

## **TNA 2011 Bills of Interest**

### **SB 0170\* Watson B./HB 0244 Cobb J.**

Sunset - board of nursing. As introduced, extends the board of nursing, June 30, 2016; reduces maximum period a member may serve on the board, from 12 to eight consecutive years.

**TNA SUPPORTS BILL AS WRITTEN.**

### **TNA opposes amendatory language for the following reasons:**

- As written, changes to who can serve on the Board of Nursing are prescriptive and narrowly outlined. These changes could potentially make it difficult to fill positions.
- By decreasing Board size from 11 to 9 members will make it more difficult to assure a quorum.
- Requiring 7 "physically present" members for any disciplinary hearing will dramatically slow down the process and increase the backlog of cases.
- This amendment could potentially eliminate the Board's use of hearing panels, currently being used to expedite cases.

**Senate Status:** Referred to Senate Government Operations.

**House Status:** Placed on calendar of House Government Operations for 04/13/2011 with previously adopted amendment 1.

### **SB 0817 Crowe/HB 0829\* Hensley**

**Authentication of verbal orders.** Requires that hospitals authenticate all verbal orders by a physician or responsible individual who has the authority to issue verbal orders in accordance with hospital policies or medical staff bylaws. Establishes that policies or bylaws must require that authentication of verbal orders occur within 48 hours after the time the order was made and the individual receiving a verbal order must record the date and time of such order. Requires the verbal order to be authenticated up to 30 days after the date of the patient's discharge, if the read-back and verify process is followed. Establishes that a read-back and verify process must require that the individual receiving the order immediately read back the order to the physician, who must immediately verify that the read-back order is correct.

**Amendment:** House Health & Human Resources amendment 1 makes technical corrections. House Health & Human Resources amendment 2 changes the language "up to 30 days" to "up to 14 days."

**TNA addressed nursing's concern with amendatory language deleting "responsible individual" with "authorized individual."**

**Senate Status:** Placed on calendar of Senate General Welfare for 04/13/2011.

**House Status:** Set for House Floor 04/07/2011.

### **SB 1258 Yager/HB 1040\* Ramsey B.**

**Regulation of pain management clinics.** Establishes procedures for pain clinics to become certified by the board of medical examiners. Allows the board to inspect the pain clinic and investigate complaints. Requires that except for investor-owned clinics, the pain clinic must be majority owned by a physician or co-owned with other physicians. Prohibits such physician/owner from being convicted of a felony or a illegal drug-related misdemeanor. Requires that all pain clinics must be operated by a medical director who is a physician and practices in this state under an unrestricted license. Establishes procedures to revoke or suspend certificates issued by the board. Requires clinic to post certificate in a conspicuous location that is clearly visible to patients. Establishes monetary fines for certain violations. (14 pp.)

**Amendment:** Senate General Welfare amendment 1 deletes the original bill. Establishes regulations for pain management clinics and requires such clinics to apply for certification with the Department of Health (DOH). Authorizes DOH to charge a fee for the issuance of a certificate. Defines a "pain management clinic" as a privately owned facility in which a medical doctor, an osteopathic physician, an advanced practice nurse, and/or a physician assistant provides pain management services to a majority of the patients through prescription of opioids, benzodiazepines, barbiturates, or carisoprodol, but not including suboxone, and the physician treats the patients for more than 90 days in a 12-month period. Requires the Commissioner of Health, in consultation with applicable Boards, to promulgate rules necessary to implement this part, by October 1, 2011. Authorizes the Board of Medical Examiners, the Board of Osteopathic Examination, the Board of Nursing, and the Committee on Physician Assistants to inspect and investigate the clinics, and discipline clinics for any violations of the provisions of this bill. Allows certifications to remain effective for two years from the date of issuance and authorizes DOH to grant a 90-day grace period to renew the certificate. Requires each pain management clinic to have a medical director who is a licensed physician or osteopathic physician who is responsible for all of the requirements relative to the certification of the clinic. Requires the medical director to be physically present at

the clinic for no less than eight hours each week. Subjects a practitioner who provides pain management services at an uncertified pain management clinic to an administrative penalty of \$1,000 per day. Requires a practitioner to document the reason for prescribing or dispensing more than a 72-hour dose of controlled substances for the treatment of chronic nonmalignant pain. Senate General Welfare amendment 3 authorizes the Department of Health to take action against a pain clinic. **TNA worked with others on amendatory language. This bill is an effort to control promulgation of “pill mills.”**

**Senate Status:** Senate General Welfare recommended 04/06/2011 with amendment 3 and previously adopted amendment 1. Sent to Senate Calendar Committee.

**House Status:** House General Subcommittee of Health & Human Resources 04/05/2011 recommended with amendment 1, as amended. Placed on calendar of Health & Human Resources Committee for 4/13/2011.

**SB 1291 Southerland/HB 1811\* Tidwell**

**Motorcycle helmets not required for nonresidents.** Exempts nonresidents, 21 years of age or older who are from states that do not require motorcycle helmets, from having wearing a helmet while driving in this state.

**TNA OPPOSES for reason of public safety.**

**Senate Status:** Referred to Senate Transportation.

**House Status:** Referred to House General Subcommittee of Transportation.

**SB 1457 Overbey/HB 1636\* Dennis**

**Operation and licensing of pain management facilities.** Authorizes the board for licensing health care facilities to establish rules and regulations concerning the operation and licensing of pain management facilities.

**TNA, CRNA, PA sponsored legislation to address regulation of pain management facilities.**

**Senate Status:** Placed on calendar of Senate General Welfare Committee for 4/13/11.

**House Status:** Referred to House General Subcommittee of Health & Human Resources.

**SB 1466 Bell/HB 1673\* Matheny**

**Riding of motorcycle without helmet.** Allows persons who are 21 years of age and who possess proof of comprehensive medical coverage providing at least \$15,000 in medical benefits for injuries from a crash to ride a motorcycle without a helmet. **TNA OPPOSES for reason of public safety.**

**Senate Status:** Placed on calendar of Senate Transportation Committee for 4/13/11.

**House Status:** Placed on calendar of House General Subcommittee of Transportation for 4/12/11.

**SB 1935 McNally/HB 1896\* Hensley**

**Nurses engaged in interventional pain management.** Specifies that an advanced practice nurse and a physician assistant can only perform invasive procedures involving any portion of the spine, spinal cord, sympathetic nerves or block of major peripheral nerves under the supervision of a licensed physician who has been certified in certain medical specialties, including anesthesiology, neurological surgery, orthopedic surgery, or physical medicine and rehabilitation.

**TNA opposes this legislation for the following reasons:**

- **No Evidence of Harm.** There is no objective evidence that anyone has been harmed by an injection performed by a CRNA, NP, or PA.
- **Increase Costs.** The bill will increase cost and decrease access to care by limiting the performance of common procedures such as facet blocks and SI joint injections by CRNA's, NP's, and PA's.
- **Limit Access to Care.** The bill will force the closure of many pain management facilities, especially in rural areas.
- **Increase dependence on drugs.** Because injections are an effective alternative to the use of narcotics to treat chronic pain, the bill will inevitably increase the use of drugs by patients experiencing chronic pain.
- **Reduce Competition.** The Federal Trade Commission has recently opposed similar proposed restrictions in Alabama because of the adverse effect they would have on competition.

**Senate Status:** Placed on calendar of Senate General Welfare for 04/13/2011.

**House Status:** On calendar of House General Subcomm.of Health & Human Resources for 4/12/2011.