

2019

Legislative Summary

Includes bills of interest in the 2019 session and bills that will hold over until the 2020 legislative session.

The 2019 Legislative Session ran from Monday, January 14th – Tuesday, April 2nd.

Everything that passed both chambers now enters a **forty-day bill review period** during which they will either be signed, vetoed, or automatically become law without his signature by Governor Kemp.



House Bills Passed

√ <u>HB 26</u> Psychology Interstate Compact

Rep. Dave Belton

Allows Georgia to enter into an interstate compact known as the "Psychology Inter-jurisdictional Compact". Authorizing the State Board of Examiners of Psychologists to administer the compact.

<u>HB 39</u> Physical Therapy Interstate Compact Rep. Dave Belton

Allows Georgia to enter into an interstate compact for licensure between compact states. This known as the "Physical Therapy Licensure Compact Act" authorizing the State Board of Physical Therapy to administer the compact.

√ HB 62 Mammograms SIGNED INTO LAW

Rep. Sharon Cooper

Requires a health care facility to notify a patient whenever dense breast tissue is detected in a mammogram. The legislation includes specific language that must be included in that notification. Governor Kemp has already signed this legislation and is officially in law.

✓ HB 63 Step Therapy

Rep. Sharon Cooper

Establish exceptions to health insurer step therapy protocols. Step therapy is a health insurance protocol that requires patients to first try a less expensive drug on a Prescription Drug list before moving up a "step" to a more expensive drug. This approach is also called "fail first" protocol.

√ HB 128 Hi Low Agreements

Rep. Deborah Silcox

Exempts "low" payments under high-low agreements in medical malpractice agreements from the requirement to report settlements to the Georgia Composite Medical Board.

▼ HB187 Bariatric Drug Pilot

Rep. Katie Dempsey

Provides for a pilot program to provide coverage for the treatment and management of obesity through medication and counseling for members of the State Health Benefit Plan (SHBP).

√ <u>HB 217</u> Needle Exchange/Harm Reduction SIGNED INTO LAW

Rep. Houston Gaines

Creates a syringe services program relating to hypodermic syringes or needles. Governor Kemp has already signed this legislation and is officially in law.

▼ HB 233 Pharmacy Anti Steering

Rep. David Knight

Enables a transparency program for Pharmacy Benefit Managers. The bill prohibits PBM and insurer-owned pharmacies from filling prescriptions that were received via prohibited referrals from their PBM and insurer affiliates.

√ <u>HB 290</u> Preexposure (PrEP) to HIV Pilot Program

Rep. Sharon Cooper

Creates a syringe services program relating to hypodermic syringes or needles.

√ <u>HB 323</u> Pharmacy Benefit Manager Reform Rep. David Knight

Provides transparency of PBMs to report annually to the Commissioner the aggregate amount of all rebates that the pharmacy benefits manager received from pharmaceutical manufacturers and the aggregate amount of rebates the pharmacy benefits manager received from pharmaceutical manufacturers that it did not pass through to insurers or payers.

√ HB 324 Georgia's Hope Act

Rep. Micah Gravley

Georgia's Hope Act allows for the production, manufacturing, and dispensing of low THC oil in Georgia and allows exception to possession of certain quantities of low THC oil

▼ HB 374 Hospice Orders

Rep. John LaHood

Authorizes certified medication aides to administer medications to residents under hospice care pursuant to a physician's written orders.

▼ HB 481 Abortion - Heartbeat

Rep. Ed Setzler

Institutes a law declaring that abortions are illegal in the state after a fetal heartbeat is detected, which is usually around six weeks gestation

√ <u>HB 514</u> Behavioral Health Reform and Innovation Commission

Rep. Kevin Tanner

Creates the Behavioral Health Reform and Innovation Commission. Comprised of 23 experts to develop a statewide plan for mental and behavioral health. The current version now includes one voting position for a Community Service Board member appointed by the Lieutenant Governor..

√ HB 551 Kratom / PDMP

Rep. Dewayne Hill

Provides for a standard level of Kratom alkoloids and establish recommended dosages. The bill also provides for the prohibition of access to kratom for individuals under the age of 18. Rep. Sharon Cooper amended the bill to include language that would address the fines for physicians who were not registered for the Prescription Drug Monitoring Program (PDMP) prior to the deadline.

√ <u>HR584</u> Floor and Trade Charity Care Study Committee

Rep. Todd Jones

Creates the House Study Committee on Exploring a Floor and Trade Charity Care System, which will focus on a credit program for Indigent and Charity Care (ICC) provided in the state that hospitals would buy and sell according to their need to meet ICC requirements.

