



Week 6 Legislative Report – February 20, 2017

This week the Senate approved HB 43, the FY 17 Amended Budget by a vote of 52-0. The Amended budget was then passed out of the House and signed by the Governor on Wednesday. The FY 18 budget is still being considered.

Committees

The following committee meetings may be of interest:

House Judiciary Non-Civil Committee – 02/13

Chairman Rich Golick (R-Smyrna) and his Committee met on Monday, taking up a couple of relevant proposals.

HB 213 was presented by Chairman Golick and Gwinnett County District Attorney Danny Porter. HB 213 seeks to address the growing problem with trafficking of heroin products by adding fentanyl to the list of drugs that can base prosecution for drug trafficking. Rep. Betty Price (R-Roswell) asked questions about the bill potentially excluding certain derivatives of fentanyl. The GBI's Drug Chemistry Section spoke about the language of HB 213 and indicated that the language in HB 213 does not address such "analogues" of fentanyl and perhaps, as argued by Rep. Price, it should. Action was suspended on HB 213 so as to allow the author and others address Rep. Price's concerns about any unintended consequences with the wording in the proposal.

HB 231 by Rep. Bruce Broadrick (R-Dalton), is the annual update to Georgia's controlled substance schedules in Title 16. HB 231 was presented as a committee substitute that added two additional benzodiazepines that were requested by the GBI and included certain fentanyl-based drugs in Section 2. Chairman Sharon Cooper (R-Marietta) and Chairman Ed Setzler (R-Acworth) asked why HB 30, which adds the synthetic opioid known as U-47700 as a Schedule I drug, was a separate bill from HB 231. No reason was apparent. After consulting with Legislative Counsel, the Committee agreed to amend the Committee Substitute on HB 231 to include the language from HB 30, and the resulting Committee Substitute received a do pass recommendation from the Committee. This bill now heads to the Rules Committee.

Chairman Golick announced that his Committee would meet on Wednesday and take up **HB 65** by Rep. Allen Peake (this is the medical cannabis legislation which adds expanded conditions for its use). Chairman Golick explained that the Committee will be asked to look at recommendations, in the form of a Committee Substitute, which were developed by the Medical Cannabis Work Group. HB 213 will also be back before the Committee after action was suspended as noted above.

House Health and Human Services Committee – 02/14



Chairman Sharon Cooper (R-Marietta) and her Committee worked through a fairly large agenda this afternoon. WellStar Health System provided the Committee an overview on what it is sharing with its physicians, and other hospitals in Georgia, on ways to combat opioid abuse. Debi Dalton, M.D. provided this educational piece on WellStar's behalf. She noted that from 1999 to 2013 there has been a four-fold increase in overdoses. 37 percent of deaths in 2012-2013 were due to prescription medications. In 2011, there were 1.4 million emergency department visits. 53 percent of medications are taken belonging to friends or family members. Since 1996, there have been 10,000 lives saved by using Naloxone. Rep. Cooper appreciated the update but seemed to think that the education was lacking as it was not as in depth as she and others probably expected. However, Dr. Dalton indicated that the video message was a starting point. Rep. Rick Jaspers (R-Jasper) inquired about whether prescriptions for opioids had decreased since the training had been commenced at WellStar.

HB 165, by Rep. Betty Price (R-Roswell), was passed out of the Committee with a do pass recommendation to a Substitute she presented. This legislation addresses requirements for "maintenance of certification" by physicians. The Medical Association of Georgia supported Rep. Price's bill. No insurer can discriminate against maintenance of certification.

HB 206, by Rep. Trey Kelley (R-Cedartown), was passed with a do pass recommendation. This legislation, addressing the Pharmacy Audit Bill of Rights, is similar to HB 916 which was passed and vetoed by Governor Deal in 2016. The intent is so that there will be no recoupments of Medicaid payments on providers for scrivener or clerical errors. There were several groups present from the developmental disability segment who explained their own experiences with recoupments. Rep. Bruce Broadrick (R-Dalton) inquired about requirements for these audits – in particular that notice is to be provided to the provider that an audit is to take place. These errors can be simply the lack of signing all the documentation submitted. The Department of Community Health stated that since the legislation in 2016, it had undertaken to address the issue of recoupments. There is a new corrective action process in place with better communication to providers. The Inspector General has also reached out and talked to providers across the State. There has also been a focus on looking at whether "members" are receiving quality care and if the care was actually delivered. They have also looked at adverse findings so that the providers will know what the Department of Community Health is concerned about. Rep. Lee Hawkins (R-Gainesville) inquired more about how the auditors are actually paid and whether they receive a percentage of moneys recouped.

