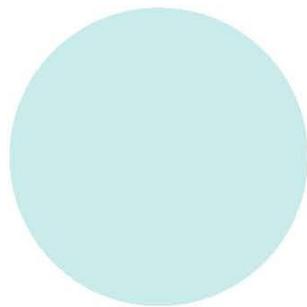




**LOUISIANA STATE  
MEDICAL SOCIETY**

# **LEGISLATIVE SESSION SUMMARY 2017**



The 2017 Regular Session of the Louisiana Legislature adjourned sine die at 6 p.m. on June 8, 2017. Unfortunately, there wasn't a resolution reached for how to tackle the fiscal cliff/budget fiasco. We will have to wait to see the final budget result upon the adjournment of a Special Session, which Governor John Bel Edwards called in advance, presuming the House and Senate would be unable to resolve their differences in House Bill 1.

Primarily at issue is approximately \$200 Million that has been recognized by the Revenue Estimating Commission (REC) but House Republicans refuse to spend, due to the fact that the REC has consistently had to revise their estimates downward in previous years, forcing mid-year budget cuts. The Senate's version of the state budget fully funds TOPS like the House wanted, but it also goes beyond how much the House was willing to spend.

The Special Session began at 6:30 p.m. on June 8<sup>th</sup> and must end no later than midnight on June 19<sup>th</sup>.

This year, the LSMS Governmental Affairs' staff tracked 70 pieces of legislation. The Council on Legislation took a support position on 29 bills, an oppose position on six bills, and a monitor/neutral position on the remaining bills. This report highlights some of the notable pieces of legislation that were up for consideration this session.

### **BUDGET**

**House Bill 1 by Rep. Cameron Henry (R-Metairie)** It's entirely too soon to know for sure what the budget for FY 2017-18 will look like at this time

*Final Action: Undetermined*

### **TAKING THE LEAD ON ATTACKING THE OPIATE EPIDEMIC**

The state's drug overdose (OD) rate outpaces the national average, fueled by the rise in prescription opioid abuse and the use of illicit opioids, like heroin, and synthetic black-market opioids, like fentanyl. The Centers for Disease Control and Prevention reported Louisiana had the 19th highest age adjusted opioid OD rate in 2015.

**Senate Bill 55 by Sen. Fred Mills (R-Parks)** is LSMS-requested legislation for all prescribers which addresses underutilization of the Prescription Monitoring Program (PMP) as well as Continuing Education requirements. Louisiana's PMP is a useful tool that can help improve patient care and reduce prescription drug abuse and "doctor shopping." SB 55 requires that upon initial application or upon renewal of a controlled dangerous substance license from the Board of Pharmacy, a prescribing practitioner shall automatically be registered in the PMP.

It also requires all prescribers, or their delegate, to access and review a patient's record prior to initially prescribing any opioids to that patient and access the PMP again every 90 days if the patient's course of treatment involves that opioid for more than 90 days.

This requirement shall NOT apply if:

- The drug is prescribed or administered to a hospice patient or to any other patient who has been diagnosed as terminally ill.
- The drug is prescribed or administered for the treatment of cancer-related chronic or intractable pain.
- The drug is ordered or administered to a patient being treated in a hospital.
- The PMP is inaccessible or not functioning properly due to an internal or external electronic issue.
- No more than a single seven-day supply of the drug is prescribed or administered to a patient.

All prescribers in La. must obtain three continuing education credit hours as a prerequisite of license renewal in the first annual renewal cycle after Jan. 1, 2018 and the three hours shall be considered among the credit hours currently required by the prescribers' licensing board. Successful completion of this requirement once shall satisfy the requirement in full.

The continuing education criteria shall involve drug diversion training, best practice prescribing of controlled dangerous substances, appropriate treatment options for addiction, and any other matters regarding the prescribing of controlled dangerous substances deemed appropriate by the board.

A prescriber who has a controlled substance license shall be exempt from the CE requirements for license renewal if he submits to his licensing board a certification form attesting that he has not prescribed, administered, or dispensed a controlled dangerous substance during the entire reporting period.

This legislation encountered no opposition throughout the process.