▼ HR590 PANDA/PANS StudyCommittee

Rep. Karen Bennett

Creates the House Study Committee on Pediatric Acute-Onset Neuropsychiatric Syndrome ("PANS") and Pediatric Autoimmune Neuropsychiatric Disorder Associated with Streptococcal infection ("PANDAS") to study the needs, issues, and problems associated with PANS and PANDAS. These disorders create the sudden onset of obsessive-compulsive disorder in children, causing previously healthy and well adjusted children to experience severe anxiety and emotional disturbances. The study committee aims to identify barriers to insurance-based care for children with PANS and PANDAS and their families as well as examine comprehensive medical and behavioral health services for those suffering from this autoimmune disorder.

√ HR 725 Co-Prescribing Naloxone

Rep. Sharon Cooper

Recognizes the policy recommendations and outcomes of co-prescribing naloxone with opioids.

House Bills Held for Action in 2020

HB 112 DXM Cough Medicine Age Verification

Rep. John LaHood

Requires identification by minors for drug products containing dextromethorphan.

HB 158 HIV Medicaid and ADAP Recipients

Rep. Deborah Silcox

Makes it easier for HIV-positive Medicaid recipients to receive the most effective medications, allowing physicians to get patients into treatments quickly with the most effective drug regimen available. the Department of Community Health has pledged to work with the bill sponsor to achieve this through the regulatory process.

HB 160 State Health Benefit Plan Bariatric Surgery **Pilot Renewal & Expansion**

Rep. Katie Dempsey

Renews and expands the pilot for a bariatric surgery benefit to a four-year pilot allowing for 250 State Health Benefit Plan (SHBP) participants per year through 2024.

HB 178 Assisted Outpatient Treatment

Rep. Don Hogan

would create a unit within the Department of Behavioral Health and Developmental Disabilities to provide for assisted outpatient treatment programs and an advisory council

HB 330 Podiatry Scope Expansion

Rep. Rick Williams

Would expand the scope of practice for podiatrists, to allow for additional surgical procedures. (including amputations)

HB 416 Vaccine Mandated Warnings

Rep. Rick Williams

Office and allows consumers to decline administration law.

HB 521 Temporary Licenses for Dentists

Rep. Houston Gaines

Would authorize temporary licenses for dentists licensed in other states to provide dental care to indigent populations in the State of Georgia.

HB 524 APEX Program Foundation Creation

Rep. David Stover

Would create a tax-deductible foundation to fund the Georgia APEX Program.

HB 535 Body Artists and Body Art Studios

Rep. Lee Hawkins

Provides for the regulation and permittance of body artists and body art studios.

HB 544 Emergency Involuntary Treatment

Rep. Chuck Efstration

Would require the affidavits of the persons upon which an emergency involuntary treatment order is based to be made part of the patient evaluation and included

among the documents that influence treatment decisions.

HB 580 Conversion Therapy Treatment

Rep. Matthew Wilson

Would prohibit the practice of conversion therapy when treating patients with gender identity.

HB 586 Hospice Drug Take Back

Rep. Chuck Efstration

Would regulate the disposal of unused prescribed controlled substances for hospice patients by hospice

Senate Bills Passed

√ SB 16 Interstate Medical Licensure Compact

Sen. Kay Kirkpatrick, MD

Improves the process for physicians to obtain licenses in other participating states. Georgia will be the 25th state to become a part of the compact if signed into law by the Governor. This bill passed the Senate unanimously and passed the House with only one dissenting vote.

√ SB 18 Direct Primary Care Act

Sen. Kay Kirkpatrick, MD

Allows physicians to provide direct primary care to patients without having to incur costs of insurance billing and overhead.

√ SB 106 Medicaid Waivers SIGNED INTO LAW

Sen. Blake Tillery

This is Gov. Brian Kemp's health care legislation regarding waivers, also known as the 'Patients First Act.' This legislation authorizes the Georgia Department of Community Health (DCH) to submit a Section 1115 waiver to the Centers for Medicare & Medicaid Services (CMS) to expand the number of Georgians who are insured by Georgia's Medicaid program. Furthermore, the legislation allows the Administration to submit a Section 1332 waiver to the U.S. Secretary of Health and Human Services to get permission to find innovative ways to provide residents with access to affordable quality health care. A waiver granted from the U.S. HHS Department will allow Georgia to use the Medicaid expansion funds to buy private insurance in the state health insurance exchange for eligible Georgia citizens. Governor Kemp Would establish the State Vaccine Consumer Protection has already signed this legislation and is officially in

▼ SB115 Telemedicine

Sen. Renee Unterman

Revises the "Medical Practice Act of the State of Georgia" to provide for telemedicine licenses for physicians licensed in other states to practice medicine with patients in this state through telemedicine.