HB 210 was presented by Rep. Jodi Lott (R-Evans). It takes out specimen collection stations and blood banks from the definition of clinical laboratory when the human blood and component parts are intended as source material for the manufacture of biological products regulated by CBER through the Federal Food and Drug Administration. The change is made at O.C.G.A. § 31-22-1(2). Rep. Lott indicated that this was similar to the Baxalta legislation passed in 2016. These centers will have to comply with federal guidelines for patient safety. This legislation did not raise questions and received a do pass recommendation, moving on to the House Rules Committee.



Finally, Chairman Cooper presented her resolution on chronic fatigue syndrome, [HR 170](#), which urges state agencies and medical schools to do more education, care and research on myalgic encephalomyelitis. This Recommendation sailed through without discussion and now moves to the House Rules Committee.

Senate Health and Human Services Committee – 02/16

Chairman Renee Unterman (R-Buford) and her Committee passed out two measures this afternoon. The first was a Substitute to the Chairman's "balanced billing" initiative, [SB 8](#). The legislation defines what is a "surprise bill" (such as a bill for non-emergency healthcare services received a covered person for services which are rendered by a nonparticipating physician at a participating facility either when a participating physician is unavailable or a nonparticipating physician renders services without the covered person's knowledge or when unforeseen medical services arise at the time care is needed). The legislation requires disclosures to be made by providers (group practice, diagnostic and treatment center or health center) which are to be done online or in writing and also verbally at the time an appointment is scheduled. It also adds language to require information to be provided by insurers to enrollees – for instance make available a description of how an enrollee can submit a claim for health services and provide examples of anticipated out-of-pocket costs for frequently billed out-of-network healthcare services. There is also a dispute resolution process for such bills. In the discussions this afternoon, there were several amendments tacked onto the proposal including moving the language from 60% usual and customary charges (of the benchmark database) to 80% of such charges for a particular service performed by a provider in the same or a similar geographic area.

Sen. Ben Watson (R-Savannah) presented [SB 96](#), which also received a do pass recommendation. This legislation is similar to a bill by Rep. Sheri Gilligan (R-Cumming), HB 944, which failed to be passed in 2016. Under Sen. Watson's bill, it does permit a registered professional nurse, advanced practice registered nurse, and a physician's assistant, in addition to a physician, to pronounce a patient's death when that patient is in hospice and an organ donor. Sen. Watson explained that corneas to be donated needed to be harvested within 15 hours of death and the permission to expand who can pronounce these patients' deaths will make that more feasible. Additionally, he reminded the Committee that when the hospice laws were originally written most hospice was provided in inpatient settings; now it is provided in the homes of the patients. There were no changes made to SB 96.

Week 5 Legislative Tracking (Updated on 02/20)

Bill	Committees	Status	Analysis
HB030	HC: Judiciary Non-Civil	Jan/11/2017 - House Second Readers	Rep. Kevin Tanner (R-) proposes to amend O.C.G.A. § 16-13-25 by adding a synthetic opioid to the list of Schedule 1 substances. The synthetic

