

TNA Legislative Calendar -- Week of March 26, 2018

TNA will be working on or monitoring the following legislation.

Monday, March 26, 2018

4:00pm - House Chamber, House Floor

21. HB2606
Hardaway
G. **Requires department of children's services to develop instruction guidelines for child safety programs.** Requires the department of children's services to develop instructional guidelines by January 1, 2019 for child safety training programs for members of professions that frequently deal with children who may be at risk of abuse. Requires the department to work with each licensing board to ensure that the child safety training program created by the board fully and accurately reflects the best practices for identifying and report child abuse and child sexual abuse as appropriate for each profession. **Amendment Summary:** House Health Committee amendment 1 (013157) rewrites the bill. Requires the Department of Children's Services (DCS) to develop instructional guidelines for child safety training programs for members of professions that frequently deal with children who may be at risk of abuse, no later than January 1, 2019. Requires the Board of Medical Examiners, Board of Osteopathic Examination, Board of Nursing, and Board of Social Work Licensure to work with DCS to create the child safety training programs. House Finance, Ways & Means Committee amendment 1 (014316) deletes and rewrites the bill. Deletes all language after the enacting clause. Requires the Department of Children's Services (DCS) to develop instructional guidelines for child safety training programs for members of professions that frequently deal with children who may be at risk of abuse no later than January 1, 2019. Requires DCS to work with any licensing board that creates a child safety training program to ensure the program accurately reflects best practices for identifying and reporting child abuse. **Position:** Monitoring
SB2405 - S. Kyle - 02/05/18 - Referred to Senate Judiciary Committee.
30. HB2348
Williams R. **Prescribing of opioids to non-pregnant women of child-bearing age.** **Amendment Summary:** Senate Health & Welfare Committee amendment 1 (014476) re-writes the bill. Requires a prescriber, when prescribing any opioid to a patient who is a woman of childbearing age, to advise the patient of the risk associated with opioid use during pregnancy, counsel the patient on appropriate and effective forms of birth control, and offer information about the availability of free or reduced cost birth control to the patient. States that a person who fails to comply with this section is not guilty of a felony and shall be punishable only by a civil penalty assessed by the provider's licensing board and only in cases involving a pattern of willful failure to comply. House Health Committee amendment 1 (013387) rewrites the bill. Requires a health care prescriber, when prescribing more than a five-day supply of opioids to a non-pregnant woman of childbearing age, to inform the patient of the risk of fetal injury and neonatal abstinence syndrome in the event of pregnancy while the patient is being treated with opioids. Requires prescribers to assure that patients receive culturally and linguistically appropriate, patient-centered and non-coercive counseling that presents methods from all tiers of effectiveness and means to obtaining contraceptive services. Requires prescribers to document any counseling and the patient's reproductive life plan in the patient's medical record. Encourages the health care prescriber, if a pregnancy does occur during treatment, to minimize fetal exposure as much as possible and coordinate care with appropriate obstetric providers upon diagnosis of pregnancy. **Position:** Monitoring
SB2674 - P. Bailey - 03/07/18 - Senate Health & Welfare Committee recommended with amendment 1 (014476). Sent to Senate Calendar Committee.

4:00pm - Senate Chamber, Senate Floor

15. SB2025
Haile F. **Prescriptions for controlled substances - partial fill allowed.** Authorizes a prescription for an opioid to be partially filled under certain circumstances. In the case of a partial fill the pharmacy where the prescription was initially filled is required to retain the original prescription. Requires that the prescribing practitioner be notified in the case of partial fill. **Amendment Summary:** House Health Subcommittee amendment 1, Senate Health & Welfare Committee amendment 1 (014603) deletes and rewrites all language after the enacting clause such that the only substantive change is changing the effective date from January 1, 2019, to upon becoming law. **Position:** Monitoring
HB2440 - B. Terry - 03/22/18 - Set for House Health Committee 03/27/18.