***Final Action: Awaiting Gubernatorial Action (Signing Ceremony on Monday)***

**House Bill 192 by Rep. Helena Moreno (D-New Orleans)** limits first-time prescriptions of opioids to adult patients for acute pain to a seven-day supply. If, in the professional judgement of the medical practitioner, more than a seven-day supply is required, the practitioner shall document the reason in the medical chart of the patient. When treating minors, practitioners shall not issue a prescription for an opioid for more than a seven-day supply at any time and shall discuss with a parent/guardian the risks associated with opioid use and why the prescription is necessary. Prior to issuing a prescription for an opioid, the medical practitioner shall consult with the patient regarding the quantity of the opioid and the patient's option to fill the prescription in a lesser quantity and inform the patient of the risks associated with such medication.

This legislation also encountered no opposition throughout the process.

***Final Action: Awaiting Gubernatorial Action (Signing Ceremony on Monday)***

**House Bill 490 by Rep. Walt Leger (D-New Orleans)** establishes the Advisory Council on Heroin and Opioid Prevention and Education to coordinate resources and expertise to assist in a statewide response. The bill requires the council to coordinate parish-level data on opioid overdoses and usage of overdose-reversal medication as current and accurate statewide data is critical in educating both those involved in policy development and the citizens of this state.

***Final Action: Awaiting Gubernatorial Action (Signing Ceremony on Monday)***

### **MEDICAL MALPRACTICE**

**House Bill 51 by Rep. Steve Pugh (R-Ponchatoula)** would have increased the Medical Malpractice Cap from \$500,000 to \$1 Million in claims for the death of a patient.

***Final Action: After a presentation by the family that asked Rep. Pugh to file the bill, he pulled the bill from consideration without asking the committee to vote on the legislation.***

**House Bill 526 by Rep. Gene Reynolds (D-Minden)** attempted to increase the prescriptive period from three to five years in which a claim shall be filed and lower the non-economic cap from \$500,000 to \$350,000 and economic damages limited to actual cost of past and future medical care. The LSMS provided testimony as to the unintended consequences of moving forward with such piecemeal legislation versus taking a holistic approach to the issues surrounding medical malpractice claims.

***Final Action: After emotional testimony from a family who believed they had been caught up in a confusing process that was very complicated and not explained to them correctly by their attorney, Rep. Reynolds also pulled his bill from consideration without asking the committee to vote.***

**House Bill 137 by Rep. Sam Jenkins (D-Shreveport)** clarifies filing deadlines for medical review panels. The legislation was filed to address the ambiguity of electronically filed requests identified by the Louisiana Supreme Court in the case of *In re Tillman*, wherein a request was received after 5 p.m. on the final day of the prescriptive period and deemed to be untimely. The bill provides that a request for a medical review panel shall be deemed filed on the date sent, if the request is electronically sent, the date mailed, if the request is delivered by certified or registered mail, or the date received, if the request is delivered by any other means.

***Final Action: Awaiting Gubernatorial Action***

### **BOARD OF MEDICAL EXAMINERS**

**Senate Bill 39 by Sen. Gerald Boudreaux (D-Lafayette)** is clean-up legislation to reinstate term limits relative to the Louisiana State Board of Medical Examiners. It provides that no member shall serve more than three consecutive terms.

***Final Action: Awaiting Gubernatorial Action***

**Senate Bill 194 by Sen. Page Cortez (R-Lafayette)** would have repealed the Louisiana State Medical Board of Examiners' ability to limit a physician's right to advertise his certification by certain boards. After hours of debate, this legislation was ultimately defeated.

***Final Action: Failed to Pass Senate Health and Welfare Committee***

### **WORKERS' COMPENSATION**

**House Bill 529 by Rep. Chris Broadwater (R–Hammond)** would have provided for a closed pharmacy formulary for the workers' compensation system. This legislation was never scheduled for a hearing.

*Final Action: Never scheduled*

**House Bill 592 by Rep. Kirk Talbot (R–River Ridge)** would have also provided for the creation of a workers' compensation closed pharmacy formulary. The LSMS provided detailed testimony of the detrimental impact of such legislation. If passed, it would limit the ability of physicians to treat their patients in the workers' compensation system in the most effective manner in order to get them back to work as expeditiously as possible.

