Pennsylvania Issues

Legislation

- **H.B. 18**: Workers’ Compensation Treatment Guidelines. On February 13, 2017, Representative Ryan Mackenzie (R-Bucks, Lehigh) introduced legislation to amend the Pennsylvania Workers’ Compensation Act. The bill would require the Pennsylvania Department of Labor and Industry to adopt an evidence-based drug formulary for the program. The bill would also require the program’s Utilization Review Organizations and Peer Review Organizations to meet the same certification requirements as organizations conducting utilization review for other types of health insurance programs. According to Representative Mackenzie, the adoption of a drug formulary can reduce the over-prescription of opioid painkillers for Workers’ Compensation patients. A recent study by the Workers’ Compensation Research Institute found that out of 25 states studied Pennsylvania had the third highest amount of opioids prescribed per injured worker, the second highest number of opioid pills per prescription per claim and a morphine-equivalent average per injured worker 78% higher than the median state studied. Representatives Doyle Heffley (R-Carbon) and Justin Simmons (R-Lehigh Montgomery Northampton) serve as co-sponsors of the bill, which has been assigned to the House Committee on Labor and Industry. The Hospital & Healthsystem Association of Pennsylvania (HAP) supports the bill, and the Workers Compensation Section of the Pennsylvania Bar Association opposes it.

- **S.B. 336**: Reporting of Daily Nursing Ratios. On February 15, 2017, Senator Wayne Fontana (D-Allegheny) reintroduced legislation which would require hospitals to compile and maintain daily reports of staffing levels and ratios in each patient care unit and shift for registered nurses, licensed practical nurses, certified nursing assistants and any unlicensed personnel responsible for patient care. The report would also include the number and types of patient care complaints filed with a hospital. Hospitals would be required to display the report prominently in a location visible to the public. In addition, the Pennsylvania Department of Health would be required to publish quarterly reports on staffing levels for each hospital in Pennsylvania. The bill would include whistleblower protections for employees who report quality of care issues associated with staffing. Senator Fontana asserts that the legislation would ensure that hospitals are transparent, accountable and responsible for providing the best care possible. The Nurse Alliance of SEIU Pennsylvania strongly supports the bill and argues that nurse staffing levels are directly linked to patient outcomes. HAP opposes the bill. The bill, which is co-sponsored by Senator Pat Browne (R-Lehigh), has been assigned to the Senate Health & Welfare Committee, but committee discussion has not been scheduled.

Miscellaneous

- **Mayoral Candidates**: The Pennsylvania primary election will be held on May 16, 2017, and voters in the City of Allentown will select party candidates for mayor. Seven candidates are hoping to secure the Democratic nomination, including incumbent Mayor Ed Pawlowski (D), Lehigh County Commissioner and Pastor David Jones, Allentown School Board member Charlie Thiel, city bed and breakfast owner Siobhan “Sam” Bennett, Allentown City Council President and former Allentown School District administrator Ray O’Connell, recent college graduate Joshua Siegel, and former Wilson Borough Councilman Nathan Woodring. Allentown real estate developer Nat Hyman is seeking the Republican nomination and will face Christopher Pez and Luiz Garcia during the primary election. Mr. Pez is self-employed, while Mr. Garcia is a police officer.
On February 3, 2017, Bob Donchez (D) announced his candidacy for a second term as mayor for the City of Bethlehem. Mayor Donchez is currently the only Democrat or Republican seeking the nomination. The City of Bethlehem limits its mayors to two consecutive terms.

**New Jersey Issues**

**Legislation**

- **S.3:** Safe Opioid Prescribing. As previously reported, on January 30, 2017, Senator Joseph Vitale (D-Middlesex) introduced legislation that would: (1) limit a physician’s ability to issue initial opioid prescriptions for more than five days; (2) mandate that a physician create a pain management treatment plan for any opioid treatments; (3) require a physician to review opioid prescriptions every three months; (4) require a physician to document his/her discussion with a patient concerning the risks of opioids prior to prescribing them; and (5) provide addicted patients access to up to six months of treatment regardless of their ability to pay. The legislation excludes hospice, cancer or nursing homes patients. On February 6, 2017, the bill passed the Senate unanimously. On February 15, 2017, the Assembly approved the bill, and Governor Chris Christie (R) signed the bill into law on the same day. The New Jersey Hospital Association (NJHA) supported the bill.

- **A.4139:** Drinking Water at Health Care Facilities. On September 19, 2016, Assemblyman Daniel Benson (D-Hamilton) introduced legislation requiring New Jersey health care facilities to test for and remediate lead in drinking water within the facilities and disclose the test results. Specifically, the owner or operator of a health care facility would be required to undertake periodic testing of each drinking water outlet in the facility for the presence of lead. Each test for lead would be conducted by a laboratory certified for this purpose by the New Jersey Commissioner of Environmental Protection, in accordance with the sampling and testing methods specified by the Commissioner. Each health care facility would be required to: (1) report its testing activities to the New Jersey Department of Environmental Protection and the New Jersey Department of Health; (2) maintain testing records; and (3) post testing results on its website. On February 13, 2017, the Assembly Environment and Solid Waste Committee approved the legislation, and it has been sent to the Assembly for consideration. The NJHA participated in the hearing and expects to submit comments and proposed changes to the bill.

**Advocacy**

- **Expanded Bundle Payment Model Delay:** Under the new payment model rules developed by the Centers for Medicare and Medicaid (CMS), hospitals were scheduled to participate in bundled payments for Medicare fee-for-service beneficiaries receiving treatment for acute myocardial infarction and coronary artery bypass graft surgery. The rules were extending the comprehensive joint replacement bundle to include surgical hip/femur fracture episodes, too. However, on January 20, 2017, White House Chief of Staff Reince Priebus issued a memorandum to all executive departments and agencies freezing new, recently finalized or pending regulations until a department or agency head appointed or designated by the President reviews and approves them. In response, on February 15, 2017, CMS announced a 60-day delay in the effective date of the mandatory cardiac bundle and the comprehensive joint replacement bundle. Health and Human Services Secretary Tom Price has been generally supportive of shifting Medicare payments away from fee-for-service medicine to value-based care. However, he has been critical of programs that are mandatory or limit providers from making independent medical decisions.

**Miscellaneous**

- **Confirmation Hearing:** On February 16, 2017, the Senate Finance Committee held a hearing regarding Seema Verma’s nomination to become the Administrator of CMS. As reported previously, Ms. Verma is the founder of a national health policy consulting company and previously worked with Vice President Pence to implement Indiana’s Medicaid expansion plan. A committee vote on Ms. Verma’s nomination has not been scheduled, although she is expected to be approved by the committee and the full Senate. The NJHA, HAP and the American Hospital Association support her nomination.