Tuesday, March 27, 2018

8:30am - Senate Hearing Rm I, Senate Finance, Ways & Means Committee

This committee will hear a presentation on **Expansion Requests from the University of Tennessee & Le Bonheur Children's Hospital**. MEMBERS: CHAIR B. Watson (R); VICE CHAIR J. Stevens (R); 2ND VICE CHAIR J. Hensley (R); B. Massey (R); R. Tate (D); M. Norris (R); B. Ketron (R); T. Harper (D); F. Haile (R); T. Gardenhire (R); S. Dickerson (R)

4. SB1797
Ketron B. **Tennessee Public Safety Behavioral Health Act.** Requires public safety employers to provide not less than ten visits or sessions with a mental health service provider for the purpose of treating PTSD through the employee's health benefits or otherwise, in addition to any other behavioral or mental health benefits offered. Prohibits public safety employers from engaging in the retaliatory treatment of public safety employees seeking or utilizing mental health service providers or behavioral health programs. **Amendment Summary:** House Health Committee amendment 1, Senate Health & Welfare Committee amendment 1 (013054) adds language to the original bill to include occupational therapists licensed by the Board of Occupational Therapy as mental health providers for the purposes of this legislation. **Position:** Monitoring HB1510 - S. Whitson - 03/22/18 - Set for House Finance, Ways & Means Subcommittee 03/28/18.

9:00am - House Hearing Rm I, House Insurance & Banking Committee

MEMBERS: CHAIR R. Travis (R); VICE CHAIR J. Zachary (R); K. Vaughan (R); T. Rudd (R); C. Sargent (R); M. Sparks (R); D. Thompson (D); J. Towns Jr. (D); J. VanHuss (R); J. Moon (R); C. Boyd (R); D. Powers (R); J. Pitts (D); J. Matheny (R); B. Beck (D); K. Brooks (R); M. Curcio (R); R. Gant (R); G. Hardaway (D); T. Hill (R); K. Keisling (R)

2. HB1935
Zachary J. **Assigning of benefits to a health care provider.** Authorizes insured persons to assign their benefits to the healthcare provider. Requires the insurer to distribute funds in names of the insured and healthcare provider as joint payees in cases of medical expense benefits. Authorizes the insurer to disregard an insured's assignment of benefits under certain circumstances including but not limited to when the assignment of benefits is to an out-of-network physician. Patients must be notified when the physician they see are out-of-network and must understand that they are responsible for the difference in fees. Prohibits out-of-network physicians from contacting consumer reporting agencies regarding amount owed by the insured if the amount is greater than \$200 and a payment plan has been finalized within 45 days. **Amendment Summary:** Senate Commerce & Labor Committee amendment 1 (015617) amends language in the bill by deleting the word "Healthcare providers and healthcare" in subsection (b) of Section 3 and substituting the word "Healthcare". Senate Commerce & Labor Committee amendment 2 (015719) deletes subdivision (d)(3) from Section 1 of the bill, thereby removing the prohibition against healthcare providers collecting out-of-network charges from the insured if the written notice has not been provided to and signed by the insured. House Insurance & Banking Committee amendment 1, Joint Council on Pensions and Insurance amendment 1 (013948) changes agreement statement for the insured to include that they understand they will receive a bill for one hundred percent of billed charges for the amount unpaid by the insurer. Requires the facility to provide an estimated amount for the charge and a listing of contracted medical individuals by the facility as well as their contact information. House Insurance & Banking Subcommittee amendment 2 (015015) deletes and replaced language in the original bill without making any substantive changes to the legislation. **Position:** Monitoring SB1869 - J. Lundberg - 03/20/18 - Senate Commerce & Labor Committee recommended with amendment 1 (015617) and amendment 2 (015719). Sent to Senate Calendar Committee.