			opioid added to the list is "(RR) 3,4-dichloro-N-(2-(dimethylamino)cyclohexyl)-N-methylbenzamide (U-47700)".
HB035	HC: Insurance	Jan/23/2017 - House Second Readers	Rep. Bruce Broadrick (R-Dalton), would create a new Code Section relating to the licensure of pharmacy benefit managers at O.C.G.A § 33-64-10. The new language requires pharmacy benefit managers to provide notification of receipt of a request for prior approval for a prescription drug to a pharmacy or contracting representative within 48 hours of receipt of such request. Such notification must also include a claim reference number and return contact phone number for follow up. This new code section shall only apply to health insurance plans established under Article 1 or Chapter 18 of Title 45 or under Article 7 of Chapter 4 of Title 49.
HB036	HC: Health & Human Services	Jan/23/2017 - House Second Readers	Rep. Ehrhart (R-Powder Springs), would amend O.C.G.A § 43-30-1 by making various changes to the definition of 'Optometry'. It removes the requirement that the State Board of Optometry establish a list of pharmaceutical agents to be used by optometrists. It also removes the requirement that prohibited a doctor of optometry from administering pharmaceuticals by injection. It would add new language that sets requirements for pharmaceutical agents that are administered by injection by optometrists. Such agents may not be sub-tenon, retrobobular, intraocular, or a botulinum toxin. Such injectable agents must be administered by either A) a licensed doctor of optometry who is licensed or certified by the board and who has obtained a certificate indicating completion of an injectables training program; or B) A doctor of optometry who is enrolled in a qualified injectables training program and who is under the supervision of doctor of optometry who holds a current license, or under a board certified physician in ophthalmology.
HB054	HC: Ways & Means	Feb/09/2017 - House	Rep. Geoff Duncan (R-Cumming), would amend O.C.G.A § 31-8-9.1 to require an additional

		Committee Favorably Reported By Substitute	reporting requirement for rural hospitals. Under this legislation, rural hospitals must report any payments made to a third party to solicit, administer, or manage the donations received by such hospital. It further amends O.C.G.A § 48-7-29.20 by increasing the tax credit for rural hospital expenses from 70 percent, to 90 percent of the actual amount expended for single individuals and for married couples. It would also increase the maximum amount of tax credits allowed to \$60 million (up from \$50 million) in 2017 and would decrease the maximum number of credits allowed in 2019 to \$60 million (down from \$70 million).
HB065	HC: Judiciary Non-Civil	Jan/24/2017 - House Second Readers	Allen Peake (R-Macon), amends O.C.G.A. § 31-2A-18 relating to the Low THC Oil Patient Registry. The bill expands the types of conditions that qualify a patient for the registry. Newly added conditions are: Tourette's syndrome, autism, intractable pain (defined as severe, debilitating pain that has not responded to medication or surgical measures), post-traumatic stress disorder, Alzheimer's disease, human immunodeficiency virus, and acquired immune deficiency syndrome. The bill repeals the requirement for individuals to reside in Georgia for at least one year before becoming eligible for registration. The bill also repeals the requirement for physicians to issue quarterly reports to the Georgia Composite Medical Board on the side effects on patient health due to THC oil usage.
HB071	HC: Insurance	Feb/17/2017 - House Committee Favorably Reported By Substitute	Rep. Richard Smith (R-Columbus), would add a new chapter (Chapter 20E) to Title 33 of the Official Code of Georgia Annotated relating to insurance. This bill requires health care providers, group practices, diagnostic and treatment centers and health centers to inform patients of the various health benefit plans and hospitals that it contracts with. If the provider is out of network for a patient and the patient is receiving nonemergency services, the provider must, upon the patient's request, provide the patient with the

			estimated cost of such services in writing. The bill also requires physicians to make certain disclosures to patients regarding referrals, such as the name and address of the referred physician or provider. Hospitals would be required to post information about its health benefit plans, physician groups contracted by the hospital, and a statement regarding the physician's services that are not included in the hospital's charges. Further, this legislation requires hospitals to enter into credentialing agreements with health benefit plans insurers. Finally, O.C.G.A. § 33-20E-3 and O.C.G.A. § 33-20E-5 of this bill create disclosure requirements for insurers.
HB165	HC: Health & Human Services	Feb/14/2017 - House Committee Favorably Reported By Substitute	Rep. Betty Price (R-Roswell) would amend Title 43 by adding a new code section at 43-34-46 to provide that a 'maintenance of certification' shall not be required as a condition for licensure to practice medicine or as a prerequisite for hospital or staff privileges, employment in state medical facilities, reimbursement from third parties, or malpractice insurance coverage.
HB213	HC: Judiciary Non-Civil	Feb/07/2017 - House Second Readers	Rep. Golick (R-Smyrna), proposes to amend O.C.G.A. § 16-13-31 to prohibit the sale, manufacture, delivery, or possession of four grams or more of 'fentanyl.'
HB231	HC: Judiciary Non-Civil	Feb/17/2017 - Senate Read and Referred	Rep. Bruce Broadrick (R-Dalton) is the annual narcotics update relating to Schedule I, II, IV, and V controlled substances. It specifically addresses synthetic opioids and synthetic marijuana, which are commonly referred to as 'bath salts'. This bill passed 164-2.
HB360	HC: Health & Human Services	Feb/16/2017 - House Second Readers	Rep. Sharon Cooper (R-Marietta), seeks an amendment to O.C.G.A. § 26-4-80(c)(2), concerning prescription drug orders and the control of venereal disease. It revisits a bill from 2016 in an effort to provide for "expedited partner therapy" for patients with Chlamydia or gonorrhea. A new Code Section is added in O.C.G.A. § 31-17-7.1 which defines "expedited



