



Legislative Update



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First Session, 155th General Assembly Sine Die Report

The First Session of the 155th Georgia General Assembly adjourned Sine Die Thursday, April 2, 2019. Georgia's legislature meets for 40 days and their sessions last for two years. Any legislation not defeated or passed will be still be pending in 2020.

Tax Credit for Preceptors – Passed!

[House Bill 287 \(Sponsor Rep. Matt Dubnik – Gainesville\)](#)

Workforce - Preceptor Tax Credit – **Support** tax credits for community-based physician faculty to precept Georgia medical students, physician assistants and advanced practice registered nurses. It replaces the existing tax deduction for community-based faculty preceptors. Preceptorship training is defined as the uncompensated community-based training of medical students, advanced practice registered nurses (APRNs) students, or physician assistant (PA) students. For physicians, the tax credit would be \$500 for each of the first three rotations and \$1,000 for the fourth through tenth rotations in a calendar year. For APRNs and PAs, the tax credit would be \$375 for the first three rotations and \$750 for the fourth through tenth. Status: Act 44 Signed by the Governor 4/25/2019.

Medicaid Waivers – Passed and Immediately Signed by the Governor

[Senate Bill 106 \(Sponsor Senator Blake Tillery – Augusta\)](#)

Medicaid – **Support** Medicaid innovations (state waivers) to provide affordable access to health insurance for low income Georgians and stabilize the current insurance market for individuals and small businesses. [SB 106](#) authorizes the Department of Community Health (DCH) so submit a waiver request, on or before June 30,2020, to the U.S. Department of Health and Human Services Centers for Medicare and Medicaid Services pursuant to the Section 115 of the federal Social Security Act, which may include an increase in the income threshold up to a maximum of 100 percent of the federal poverty level. The measure also allows Georgia to submit 1332 innovation waivers relate to health insurance coverage or health insurance products. Status: Signed by the Governor 3/27/2019.

Step Therapy Exception Protocols – Passed!

[House Bill 63 \(Sponsor Rep. Sharon Cooper – Marietta\)](#)

Insurance - Step Therapy – **Support** legislation to require insurance (non-ERISA) and State Health Benefit Plans to have a process for step therapy exception protocols. The exceptions protocols are based on the following criteria: 1) the required drug is contraindicated; 2) RX would be ineffective based on the known clinical condition of the patient; 3) patient has previously tried the prescription drug under a current or previous health insurer and was shown to be ineffective; and 4) patient's condition is stable on an RX previously selected whether or not approved under current health benefit plan. Status: Act 43 Signed by the Governor 4/25/2019.

Scope of Practice – APRN Expansion

[House Bill 409 \(Sponsor Rep. Alan Powell – Hartwell/Senate Bill 109 \(Sponsor Sen. Larry Walker – Perry\)](#)

Patient Safety – **Oppose** legislation that would allow APRN's to order imaging without supervision of a physician and would also allow physicians to increase supervision from four to eight advance practice nurses at the same time in active practice. The Georgia Academy has concerns about additional abundance of over-imaging of patients by allowing non-physicians to order screenings. The GAFP also believes that increasing the number of active APRN's working concurrently under a physician's supervision diminishes the ability to provide accurate review of patient care. (Pending in the House Special Committee on Access to Quality Health Care / Tabled in the Senate). It is expected to be redirected to the Senate Health and Human Services Committee prior to the end of this legislative session. It will still be available for passage in 2020.

Public Health – Easing Mandatory Childhood Vaccines

[House Bill 416 \(Sponsor State Rep. Rick Williams - Milledgeville\)](#)

Child Safety – **Oppose** legislation that would create a state vaccine board to allow easing of mandatory childhood vaccines. This legislation would reduce Georgia's child immunization rates. It would also be duplicative of the federal National Vaccine Injury Compensation Program. Vaccines save lives by preventing disease. (Pending in the House Health & Human Services Committee.) No movement on this bill in 2019, will be available for passage in 2020.

Scope of Practice - Abortion

[House Bill 481 \(Sponsor State Rep. Ed Setzler – Acworth\)](#)

Scope of Practice – **Oppose** legislation that would criminalize a Georgia physician performing within their scope of practice. This bill will have a chilling effect of clinicians who are trained to care for women and would exacerbate the problem of keeping labor and delivery units open throughout the state. The Georgia Academy has a long-standing policy of opposing any legislation that would violate the physician/patient relationship, as well as, banning a physician's ability to diagnose, prescribe and treat a patient within their scope of practice. Passed the General Assembly and signed into law. Currently, the effective date is January 1, 2020 – but a lawsuit to enjoin the law is expected prior to January 1.

Rural Broadband

[Senate Bill 2 \(Sponsor State Senate Steve Gooch – Dahlonega\)](#)

Access for Underserved/Rural Communities – **Support** legislation (from past legislative sessions) broadband legislation that will enhance and provide for high speed broadband and increase internet connectivity. The legislature adopted and Governor Kemp signed into law three rural broadband bills introduced by Sen. Steve Gooch R-Dahlonega). [SB 2](#) allows local EMCs to deliver broadband services; [SB 17](#) allows local telephone cooperatives to deliver broadband services; and [SB 66](#) addresses small cell wireless technology.