▼ SB 121 PDMP Revision

Sen. Larry Walker

Requires the length of time data is kept on the PDMP. The language allowing law enforcement to search without cause has been removed.

√ SB 142 Insurance Card Disclosure

Sen. Larry Walker

Would require that a statement indicating that the subscriber's health policy is fully insured must be included on a subscriber's health insurance identification card.

√ SB 184 SHBP & FQHC Medicare Reimbursements

Sen. Greg Kirk

Provides that services covered under the state health benefit plan and furnished by a federally qualified

health center are reimbursed at no less than the Medicare maximum allowable reimbursement rate.

▼ SB 207 Direct Primary Care Act

Sen. Dean Burke

Changes the name of the Georgia Board of Physician Workforce board to the Georgia Board of Health Care

▼ SB 214 Barbers and Cosmetology Board Changes

Sen. P.K. Martin

Changes the number of apprenticeship hours required for cosmetologists, hair designers, estheticians, nail technicians, master barbers, and barbers II. This legislation now includes **HB 535** by Rep. Lee Hawkins that provides for the regulation and permittance of body artists and body

▼ SR 202 Joint Study Committee on Mid-Level Health **Care Providers**

Sen. Chuck Hufstetler

Creates a joint study committee that would be tasked with looking at ways to simplify the physician oversight process for mid-level health care providers, including the number of each type of mid-level provider that a physician can

Senate Bills Held for Action in 2020

SB 114 Health Strategies Council

Would reinstate the state's Health Strategies Council.

SB 189 Record Requests/E-Discovery

Sen. Bill Cowsert

Would mandate costs for the copying of medical records and require electronic delivery of the records.

SR 193 Senate Study Committee on Transferring Oversight of Developmental Disabilities to the **Department of Community Health**

Sen. Greg Kirk

Creates the Senate Study Committee on Transferring Oversight of Developmental Disabilities to the Department of Community Health

SR 194 Joint Study Committee on Transferring Oversight of Developmental Disabilities to the **Department of Community Health**

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SR 217 Senate Study Committee on Prescribing Patterns for Antidepressants and Other Psychotropic Medications

Sen. William Ligon

Would create the Senate Study Committee on Prescribing Patterns for Antidepressants and Other Psychotropic Medications.

SB 221 Religious Freedom

Sen. Marty Harbin

Would provide for the protection to choose religious

SB 222 Creation of Georgia Council on Criminal Justice Reform

Sen. Jesse Stone

Would reauthorize the Georgia Council on Criminal Justice Reform to continue through 2022.

CAPITOL WATCH

Major Issues

Minor Certificate of Need Reform

HB186 by Rep. Ron Stephens would provide for an increase in capital expenditure thresholds to \$10 million and an increase to \$3 million for equipment. It would clarify that freestanding emergency departments would be required to obtain a CON regardless of project expenditures. It would allow for Cancer Treatment Centers of America (CTCA) to convert to a general cancer hospital, and would require them to get a CON prior to converting therefore being subject to the same CON regulations as hospitals. Importantly, the bill would not provide for any exemptions to CON, including no exemptions for multi-specialty ASCs, Legacy Sports Institute, and cardiac procedures in ASCs. Additionally, it would include transparency requirements that DCH would be required to collect. Also included in this bill is language from SB151 by Sen. Dean Burke (R-Bainbridge), which would create the office of Health Strategy and Coordination which would provide a forum to share information between state departments, coordinate the major functions of the state's health care system, and develop innovative approaches for stabilizing costs while improving access to quality health care. Clarifying language was added regarding the qualifications of the Executive Director of the proposed Office of Health Strategy and Coordination that would give the governor additional flexibility in establishing such a position. The original language of HB 186 that would allow for funds from the sale or lease of a hospital authority to be used for health care for indigent and charity care for the community remains in the bill.

NO CHANGES FOR AMBULATORY SURGERY CENTERS.

