

TPCA Bill Report

Health Care

SB521 / HB861 Enacts the "Tennessee Healthcare Improvement Act of 2015.

Category Health Care
Sponsors Sen. Joey Hensley / Rep. Cameron Sexton
Description Enacts the "Tennessee Healthcare Improvement Act of 2015." Establishes physician-led patient care teams to oversee the practice of advanced practice registered nurses. Allows advanced practice registered nurses to be given more tasks and to be more specialized in certain areas. Authorizes some advanced practice registered nurses who are appropriately specialized to fill out and issue prescriptions. (17pp.)
Senate Status 02/17/2016 - Taken off notice in Senate Health & Welfare Committee.
House Status 02/16/2016 - Taken off notice in House Health Subcommittee.

SB680 / HB456 Advanced practice registered nurses.

Category Health Care
Sponsors Sen. Becky Duncan Massey / Rep. JoAnne Favors
Description Changes the title of advance practice nurses to advanced practice registered nurses and changes references to their credentials from certificates to licenses. Revises other provisions governing the practice of advanced practice nursing. Defines the scope of practice for certified registered nurse anesthetist, clinical nurse specialist, nurse midwife, nurse practitioner, and the practice of advanced practice registered nursing. Specifies that an advanced practice registered nurse is authorized to prescribe or issue controlled substances listed in Schedules II, III, IV and V. Revises other provisions regarding issuance of prescriptions by advanced practice registered nurses and issuance of licenses for advanced practice registered nurses. (pp 14.)
Senate Status 02/17/2016 - Taken off notice in Senate Health & Welfare Committee.
House Status 02/18/2015 - Referred to House Health Subcommittee.

SB791 / HB724 Mission Tennessee Act.

Category Health Care
Sponsors Sen. Mae Beavers / Rep. Mark Pody
Description Enacts the "Mission Tennessee Act." Authorizes each healthcare professional and facility to offer healthcare services to patients in return for no compensation under certain circumstances. Provides that any healthcare professional or facility offering healthcare services at no cost to be free from liability for civil damages, with exception to damages resulting from gross misconduct of the healthcare professional or facility.
Amendment House Health Subcommittee amendment 1 (008535) changes the effective date to July 1, 2016.
Senate Status 02/18/2015 - Referred to Senate Commerce & Labor Committee.
House Status 02/09/2016 - Taken off notice in House Health Subcommittee after adopting amendment 1 (008535), which changes the effective date to July 1, 2016.

SB1677 / HB1823 Definition of contraceptive supplies.

Category Health Care
Sponsors Sen. Steven Dickerson / Rep. Patsy Hazlewood
Description Clarifies that the definition of "contraceptive supplies" includes oral hormonal contraceptives and hormonal contraceptive patches for purposes of the Family Planning Act of 1971. Broadly captioned.
Senate Status 03/02/2016 - Senate Health & Welfare Committee recommended with amendment 1 (013214). Sent to Senate Calendar Committee.
House Status 01/26/2016 - Referred to House Health Subcommittee.

SB1979 / HB2088 Task force to study issues related to healthcare services.

Category Health Care
Sponsors Sen. Becky Duncan Massey / Rep. Jeremy Faison
Description Creates a 21-member scope of practice task force to make recommendations to the general assembly for the improvement of the health of residents of the state by providing access to quality and cost-effective care. Requires the task force to submit a report of its findings to the general assembly by January 15, 2017, at which time the task force will cease to exist.