Surprise Billing

Sen. Chuck Hufstetler (R-Rome) introduced legislation ([SB 56](#)) that would mandate the amount health insurers pay for emergency medical services provided by doctors and groups who aren't part of a patient's insurance network. The measure establishes a standard payment model for out-of-network emergency care using a formula that includes a combination of the 80th percentile of charges and the 95th percentile of allowed amounts from the nonprofit organization FAIR Health. The bill also requires insurance companies and hospitals to notify patients of who their physicians will be and whether the physicians are in-network; at the

patient's request. Mediation is available by the Department of Insurance at the patient's request and costs associated shall be shared evenly among all parties involved. Status: Eligible in 2020

[HB 84](#), by House Insurance Committee Chairman Richard Smith (R-Columbus), attempts to address surprise billing by requiring physicians, hospitals and insurers to provide information to patients to allow for more informed medical decisions related to scheduling elective procedures. In addition to the transparency provisions the bill was amended to create a payment model for out-of-network emergency care that would be the greater of 150 percent of Medicare or the contracted rate. Status: House Third Readers Lost (HV #222 77-78; NV 12; Exc 13) 3/7/2019

Pharmacy Benefits

[HB 233](#), authored by Rep. David Knight (R-Griffin), amends Title 26 to create the "Pharmacy Anti-Steering and Transparency Act". The bill prohibits nonresident pharmacies from sharing patient and prescriber data with affiliates for commercial purposes, presenting a claim for a service provided based on referral from an affiliate, or mailing a prescription to a patient when the prescriber calls for an in-person consultation. It also requires such pharmacies to file an annual disclosure statement of its affiliates. This bill has been enacted.

[HB 323](#), authored by Rep. David Knight (R-Griffin), amends Title 33 to add new restrictions on actions by pharmacy benefits managers. These new restrictions include prohibitions on referring an insured to an affiliated pharmacy for the provision of pharmacy care services; transferring or sharing records containing patient-identifiable and prescriber-identifiable data to an affiliated pharmacy for any commercial purpose; making any false or misleading statement to an insured, pharmacist, pharmacy, dispenser, or dispenser practice; restricting an insured from utilizing any in-network pharmacy or dispenser practice; and, implementing any medication management program that alters or denies access to ongoing therapy. The House agreed to the Senate Substitute to the bill by a 158-0 vote, and the bill has been enacted.

Sen. Chuck Hufstetler (R-Rome) introduced a bill ([SB 195](#)) that would have 1) established transparency standards for formularies; and 2) streamlined the prior authorization process by requiring the use of a standard form by setting timelines for insurers to respond to the form and ensuring the continuity of care when a patient switches their health insurance plan. The prior authorization language was stripped out of this bill and replaced with language related to travel insurance. Status: Eligible in 2020.

Scope of Practice

Sen. Larry Walker (R-Perry) introduced a bill ([SB 109](#)) that would have 1) expanded the number of advanced practice registered nurses (APRNs) a physician can oversee under a protocol agreement from four to eight and 2) allowed physicians to supervise up to four of these APRNs at any one time and 3) allowed APRNs to order radiographic imaging. Status: Senate Tabled 3/5/2019. Eligible in 2020. **Georgia Academy continues to oppose this expansion.**

Rep. Alan Powell (R-Hartwell) introduced a bill ([HB 409](#)) that would have 1) allowed advance practice registered nurses (APRNs) to order radiographic imaging in non-emergency situations and 2) increased the number of APRNs a physician can supervise under a protocol agreement from four to eight. Status: House Second Readers. Eligible in 2020 Special Committee on Access to Quality Health Care. **Georgia Academy continues to oppose this expansion.**

Other Issues:

Rep. Ron Stephens (R-Savannah) introduced a bill ([HB 214](#)) that will remove the geographic restrictions on physicians who have vaccine protocol agreements with pharmacists. Passed as an [SB 115](#) amendment related to telemedicine licensure. Status: Enacted

Rep. Houston Gaines (R-Athens) introduced a bill ([HB 217](#)) that will create a needle exchange program within the Georgia Department of Public Health. MAG asserted that physicians should be able to prescribe syringes and needles to patients who have an injection drug addiction in conjunction with addiction counseling to help prevent the transmission of contagious diseases. Status: Act 25 Signed by Governor 4/2/2019.

Sen. Kay Kirkpatrick, M.D. (R-Marietta) introduced a bill ([SB 16](#)) that will allow Georgia to join the Interstate Medical Licensure Compact to make it easier for physicians to obtain licenses in other participating states. Status: Signed by Governor 4/25/2019.

Sen. Kay Kirkpatrick, M.D. (R-Marietta) introduced a bill ([SB 18](#)) that will allow physicians to enter into direct primary care agreements with their patients without being subject to health insurance regulations. Status: Signed by Governor 4/25/2019.