KMA, Physicians Have another Successful Legislative Session

By Cory W. Meadows
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The practice of medicine in Kentucky will become a little easier thanks to legislation passed in another successful session for the Kentucky Medical Association, local medical societies and physicians throughout the Commonwealth.

With a new Republican majority in the House of Representatives, a bill establishing Medical Review Panels passed and is the first step in achieving tort reform in Kentucky. Senate Bill (SB) 4, sponsored by Sen. Ralph Alvarado, M.D., R-Winchester, requires medical malpractice cases to go before Medical Review Panels—consisting of a group of independent, expert health care providers who offer an opinion on the merit of medical malpractice cases—before they can be filed in court.

After the bill easily passed the Senate in early January, the House passed the bill 51-45 with some changes March 1 and the Senate concurred with those revisions 25-11 March 6. Gov. Matt Bevin signed the legislation March 16.

KMA has long supported efforts to improve Kentucky’s medical liability climate and that’s why the Association once again made tort reform central to its advocacy efforts in 2017. SB 4 is a critical part of that work and represents a significant first step in creating a more fair and consistent legal climate for Kentucky health care providers.

Another KMA priority bill, SB 89, will ensure the treatment physicians prescribe for their patients who want to quit smoking will be covered. The bill requires both private insurers and the state’s Medicaid MCOs to cover tobacco cessation medicine and services recommended by the U.S. Preventive Services Task Force. Studies show that smokers have more success quitting when they work with their physicians. This legislation was sponsored by Sen. Julie Raque Adams, R-Louisville.

The Senate passed the bill 35-2 Feb. 22 and the House followed suit March 14 on a 90-1 vote. The bipartisan support for the measure indicates the impact smoking has on Kentucky, which has one of the nation’s highest smoking rates. The Commonwealth spends $1.92 billion annually in smoking-related health care expenditures.

KMA’s third priority bill, SB 86, which was aimed at changing domestic violence reporting requirements, was included in language added to House Bill 309 and passed the Senate with a committee substitute March 29 on a 37-1 vote; the House concurred with the Senate changes and approved the legislation 94-0 March 30.

The legislation, proposed by the Kentucky Coalition Against Domestic Violence and sponsored by Sen. Alvarado, removes a potential barrier for individuals who want to reach out for services. Research by the University of Kentucky found that if women know in advance that their case would be reported, they are significantly less likely to report abuse or contact a domestic violence shelter. The legislation amends the state’s domestic violence reporting law by eliminating direct reporting by health care providers to the Cabinet for Health and Family Services. Instead, providers would link victims of domestic and dating violence to protective services for those who choose to accept them.

Other Legislation Affecting Physicians

Prescription Limitations: House Bill 333 would make it a felony to illegally sell or distribute any amount of fentanyl, carfentanil and related drugs tied to an increase in drug overdoses in Kentucky. It also contains a provision to limit prescriptions for Schedule II controlled substances used to treat acute pain to three days, but includes several broad exceptions.
**Direct Primary Care:** SB 79 defines “direct primary care membership agreement” and sets conditions for services under such an agreement. Direct primary care allows physicians to contract directly with patients to provide services covered by a set monthly fee without the involvement of insurance. This new law allows the model to be used more in the Commonwealth without added barriers such as being inaccurately characterized as an insurance product.

**Mammography:** HB 78 requires providers of mammography services to provide specific information to patients whose X-ray mammogram shows dense breast tissue.

**Experimental Treatments:** SB 21 permits eligible patients to use investigational drugs, biological products or devices for a terminal illness and prohibit sanctions for health care providers who are working with the patient.

**Immunizations:** SB 101 allows a pharmacist to administer any immunizations for children ages 9 to 17 pursuant to prescriber-approved protocols and consent of a parent or guardian.

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Sen. Ralph Alvarado, MD discusses a bill on direct primary care

LMS member, Richard B. Budde, Jr., MD was one of several physicians that attended the Physicians’ Day at the Capitol

Several University of Kentucky medical students attended Physicians’ Day at the Capitol

(Photos courtesy of the Kentucky Medical Association)

Dr. Shawn Jones of Paducah testified on Senate Bill 89
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