Hospital Bed Tax/Rural Hospital Transparency

HB321 by Rep. Jodi Lott extends the Hospital Medicaid Financing Program (i.e., the Hospital Provider Payment Program and the Tier 2 Hospital Medicaid Financing program) to June 30, 2025. As a reminder, the parameters of the Program are set through the regulatory process by the Department of Community Health with the annual General Appropriations Act setting the maximum amount that can be assessed. *Transparency language for not-for-profit hospitals was adopted by the Senate that is contained in the original version of HB198* by Rep. Matt Hatchett. These new requirements include a long list of financial information including, but not limited to:

- A note in the hospital's audited financial statements that identifies individual amounts for such hospital's gross patient revenue, allowances, charity care, and net patient revenue
- Listing of all real property holdings of the hospital, including the location and size, parcel ID number, purchase price, current use, and any improvements made to such property
- Report listing the salaries and fringe benefits for the ten highest paid administrative positions in the hospital
- The most recent legal chart of corporate structure, including the hospital, each of its affiliates and subsidiaries, and its parent corporation
- Copy of audited Internal Revenue Service Form 990, including Schedule H for hospitals
- Audited consolidated financial statements for the hospital's parent corporation and consolidating financial statements
- Audited consolidated financial statements for hospitals with subsidiaries and consolidating financial statements

Hospitals that violate the posting requirement will be suspended from receipt of any state funds like Medicaid payments or donations under the rural hospital tax credit program. Additionally, rural hospitals with a margin of greater than 15% will not be eligible for donations under the rural hospital tax credit program. DCH will be required to provide information on the process for the ranking of hospitals by financial need.

The House amended the final version to change onset date to October 1, 2019, remove the term business foundation venture, require DCH to notify hospitals of noncompliance before suspending state funds, and change the definition of eligibility for the Rural Hospital Tax credit from 15% to a 3-year average margin.

In section 9.7 (Audits) of the Fiscal Year 2020 Budget the following language was added:

9.7 Increase funds to engage an outside consultant to assist Department staff in conducting a comprehensive study on executive compensation and lobbying expenditures by charitable not-for-profit and hospital authority hospital organizations receiving more than \$5 million per year from the Georgia Medicaid and PeachCare for Kids programs and report back to House and Senate Appropriations Committee Chairs by December 31, 2019.

Out of Network/Surprise Billing Legislation

HB540 by Rep. Trey Rhodes relating to housing tax credits, was substituted in Senate committee with the As Passed Senate language of SB56 by Sen. Chuck Hufstetler. SB 56 addresses balanced billing and would require certain transparency requirements for hospitals and insurers, such as posting standard charges on the hospital's website, posting health benefit plans that are in-network, as well as a list of physicians that are in-network. Additionally, the bill would put new requirements on insurers to cover payments to providers who may be out-of-network for the services that they provide in an emergency setting. SB 56 would clarify the definition of 'emergency medical services' and would provide that if an insured patient receives emergency services from an out-of-network provider or hospital they would bill the insurer directly, essentially removing the patient from the process. Additionally the bill would require a health benefit plan of an insured patient who has received emergency care by an out-of-network provider pay the same amount as if their care was in-network. This legislation was held up and did not pass in the late hours of Day 40.

Amended FY19 Budget

The House increased funds to allow for 27 new residency slots in primary care medicine, for a total of 139 slots in FY19

The House continued to show concern regarding physician workforce by providing funds for a second-year gynecological oncology fellowship at Augusta University for \$125,000\$250,000 to establish and launch a Neonatal Intensive Care Unit Peer Recovery Coaching Program

Providing funds for 54 slots in OB/GYN residency programs to reach a total of 36 slots at Emory University School of Medicine, 20 slots at Medical College of Georgia, 16 slots at Memorial University Medical Center, 16 slots at Morehouse School of Medicine, and 16 slots at Navicent Health Care Macon for an additional \$828,042;

Provide increased funds for Augusta University for the Rural Surgery Initiative to \$352,968;

Provide increased funds for Augusta University for child and adolescent psychiatry to \$381,470

Provide funds for the Georgia Statewide Area Health Education Centers (AHEC) Network program office to expand statewide certification training for health professions students as Mental Health First Aid trainees to \$41,875

Provide funds for a start-up grant for the South Georgia Medical Center residency program for \$90,000;

Provide funds for a Center of Excellence on Maternal Mortality at Morehouse School of Medicine in order to advance maternal health in Georgia for \$500,000.

