committee. We expect no further action in 2018, but anticipate bills will be reintroduced in the 2019-20 legislative session.

Prior Authorization Reform

PAFP supports [HB 1293](#) that would maximize electronic communications for authorizations as well as adverse determinations and for the creation of a panel to develop a standardized form each insurer. Further, it would define consistent response times for authorizations, rejections, appeals, and external utilization review. Rep. Marguerite Quinn (R-Bucks) is the prime sponsor. The bill was introduced 5/1/17 and is in the House Insurance Committee. We expect no further action in 2018, but are working with our partners to ensure it will be reintroduced in the 2019/20 legislative session.

Direct Primary Care Authorizing Legislation

PAFP supports and was the lead stakeholder with [HB 1739/SB 926](#) that specifies direct primary care agreements are not insurance and therefore not subject to insurance laws or regulations. The House Bill passed the House Representatives unanimously on 9/27/17. It and SB 926, sponsored by Senate Appropriations Chairman Pat Browne both rest in the Senate Banking and Insurance Committee. We expect no further action in 2018, but will be working to ensure bills are re-introduced in the 2019/20 legislative session in both chambers.

Health Insurer Credentialing Reform

PAFP supports [HB 125](#), introduced by former House Health Committee Chairman Matt Baker (R-Tioga) that would standardize the credentialing form and set processing standards. HB 125 passed in the House on 5/24/17 and is in the Senate Banking and Insurance Committee. We expect no further action in 2018, but will work with our partners to ensure reintroduction in the 2019-20 legislation session.

Restrictive Covenants

PAFP supports legislation limiting restrictive covenants in health care practitioner employment agreements. [HB 346](#), introduced by Rep. Tony Deluca (D-Alleghany) states that a contract may not establish an employment relationship with a health care practitioner that includes a restriction health care practitioner to practice in a geographic area for a period of time after the termination of the employment relationship. The bill currently rests in the House Health Committee. We expect no further action in 2018.

Buprenorphine Medically Assisted Treatment Act

PAFP opposes legislation that would require prescribers of Buprenorphine to be licensed by the state and pay a \$10,000 licensing fee. [HB 932](#), introduced by Rep. Gene DiGirolamo (R-Bucks) rests in the House Human Services Committee. [SB 1054](#), introduced by Senator Michele Brooks (R-Mercer), was amended to reduce the fee to \$500 and successfully moved out of the Senate Health and Human Services Committee on 5/22/18. PAFP remains opposed. The bill rests in Senate Appropriations. We expect no further action in 2018, but anticipate reintroduction in the 2019-20 legislative session.

POLST Legislation

PAFP supports updating and revising Pennsylvania law to include codification of Pennsylvania Orders for Life Sustaining Treatment (POLST) to be used by medical professionals across all health care settings for patients who voluntarily wish to execute a POLST order. Representative Bryan Cutler (R-Lancaster) has introduced [HB 1196](#) which rests in the House Health Committee, while Senator Gene Yaw (R-Lycoming) has introduced [SB 623](#). SB 623 passed the full Senate on 10/01/18. We expect no further action in 2018, but look forward to reintroduction in the 2019-20 legislative session.

Workplace Accommodations for Nursing Mothers

PAFP supports legislation that requires employers to provide unpaid break time or permit an employee to use paid break time, mealtime or both, to allow the employee to express breast milk for her nursing child. The employer shall provide a room or other private location in close proximity to the work area, other than a bathroom, where an employee can express breast milk so long as these requirements do not impose an undue hardship on an employer with fewer than 50 employees. [HB 1685](#), sponsored by Rep. Mary Jo Daly (D-Bucks) currently rests in the House Labor and Industry Committee. We expect no further action in 2018, but anticipate reintroduction in the 2019-20 legislative session.

PAFP's State Legislative Agenda is crafted through the Government and Practice Advocacy Committee with position decisions made by the Board of Directors. Questions/Comments? Please contact Brent Ennis, PAFP Deputy EVP/COO and State-Registered Lobbyist at bennis@pafp.com