			<p>partner therapy" and permits the licensed practitioner who diagnoses a patient to be infected with Chlamydia or gonorrhea the ability to utilize the expedited partner therapy in accordance with rules developed by the Department of Public Health.</p>
HB61	HC: Ways & Means	Feb/16/2017 - Senate Read and Referred	<p>Rep. Jay Powell (R-Camilla), amends O.C.G.A. § 48-8-30 to require delivery retailers (defined as a retailer that has a gross revenue exceeding \$250,000 for one calendar year or conducts more than 200 retail sales) to collect and remit the tax imposed by this Code section. The retailer must notify consumers that the tax collected on their purchases may be remitted to the State, and must send a statement to the Department of Revenue detailing the total amount of sales and use tax collected for each year. Failure to submit such documentation will result in a fine.</p>
HR036	HC: Judiciary Non-Civil	Jan/24/2017 - House Second Readers	<p>Rep. Allen Peake (R-Macon), amends Article III, Section IX, Paragraph VI of the Georgia Constitution relating to appropriations by the General Assembly. The amendment would permit the General Assembly to regulate the production and sale of medical cannabis. All or a portion of the net revenue derived from production fees will be dedicated to a state department, whereas tax revenue will be dedicated to drug treatment programs.</p>
SB008	SC: Health and Human Services	Feb/17/2017 - Senate Committee Favorably Reported By Substitute	<p>Sen. Renee Unterman (R-Buford) provides for: consumer protections regarding health insurance; disclosure requirements of providers, hospitals, and insurers; 4 billing and reimbursement of out-of-network services; procedures for dispute 5 resolution for surprise bills for nonemergency services; payment of emergency 6 services; out-of-network reimbursement rate workgroup.</p>
SB031	SC: Health and Human Services	Jan/23/2017 - Senate Read and Referred	<p>Sen. Josh McKoon (R-Columbus), would amend O.C.G.A. § 31-2-3 relating to the Board of Community Health to mandate that at least two of its nine members be active or retired participants</p>

			<p>of either the Employee's Retirement System of Georgia or Teachers Retirement System of Georgia. This bill also creates the State Health Benefit Plan Customer Advisory Council. The Department of Community Health must consult the council when coordinating and purchasing health care benefit plans. SB 41, by Sen. Renee Unterman (R-Buford), amends O.C.G.A. § 26-4-28 to authorize the State Board of Pharmacy to issue durable medical equipment supplier licenses. With the exception of the entities listed in subsection (f) of this bill, any person who wishes to sell or rent durable medical equipment must obtain such licensure. Finally, the board is required to promulgate rules and regulations necessary to implement the provisions of this Code section.</p>
SB070	SC: Finance	Feb/13/2017 - Act 4	Sen. Butch Miller (R-Gainesville) would amend O.C.G.A § 31-8-179.6 by extending the sunset provision relating to the hospital Medicaid financing program in order to extend the date of repeal to June 30, 2020 (it is currently June 30, 2017).
SB081	SC: Health and Human Services	Feb/14/2017 - Senate Read Second Time	Sen. Renee Unterman (R-Buford), seeks to create the "Jeffrey Dallas Gay, Jr. Act." In part it addresses the proposed permission of the State's health officer to issue a standing order permitting certain persons and entities to obtain opioid antagonists. This is codification of the Governor's order allowing the use of Naloxone as over-the-counter medication and permitted to be sold without prescription.
SB41	SC: Health and Human Services	Feb/16/2017 - House Second Readers	Sen. Renee Unterman (R-Buford) would amend 26-4-5 to provide for the licensure of durable medical equipment suppliers and requirements for licensure for such suppliers.