Amendment SENATE AMENDMENT 1 (011675) deletes all language after the enacting clause. Creates a 19-member scope of practice task force to make recommendations to the General Assembly for the improvement of the health of Tennessee residents by providing access to quality and cost-effective care. The task force is charged with the following: Develop a plan to educate the public and healthcare professionals about the advantages and methods for a transformative healthcare delivery system addressing the need for accessible, equitable, and affordable care provided by the appropriate healthcare professional; Make recommendations on the implementation of a plan to allow healthcare providers to work to their full extent including education, training, experience, and certifications; and Identify barriers to adoption of best practices and potential public policy options to address barriers such as unnecessary regulation and lack of access to primary care providers. Authorizes the appointment of ex-officio members above and beyond the 19 required members. The task force members will not be compensated for their service on the task force. The task force is to submit a report of its findings and recommendations to the 110th General Assembly no later than January 10, 2017, at which time the task force will cease to exist. All appropriate state agencies are required to provide assistance to the task force upon request HOUSE HEALTH COMMITTEE AMENDMENT 1 (012449) deletes all language after the enacting clause. Creates a 19-member scope of practice task force to make recommendations to the General Assembly for the improvement of the health of Tennessee residents by providing access to quality and cost-effective care. The task force is charged with the following: Develop a plan to educate the public and healthcare professionals about the advantages and methods for a transformative healthcare delivery system addressing the need for accessible, equitable, and affordable care provided by the appropriate healthcare professional; Make recommendations on the implementation of a plan to allow healthcare providers to work to their full extent including education, training, experience, and certifications; and Identify barriers to adoption of best practices and potential public policy options to address barriers such as unnecessary regulation and lack of access to primary care providers. Authorizes the appointment of ex-officio members above and beyond the 19 required members. The task force members will not be compensated for their service on the task force. The task force is to submit a report of its findings and recommendations to the 110th General Assembly no later than January 10, 2017, at which time the task force will cease to exist. All appropriate state agencies are required to provide assistance to the task force upon request Adds one anesthesiologist to the board. SENATE AMENDMENT 2 (012562) deletes all language after the enacting clause. Creates a 19-member scope of practice task force to make recommendations to the General Assembly for the improvement of the health of Tennessee residents by providing access to quality and cost-effective care. The task force is charged with the following: Develop a plan to educate the public and healthcare professionals about the advantages and methods for a transformative healthcare delivery system addressing the need for accessible, equitable, and affordable care provided by the appropriate healthcare professional; Make recommendations on the implementation of a plan to allow healthcare providers to work to their full extent including education, training, experience, and certifications; and Identify barriers to adoption of best practices and potential public policy options to address barriers such as unnecessary regulation and lack of access to primary care providers. Authorizes the appointment of ex-officio members above and beyond the 19 required members. The task force members will not be compensated for their service on the task force. The task force is to submit a report of its findings and recommendations to the 110th General Assembly no later than January 10, 2017, at which time the task force will cease to exist. All appropriate state agencies are required to provide assistance to the task force upon request Adds one anesthesiologist to the board.

Senate Status 02/24/2016 - Senate passed with amendments 1 and 2.

House Status 03/01/2016 - House Government Operations Committee deferred to 03/08/16.

SB2443 / HB2323 Health Care Empowerment Act.

Category Professions & Licensure

Sponsors Sen. Kerry Roberts / Rep. Sabi Kumar

Description Enacts the "Health Care Empowerment Act"; authorizes direct primary care agreements. Clarifies that nothing in state law shall be construed as prohibiting a patient or a legal representative of a patient from seeking care outside of an insurance plan, or outside of the TennCare or medicare program, and paying for such care. Also clarifies that nothing in the law of this state shall be construed as prohibiting a licensed physician, other licensed medical professionals, or a healthcare facility from accepting payment for services or medical products outside of an insurance plan. Specifies that a patient or legal representative shall not forfeit

insurance benefits, TennCare benefits, or medicare benefits by purchasing medical services or medical products outside the system. Establishes requirements for direct primary care membership agreements. Defines "direct primary care membership agreement" as a written contractual agreement between a primary care provider and an individual patient, or the patient's legal representative, in which: (A) The provider agrees to provide primary care services to the individual patient for an agreed fee over an agreed period of time; (B) The direct primary care provider will not bill third parties on a fee-for-service basis; (C) Any per-visit charges under the agreement will be less than the monthly equivalent of the periodic fee; (D) The agreement describes the scope of primary service that is covered by the periodic fee; (E) The agreement contains a statement that the agreement does not constitute health insurance; (F) The agreement specifies the duration of the agreement, including automatic renewal periods; and (G) The patient is not required to pay more than 12 months of the fee in advance.

