

Government Relations Update – September 24, 2019

Pennsylvania Issues

Legislation

- **HB 533**: Insurer Credentialing Act. On February 19, 2019, Representative Clint Owlet (R–Tioga) introduced legislation to address unwarranted delays by health insurers in credentialing providers. The bill would require health insurers to standardize credentialing applications and to issue credentialing determinations within 45 days after receiving a completed application. On September 18, 2019, the bill was approved by the House Health Committee, and it will now proceed to the House floor for consideration. The Hospital and Healthsystem Association of Pennsylvania (HAP) and St. Luke’s University Health Network support this legislation.
- **SB 842**: Photo Identification in Health Care Facilities. Pennsylvania law requires that a healthcare employee wear a photo identification tag that includes a recent photograph of the employee, the employee’s name, the employee’s title and the name of the health care facility or employment agency. On September 3, 2019, Senator Kristin Phillips-Hill (R–York) introduced legislation which would allow employees to omit their last names from their identification badges to help prevent stalking or other threatening behavior inside and outside the workplace. The legislation is currently awaiting consideration in the Senate Health & Human Services Committee. HAP and St. Luke’s support this legislation.
- **HB 1194**: Prior Authorization. On April 25, 2019, Representative Steven Mentzer (R–Lancaster) circulated a co-sponsorship memorandum announcing his plan to introduce legislation which would limit an insurance company’s use of prior authorization and step therapy before covering essential healthcare services and prescribed drugs. According to Representative Mentzer, the criteria used by insurance companies to approve certain services and drugs are sometimes inconsistent with generally accepted clinical protocols and guidelines. HAP asserts that, while prior authorization and step therapy requirements can ensure quality and unnecessary utilization, these tactics must be used appropriately. Accordingly, HAP is strongly supporting this effort and will lobby for the bill when it is introduced.
- **SB 857**: Telemedicine. On September 19, 2019, Senator Elder Vogel (R–Lawrence) reintroduced legislation to define key components of telemedicine, set telemedicine licensing requirements and require that insurers pay for telemedicine services if they cover the same service provided in person. Senators Bob Mench (R–Bucks), Lisa Baker (R–Pike), John Yudichak (D–Carbon, Luzerne) and David Argall (R–Schuylkill) serve as co-sponsors of the bill. HAP supports the bill, since the expanded use of telemedicine will assist with physician shortages in rural communities. HAP and the Pennsylvania Medical Society have advocated for payment parity for telemedicine services, but payers have consistently opposed those provisions, and they are not included in the bill. The bill passed the Senate last term, but the House failed to consider it.
- **Nurse Licensure Compact**. On September 19, 2019, Representative Bridget Kosierowski (D–Lackawanna) circulated a co-sponsorship memorandum announcing her plan to introduce legislation through which Pennsylvania would join the Nurse Licensure Compact (NLC), a consortium of 34 states that have adopted uniform nurse licensure requirements allowing nurses to obtain a multistate license to practice in all member states. According to Representative Kosierowski, joining the NLC would expedite the licensing process for duly qualified nurses. HAP is expected to support this effort.

Advocacy

- **Telemedicine and Broadband**: On September 3, 2019, Phil Witkowski, St. Luke’s Director of Telehealth, testified before the Senate Technology and Communications Committee regarding the need to improve access to high-speed broadband internet across the Commonwealth. Mr. Witkowski explained that the lack of broadband negatively impacts access to telemedicine services in rural areas. He also reported that, despite numerous studies outlining the tremendous benefits of telehealth services, there are additional barriers to program development and consumer adoption within the Commonwealth, including the lack of state legislation defining telehealth as a modality and legislative support for telehealth payment parity. The hearing was scheduled in response to the Restore Pennsylvania initiative, a program proposed by Governor Tom Wolf (D), which would use \$4.5 billion generated from a natural gas severance tax to fund infrastructure improvements, including the expansion of broadband to rural areas.

New Jersey Issues

Legislation

- **S1072/A1504**: Aid in Dying for the Terminally Ill Act. On January 22, 2018, Senator Nicholas Scutari (D–Union) and Assemblyman John Burzichelli (D–Gloucester) introduced legislation to permit a qualified terminally ill patient to self-administer medication to end the patient’s life. The bill was signed into law by Governor Phil Murphy (D) on April 12, 2019, and it became effective on August 1, 2019. A patient is eligible if in the terminal stage of an irreversibly fatal illness, disease or condition with a prognosis, based upon reasonable medical certainty, of a life expectancy of six months or less. A health care professional is not be required to comply with a patient’s request to self-administer the medication, and a patient may seek to transfer care to another provider if the first provider is unwilling to comply.

The act was immediately challenged in court by a New Jersey physician, and, on August 15, 2019, a state court granted a temporary restraining order barring its implementation. On August 28, 2019, a state appellate court overturned the order, thus allowing the act to become effective. The physician appealed to the New Jersey Supreme Court, and the act remains effective pending the Supreme Court’s decision. Because compliance with a patient’s request to self-administer the medication is voluntary for healthcare professionals and facilities, St. Luke’s has decided not to offer the service until it fully reviews the act and analyzes its processes for compliance. In the meantime, providers at St. Luke’s Hospital – Warren Campus will be distributing “non-participation” forms to patients who make a request for these services.

- **A5369/S3816**: Patient Protection Act. On May 24, 2019, Senator Steve Sweeney (D–Gloucester) and Assemblyman Nicholas Chiaravalloti (D–Hudson) introduced legislation intended to impose new requirements on hospitals, physicians and other health care providers who transfer patients for services outside the State of New Jersey. Prior to transferring a patient, providers would be required to inform patients of the availability of appropriate facilities within the state, disclose the nature of the relationship between the facilities, inform the patient of any out-of-pocket costs at the out-of-state facility, notify the patient’s insurance company of the pending transfer, and report the transfer and the clinical necessity for such transfer to the New Jersey Department of Health. St. Luke’s Hospital – Warren Campus has expressed concern about the negative impact this legislation would have on patient safety, especially when transfers are urgent. Senator Joseph Vitale (D–Middlesex) drafted an amendment that would eliminate all of the notification requirements and simply require that hospitals collect data on patient transfers. St. Luke’s is advocating for the inclusion of this amendment.