10:30am - House Hearing Rm I, House Health Committee

MEMBERS: CHAIR C. Sexton (R); VICE CHAIR S. Kumar (R); R. Williams (R); S. Whitson (R); B. Terry (R); R. Staples (D); P. Sherrell (R); B. Ramsey (R); J. Ragan (R); S. Jones (D); D. Jernigan (D); J. Holsclaw, Jr. (R); M. Hill (R); G. Hicks (R); R. Gant (R); J. Favors (D); J. Faison (R); J. Clemmons (D); S. Butt (R)

9. HB2440
Terry B. **Prescriptions for controlled substances - partial fill allowed.** Authorizes a prescription for an opioid to be partially filled under certain circumstances. In the case of a partial fill the pharmacy where the prescription was initially filled is required to retain the original prescription. Requires that the prescribing practitioner be notified in the case of partial fill. **Amendment Summary:** House Health Subcommittee amendment 1, Senate Health & Welfare Committee amendment 1 (014603) deletes and rewrites all language after the enacting clause such that the only substantive change is changing the effective date from January 1, 2019, to upon becoming law. **Position:** Monitoring SB2025 - F. Haile - 03/23/18 - Set for Senate Floor 03/26/18.

Wednesday, March 28, 2018

9:00am - House Hearing Rm III, House Finance, Ways & Means Subcommittee

MEMBERS: CHAIR G. McCormick (R); R. Williams (R); C. Sargent (R); S. McDaniel (R); H. Love Jr. (D); G. Hicks (R); P. Hazlewood (R); D. Hawk (R); C. Fitzhugh (D); J. Coley (R); K. Camper (D); K. Brooks (R)

58. HB2355 **Prescribed claim form by healthcare providers on the department's website.** Authorizes the commissioner of commerce and insurance to make available to healthcare providers on the department's website any prescribed claim form for reporting by healthcare providers. Broadly captioned. **Amendment Summary:** Senate Commerce & Labor Committee amendment 1, House Insurance & Banking Committee amendment 1 (014990) rewrites the bill to create mandates and requirements regarding coverage for mental health services under group health plans. Requires the department of commerce and insurance to enforce the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008. Requires the department to provide the general assembly with a report on mental health parity market practices of health insurance carriers by January 31, 2020. **Position:** Monitoring
SB2165 - R. Briggs - 03/20/18 - Senate Commerce & Labor Committee recommended with amendment 1 (014490. Sent to Senate Calendar Committee.

11:00am - House Hearing Rm I, House Criminal Justice Committee

MEMBERS: CHAIR W. Lamberth (R); VICE CHAIR M. Curcio (R); J. VanHuss (R); P. Sherrell (R); A. Parkinson (D); M. Littleton (R); S. Jones (D); T. Goins (R); A. Farmer (R); J. Coley (R); R. Akbari (D)