Amendment Senate Commerce & Labor Committee amendment 1 (012532) deletes and rewrites the bill such that the only substantive changes are: (1) deletes the word "membership" where it appears in the original bill (2) replaces the word "provider" with "physician" where it appears in the original bill, and (3) adds language to the original bill stating that the direct primary care agreement is to contain certain specified disclosures in bold font. .

Senate Status 03/01/2016 - Senate Commerce & Labor Committee recommended with amendment. Sent to Senate Calendar Committee.

House Status 03/01/2016 - House Health Subcommittee deferred to 03/08/16.

Oral Health/Dental

SB1956 / HB2025 Comprehensive state oral health plan.

Category Health Care

Sponsors Sen. Jeff Yarbrow / Rep. Harold Love Jr.

Description Requires the commissioner of health to develop a comprehensive state oral health plan by January 1, 2017, and to submit the plan to the federal centers for disease control and prevention and to the general assembly.

Amendment House Health Committee amendment 1 (012685) rewrites the bill. Authorizes the commissioner of health to develop a comprehensive state oral health plan and makes language concerning the plan permissive.

Senate Status 03/02/2016 - Senate Health & Welfare Committee deferred to 03/09/16.

House Status 03/02/2016 - Referred to House Finance Subcommittee.

SB2510 / HB1908 Dental hygienists - scope of practice.

Category Professions & Licensure

Sponsors Sen. Dolores R. Gresham / Rep. Matthew Hill

Description Revises current provision that a dental hygienist may perform. Requires direct supervision of subgingival curettage only, and allows a dental hygienist to perform scaling and root planing, periodontal maintenance, and the administration of local anesthesia under general supervision if the following requirements are met: (A) The patient is 18 years of age or older; (B) The patient has been examined by a licensed dentist within the previous 11 months; (C) The medical history of the patient has not changed since the last examination. If the medical history has changed in that period, then the dental hygienist must consult with the dentist prior to administering local anesthesia; (D) The supervising dentist who performed the examination determined and approved, as indicated in the patient's record, the patient for scaling and root planing or periodontal maintenance with the administration of local anesthesia; (E) The dental hygienist is currently licensed to administer local anesthesia; (F) The dental hygienist has been licensed and practicing for at least 12 months; and (G) The dental hygienist has administered local anesthesia in at least 10 cases under the direct supervision of the same dentist during a period of at least one year. (2) Authorizes hygienists to administer nitrous oxide analgesia under general instead of direct supervision. (3) Under present law, settings in which licensed and registered hygienists may engage in the provision of preventive dental care under the general supervision of a dentist through written protocol include nursing homes, skilled care facilities, nonprofit clinics, and public health programs. Dental hygienists are specifically permitted to render authorized preventive services, as prescribed by the supervising dentist under a written protocol. Dental hygienists rendering such services must be under the general supervision of a licensed dentist as specified in a written protocol between the supervising dentist and the hygienist which must be submitted in advance to the board. This bill adds that under the protocol, the initial and subsequent examinations by the dentist may be accomplished by means of teledentistry technology. (4)

Authorizes licensed dental hygienists to prescribe periodontal rinses, fluoride, and dentrifices, and authorizes licensed pharmacists to fill such prescriptions of dental hygienists. .

Senate Status 01/25/2016 - Referred to Senate Health & Welfare Committee.

House Status 03/01/2016 - Taken off notice in House Health Subcommittee.

SB1023 / HB949 Requires water treatment plants to report on fluoride.

Category Environment & Nature

Sponsors Sen. Dolores R. Gresham / Rep. Susan Lynn

Description Requires operator of a water treatment plant to periodically measure and record the amount of fluoride in the plant's treated water and report the information to the department of environment and conservation. Limits the amount of added fluoride to not exceed seven-tenths of a milligram per liter and limits the amount of naturally occurring fluoride to not exceed established EPA guidelines. Requires plant operators to provide notice of potential risks of fluoride in all written communications with the consumers. Requires plant operators to provide notice when fluoride levels exceed established guidelines and regulations. Assess a civil penalty for violators in the amount of \$1,000 dollars per occurrence for violating the total amount of fluoride allowed. Asses a civil penalty of \$200 per occurrence for violating notice requirements.