*Final Action: Never scheduled for Senate Labor and Industrial Relations Committee hearing*

### **FEES**

**House Bill 414 by Rep. Walt Leger (D–New Orleans)**, a Louisiana Department of Health (LDH) proposed fee bill which would have increased licensing fees on facilities and healthcare providers, was defeated on the House floor 59-29 on its first vote. Your LSMS team spent a great deal of time educating legislators on the significant impact increasing any fees would have on providers. With Medicaid reimbursements at record lows, now is not the time to be balancing the Department of Health's Office of Public Health's budget on the back of physicians. The bill author chose not to try a second vote before the deadline passed to pass bills off of the House floor.

*Final Action: Failed to Pass on House Floor*

### **RIGHT TO TRY**

**House Bill 179 by Rep. Julie Stokes (R–Kenner)** expands the Right to Try Act to provide for means of consent and to include certain devices within the law's definition of "investigational drug, biological product, or device." Former New Orleans' Saints' star and ALS advocate Steve Gleason testified in support of this legislation. The LSMS was on the front lines of passing the original Right to Try Act in Louisiana.

*Final Action: Awaiting Gubernatorial Action*

### **VITAL SIGNS – OPIOID ABUSE**

**Senate Concurrent Resolution 21 by Sen. Beth Mizell (R–Franklinton)** requests Louisiana medical schools, prescriber licensing boards, and prescriber trade associations to take all necessary steps to eliminate pain as the 5<sup>th</sup> vital sign and to increase prescriber education and awareness on assessing, identifying, and treating the symptom of pain.

*Final Action: Enrolled*

**House Concurrent Resolution 75 by Rep. Malinda White (D – Bogalusa)** requests the LDH to take all necessary steps to bring attention to the need to eliminate pain as the 5<sup>th</sup> vital sign and a determinant of quality patient care.

*Final Action: Enrolled*

### **TOBACCO TAX**

**House Bill 271 by Rep. Frank Hoffman (R-West Monroe)** would have increased taxes on vapor products and electronic cigarettes.

*Final Action: Failed to Pass House Ways and Means Committee*

**House Resolution 155 by Rep. Frank Hoffman (R-West Monroe)** requests a study and report on tax-related and health-related issues associated with vapor products and electronic cigarettes.

*Final Action: Enrolled*

### **BUDGET OVERSIGHT**

**House Bill 139 by Rep. Jack McFarland (R-Jonesboro)** requires prior approval of the Joint Legislative Committee on the Budget of requests for proposals, contracts, and cooperative endeavor agreements over 50 million.

*Final Action: Pending Senate Final Passage – died before the deadline*

### **BALANCED BILLING**

**House Bill 435 by Rep. Kirk Talbot (R – River Ridge)** Originally a balanced billing piece of legislation, Rep. Talbot worked with the LHA and LSMS to amend the bill to now only require notification to patients prior to surgery that there may be of out-of-network providers in the hospital and direct them to their insurance company for verification. The hospital must also notify the patient that they may be charged a facility fee.

*Final Action: Awaiting Gubernatorial Action*

**House Resolution 181 by Rep. Kirk Talbot (R–River Ridge)** Urges and requests the Louisiana Department of Health to study the desirability and feasibility of adopting state policy to provide for review of prescription drug prices in the medical assistance program.

*Final Action: Enrolled*

### **IMMUNIZATIONS**

**House Bill 539 by Rep. Beryl Amedee (R–Houma)** would have removed the requirement that certain students in approved home study programs provide evidence of current immunization against meningococcal disease. After consultation with several provider groups and the Office of Public Health, Rep. Amedee pulled her bill from consideration.

*Final Action: No Action Taken*

## **MISCELLANEOUS**

**House Bill 250** by **Rep. Steve Pylant (R–Winnsboro)** authorizes local needle exchange programs.

*Final Action: Signed by the Governor (ACT 40)*

**Senate Bill 14** by **Sen. Jay Luneau (D–Alexandria)** amended the definition of “auto-injector” for purposes of emergency medical services, allowing more companies into the Louisiana market.

*Final Action: Awaiting Gubernatorial Action*

**Senate Bill 59** by **Sen. Fred Mills (R–Parks)** requires the Louisiana Board of Pharmacy to develop a website to contain prescription drug information to be made available to prescribers on the board's website with a dedicated link that is prominently displayed on the board's home page, or by a separate easily identifiable Internet address.

*Final Action: Awaiting Gubernatorial Action*