1. HB1749 **Medical Cannabis Act.** Enacts the "Medical Cannabis Act," which establishes the medical cannabis commission for regulation of cannabis-related health care. Specifies that the commission shall consist of nine members and specifies appointing process for members. Specifies that the official domicile for the commission is Nashville and that all meetings of the commission are to be held in Nashville. Specifies compensation for members of commission and specifies duties of commission. Defines "medical cannabis establishment" to mean a cultivation facility, testing facility, processing facility, dispensary, wholesaler, or other medical cannabis entity licensed by the commission. Establishes licensure process for medical cannabis establishments and specifies grounds for the commission to immediately revoke a medical cannabis establishment license. Requires each medical cannabis establishment to have the capability to send data to and receive data from the electronic verification system established by the commission. Also requires each dispensary to check the electronic verification system established by the commission prior to dispensing any cannabis product. Establishes process for voters of a municipality or county to permit the retail sale of medical cannabis product at a licensed dispensary within the territorial limits of such county or municipality, by a majority vote, at a local option election. Requires the medical cannabis commission to promulgate rules governing the transportation of cannabis and cannabis products on public highways in the state and requires the commission to consult with the commissioner of safety in promulgating these rules. Establishes other provisions regarding medical cannabis. (74 pp.) **Amendment Summary:** House Criminal Justice Subcommittee amendment 1 (013041) adds sickle cell anemia to list of debilitating medical conditions. House Criminal Justice Subcommittee amendment 2 (013564) adds language to the definition of cannabis to include any clones of the plant. Ensures that location requirements for medical cannabis establishments do not apply to facilities operated by public or private colleges conducting research in the state. Adds an appeal process for the denial of licenses. **Position:** Neutral
SB1710 - S. Dickerson - 01/24/18 - Referred to Senate Judiciary Committee.
2. HB1831 **Requirements for prescribing, dispensing, and reporting of opioids.** Authorizes commissioner of health to establish the morphine milligram equivalent calculation for an opioid drug. Requires use of the calculation established by the federal centers for disease control and prevention for that drug, given that there s no such existing rule. Changes requirements of healthcare practitioners to check a controlled substance database when prescribing and dispensing the substances to patients, and to check the database every six months, instead of annually, of the patient s treatment. Provides the health commissioner with control of this database. Forbids practitioners from providing more than a five-day supply of opiates to patients, a ten-day supply in situations where refilling the prescription would prove difficult for the patient. Restricts the use of opiates to the treatment of patients in severe conditions where traditional treatment methods have been tried, and only after consultation with the patient. Requires the health commissioner to file a report on the effect of these restrictions by no later than November 2021. This bill is part of the governor's Administration Package. **Amendment Summary:** House Health Committee amendment 3 (015082) rewrites the bill and requires dispensers to update their software system to enable submission of ICD-10 codes by January 1, 2019. Requires healthcare practitioners to check the controlled substances database before prescribing any controlled substances. Changes the acceptable treatment period for

controlled substances from seven days to three. Prohibits healthcare practitioners from treating patients with more than a three-day supply of an opioid. Lists specific procedures and rules for cases where more than a three-day supply of an opioid can be supplied. **Position:** Supports with Amendment SB2257 - M. Norris - 03/14/18 - Senate Health & Welfare Committee recommended with amendment. Sent to Senate Calendar Committee.

1:30pm - House Hearing Rm IV, House State Government Subcommittee

MEMBERS: CHAIR B. Sanderson (R); B. Hulsey (R); D. Jernigan (D); M. Littleton (R); B. Ramsey (R)

13. HB2465 **Study on the issue of transparency in the state purchasing of prescription drugs.** Requires the
Hardaway comptroller of the treasury to study the issue of transparency in the purchasing of prescription drugs by the
G. state and to make recommendations for increasing transparency in the purchasing of prescription drugs
 through the group insurance plan for state employees administered by the state insurance committee and the
 medical assistance program in the TennCare waiver operated by the bureau of TennCare. Requires the
 comptroller to report any findings and recommendations on or before January 15, 2019, to the various
 committees outlined in the section. **Position:** Monitoring
SB2412 - S. Kyle - 02/05/18 - Referred to Senate State & Local Government Committee.

3:00pm - House Hearing Rm I, House Health Subcommittee

MEMBERS: CHAIR B. Terry (R); J. Clemmons (D); J. Faison (R); J. Favors (D); M. Hill (R); S. Kumar (R); C. Sexton (R); P. Sherrell (R); J. Ragan (R)

3. HB2379 **Use of oxycodone by enrollees in medical assistance.** Prohibits medical assistance programs from
Sexton J. covering any drugs containing oxycodone on any preferred drug lists. Requires the bureau of TennCare to
 remove any drug containing oxycodone from the preferred drug list within 90 days. **Amendment**
 Summary: Senate Health and Welfare Committee amendment 1 (015377) prohibits TennCare from providing
 coverage for any drug containing oxycodone. **Position:** Monitoring
SB2112 - F. Niceley - 03/14/18 - Senate Health & Welfare Committee recommended with amendment 1
(015377), which prohibits TennCare from providing coverage for any drug containing oxycodone. Sent to
Senate Finance.