Senate Status 03/18/2015 - Senate Energy, Agriculture & Natural Resources Committee recommended. Sent to Senate Finance.

House Status 03/01/2016 - House Agriculture & Natural Resources Subcommittee deferred to 03/15/16.

Behavioral Health

SB1556 / HB1840 Religious beliefs that conflict with counseling or therapy services.

Category Professions & Licensure

Sponsors Sen. Jack Johnson / Rep. Dan Howell

Description Prohibits any requirement of a person providing counseling or therapy services to counsel or serve a client as to goals, outcomes, or behaviors that conflict with a sincerely held religious belief of the counselor or therapist. Requires counselor or therapist to give patient a referral to another therapist or counselor in the situation that such conflict arises.

Amendment Senate Amendment 1 (012228) deletes subsection (b)(3), stating that refusal to provide counseling or therapy shall not be the basis for "Any other action by this state or a political subdivision of this state to penalize or withhold benefits or privileges, including tax exemptions or governmental contracts, grants, or licenses." Deletes the language in subsection (c)(2), "Includes services described in subdivision (c)(1) provided by any person, whether or not such person is licensed, registered, or otherwise regulated by this state." Amends Tennessee Code Annotated, Section 63-22-110(B)(3) to give the board for professional counselors, marital and family therapists and clinical pastoral therapists powers, except in that a violation of A.11.b of the 2014 American Counseling Association Code of Ethics, or any similar or successor provision. SENATE AMENDMENT 3 (012487) restores liability for counselors who will not counsel a client based on the counselor's religious beliefs when the individual seeking or undergoing the counseling is in imminent danger of harming themselves or others.

Senate Status 02/17/2016 - Senate passed with amendments 1 and 3.

House Status 03/01/2016 - House Health Subcommittee recommended with amendment 1 (012870). Sent to House Health Committee.

Insurance

SB1623 / HB2237 Mandated health benefit that excludes TennCare.

Category Insurance Health

Sponsors Sen. Jack Johnson / Rep. Roger Kane

Description Requires that legislation containing a mandated health benefit that excludes TennCare or any state or local insurance program from the application of the mandate be referred to the department of commerce and insurance and the bureau of TennCare in order that certain information may be evaluated and reported back to the appropriate standing committees. Prohibits a standing committee from taking action on such legislation until the department and the bureau have reported to the standing committees.

Senate Status 01/21/2016 - Referred to Senate Commerce & Labor Committee.

House Status 01/27/2016 - Referred to House Insurance & Banking Subcommittee.

Executive Status 02/29/2016 - Joint Council on Pensions and Insurance deferred to 03/07/16.

TennCare

SJR88 Waiver for implementation of TennCare Opt Out program.

Category TennCare

Sponsors Sen. Mark Green

Description Requests the governor to apply for an appropriate federal waiver in order to implement the TennCare Opt Out program as a small pilot project within the TennCare program.

Amendment Senate Amendment 1 (006167) deletes the language "seek an appropriate waiver in order to implement" and substitute instead "send a letter to the federal government regarding a waiver for the implementation of."

Senate Status 02/22/2016 - Senate adopted with amendment 1.

House Status *None*

Tobacco products

SB1973 / HB1978 Must be 21 to use tobacco or vapor products.

Category Criminal Law

Sponsors Sen. Jim Tracy / Rep. Bob Ramsey

Description Increases age of persons allowed to use tobacco and vapor products from 18 years of age to 21 years of age.

Senate Status 01/25/2016 - Referred to Senate Commerce & Labor Committee.

House Status 03/01/2016 - Taken off notice in House Agriculture & Natural Resources Subcommittee.