FY20 Budget

<u>Department of Behavioral Health and</u> Developmental Disabilities

Adult Developmental Disabilities Services

57.12 Increase funds to raise provider rates by 3% on the following services for the developmentally disabled: Community Access Group, Community Access Individual, Prevocational Services, and Supported Employment. (CC:Increase funds to raise provider rates by 10% for Supported Employment for the developmentally disabled)

State General Funds S \$1,258,090 CC \$120,417

57.13 Increase funds for permanent supported housing for individuals with

developmental disabilities in Forsyth County. (CC:Increase funds for one-time funding for permanent supported housing for individuals with developmental disabilities in Forsyth County and create a model plan for statewide utilization)

State General Funds S \$250,000 CC \$50,000

Adult Mental Health Services

59.9 Increase funds for behavioral health crisis bed capacity. (CC:Increase funds for behavioral health crisis bed capacity and reflect staggered start dates)

State General Funds G \$10,212,349 H \$10,212,349 S \$10,212,349 CC \$7,659,262

59.13 Increase funds for Mercy Care Health Systems to provide mental and primary health care to indigent Georgians.

State General Funds H \$350,000 CC \$250,000

59.12 Increase funds to provide state matching funds for the HomeFirst public-private partnership to provide behavioral health services in permanent homeless supported housing.

State General Funds H \$500,000 S \$500,000 CC \$500,000

Child and Adolescent Mental Health Services

63.7 Increase funds for operations of a crisis stabilization unit in Columbus, Muscogee County starting January 1, 2020. (CC:NO; Support the funding for operations of crisis stabilization units throughout the state as additional beds come open)

State General Funds \$\$500,000 CC \$0

<u>Department of Community</u> Health

Medicaid: Aged, Blind, and Disabled

91.1 Increase funds for growth in Medicaid based on projected need.

State General Funds G \$30,680,366 H \$27,794,472 S \$30,680,366 CC \$20,794,472

Medical Assistance Program CFDA93.778 G \$63,373,484 H \$57,412,370 S \$63,373,48 4 CC \$42,953,143

Total Public Funds: G \$94,053,850 H \$85,206,842 S \$94,053,850

CC \$63,747,615

91.13 Increase funds for a 3% increase in dental reimbursement rates for select dental codes.

State General Funds S \$33,219 CC \$53,381

Medical Assistance Program CFDA93.778 S \$68,618 CC \$110,263

Total Public Funds: \$\$101,837 CC \$163,644

Medicaid: Low-Income Medicaid

92.1 Increase funds for growth in Medicaid based on projected need.

State General Funds G \$58,204,904 H \$50,624,379 S \$58,204,904 CC \$34,968,382

Medical Assistance Program CFDA93.778 G \$184,777,473 S \$104,569,916 H \$184,777,473 CC \$72,230,827

Total Public Funds: G \$242,982,377 H \$155,194,295 S \$242,982,377 CC \$107,199,209

92.7 Increase funds for a 3% increase in dental reimbursement rates for select dental codes.

State General Funds S \$257,116 CC \$148,332

Medical Assistance Program CFDA93.778 S \$531,100 CC \$306,395

Total Public Funds: \$\$788,216 CC \$454,727

PeachCare

93.3 Increase funds for a 3% increase in dental reimbursement rates for select dental codes.

State General Funds CC \$3,442

State Children's Insurance Program CFDA93.767 CC \$36,858 Total

Public Funds: CC \$40,300

Physician Workforce, Georgia Board for: Graduate Medical Education

96.8 Increase funds for a start-up grant for the South Georgia Medical Center residency program.

State General Funds H \$90,000 S \$180,000 CC \$180,000

CAPITOL WATCH

FY20 Budget Cont...

Physician Workforce, Georgia Board for: Undergraduate Medical Education

100.1 Increase funds for a medical student capitation rate of \$6,363 for 100 students at the Philadelphia College of Osteopathic Medicine (PCOM) Georgia and 40 students at PCOM South Georgia. (S and CC:Increase funds for a medical student capitation rate of \$6,363 for 50 students at the Philadelphia College of Osteopathic Medicine (PCOM) Georgia and 40 students at PCOM South Georgia)

State General Funds H \$890,820 S \$572,670 CC \$572,670

100.2 Increase funds for the start-up of the Philadelphia College of Osteopathic Medicine South Georgia campus. (CC:Increase funds for one-time funding for marketing and outreach for students in rural areas to encourage enrollment in PCOM South Georgia campus)

State General Funds S \$318,150 CC \$318,150

Department of Public Health

256.3 Increase funds to maintain current funding levels for hospitals with trauma care designations. (CC:Pending additional hospitals obtaining trauma care designations, maintain funding at current levels and "true-up" in the Amended FY2020)

State General Funds S \$445,000 CC \$0

242.10 Increase funds for ten Coverdell-Murphy Act remote stroke readiness grants. (CC:Increase funds for five Coverdell-Murphy Act remote stroke readiness grants)

State General Funds \$ \$550,000 CC \$275,000

Governor Kemp Bill Review

As standard with any session, the Governor has 40 calendar days to either sign legislation into law, veto, or the legislation officially becomes law after the 40 day period. Bill review begins April 3rd and ends on May 12th.

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