

Legislative Report #8, March 9, 2014

The House and Senate will reconvene at 10:00 am, Monday, March 10th for the 35th Day. Monday of this past week was “Crossover Day”. Legislation must have passed at least one chamber by this day or it is effectively dead for the session.

An adjournment resolution takes the General Assembly through the 40th day. Click [here](#) to view HR 1333.

State Budget –The Senate passed its version of the state’s \$20.8 billion FY 2015 budget by a vote of 51-4. Differences between the House and Senate will now be worked out in conference committee. [HB 744](#) would begin July 1st of this year.

Highlights include:

- \$500,000 in seed money to start two Federally Qualified Health Centers in South Georgia, including \$250,000 for Brooks County and \$250,000 for Decatur County. The main purpose of this program is to enhance the delivery of primary care services in underserved rural areas.
- \$370,000 in increased funding to Area Health Centers to provide housing for medical students in rural community settings, which increases the likelihood that doctors will stay in rural Georgia.
- Increased funding to Georgia Board of Physician Workforce to add additional loan repayment awards for the Rural Loan repayment program to attract physicians to rural Georgia.
- Redirected funds within Public Health to provide for \$700,000 for an autism coordinator and to provide funds for pilot program for early detection and early intervention for the diagnosis of autism in children.
- Increased funding for the Graduate Medical Education for the training of Doctors in rural Georgia.
- Cut \$642,210 from Medicaid Care Management Organization contracts.

[Amended FY 2014 Budget Tracking Document](#)

[FY 2015 State Budget Tracking Document](#)

Thank you for a great Rural Health Day at the Capitol!

To View the slide show for Rural Health Day at the Capitol click [here](#).

[SR 846](#), which is sponsored by State Senator Tim Golden (R-Valdosta), and [HR 1245](#), which is sponsored by state representative Debbie Buckner (D-Junction City), recognized March 5th as Rural Health Day at the State Capitol. These resolutions applaud the Georgia Rural Health Association, which is a nonprofit advocate for rural healthcare consumers and dedicated healthcare professionals who serve rural Georgia.

Thank you Senator Golden and Representative Buckner for sponsoring these resolutions!

Community Based Faculty Tax Credit - [HB 922](#) sponsored by State Representative Ben Harbin (R-Augusta), creates a tax credit for community based faculty and is a recommendation from the 2013 Primary Care Summit. Additionally, it is a legislative priority of GRHA.

HB 922 passed the House on Crossover day by a vote of 171-3. It is now in the Senate Finance Committee. The bill is scheduled to be heard in Senate Finance Subcommittee on Monday, March 10th at 3 pm in room 125 CAPITOL. At 4 pm the Senate FULL Finance Committee will meet. The goal is for the bill to come out of subcommittee at 3 pm and then be placed on the agenda for the full committee at 4 pm.

HB 922 Talking Points

HB 922 Preceptor Tax Deduction Talking Points:

- Rewards Georgia community-based physicians taking Georgia medical, physician assistant, and nurse practitioner students into their practices for the student required community clinical training rotations.
- Offshore and out-of-state programs have begun paying Georgia physicians \$375-\$500 per week to take students.
- Georgia's public & private colleges and universities need to be able to utilize the full cadre of Georgia community-based physicians in order to educate the students matriculating in Georgia programs. The tax deduction provides a reward to the community-based physician without creating an in-state bidding war for these valuable community resources.
- Maximum tax deduction earned each year is \$10,000.
- Estimated fiscal impact for FY 2015, \$250,350.
- Community-based training support is for core rotations (defined as: family medicine, internal medicine, pediatrics, obstetrics and gynecology, emergency medicine, psychiatry, and general surgery).

Medical Student Scholarships - [HB 998](#), sponsored by Representative Matt Hatchett (R-Dublin), revises the powers of the Georgia Board for Physician Workforce (GBPWF) as it relates to medical student scholarships. It allows students who are accepted into an accredited medical school to repay the

scholarships awarded by the GBPW by working in rural and underserved communities, as determined by the Board, which lack primary care and other critical need specialty physicians. This legislation passed out of the House 159-2 and is now in the Senate. It is now in the Senate Health and Human Services Committee.

Bills of interest (have passed at least one chamber)

[HB 707](#) - relating to general provisions regarding health, to the state or any political subdivision, from engaging in an activity that aids in the enforcement of the federal Patient Protection and Affordable Care Act of 2010

[HB 885](#) - would permit medical marijuana to be grown and used in Georgia for treatment of patients with cancer, glaucoma and seizure disorders under tight control

[HB 913](#) would prohibit Department of Community Health Board membership for anyone having an “ownership interest in an entity or program” licensed or regulated by DCH. The legislation, however, exempts medical professionals such as physicians and

[HB 969](#) - provides a new exemption from state sales and use tax only for a limited period of time regarding the sale or use of tangible personal property to certain nonprofit health centers and certain nonprofit volunteer health clinics

[HB 990](#) – Requires legislative approval to expand Medicaid in Georgia

[SB 98](#) - would prohibit the state employees' insurance plan and health insurance exchanges that are part of the Affordable Care Act from providing coverage for abortions

[SB 268](#) - would authorize a physician to delegate to a physician assistant the authority to prescribe Schedule II controlled substances

[SB 281](#) - would require that a high-deductible health care plan with a health savings account be offered as an option for state employees.

[SB 291](#) - would move the Division of Aging Services out of the Department of Human Services and create a separate agency

[SB 292](#) - would launch a registry of Georgians with Alzheimer’s disease and related disorders, tracking their prevalence in the state

[SB 273](#) - would require the Department of Public Health to establish a committee to review maternal deaths and to report on their causes

[SB 391](#) - would provide that each medical facility make a good faith to join the southern regional TRICARE managed care support network

[SB 397](#) - would provide insurance coverage for young autism patients in Georgia. The requirements under SB 397 are limited to covering children ages 6 years and younger, capping annual insurance benefits at \$35,000 and exempting businesses with 10 or fewer employees

Articles of Interest

House Oks bills on Obamacare and food stamps

By Andy Miller

March 3, 2014

The 2014 legislative session was expected to be a quiet one for health care.

Experts predicted that little of significance on health issues would pass before Georgia lawmakers wrapped up a quick, tidy General Assembly session.

The predictions of a dull session were way off target – sort of like picking Denver to beat Seattle in the Super Bowl.

Major bills on medical marijuana, Medicaid expansion, insurance navigators, autism coverage, abortion, foster care, and the Department of Community Health board have all moved through a chamber or were pending for a vote Monday. In the process, these and other health care proposals captured major legislative attention.

Monday, the 30th day of the legislative session, was Crossover Day. That's a kind of midpoint deadline for bills to advance. A piece of legislation must have passed at least one chamber by midnight on Crossover Day to have a chance at becoming law during the session.

[Read more](#)

From NRHA: The Rural Health Impact of the President's FY 2015 Budget

March 4, 2014

President Obama's budget proposal, released earlier this morning, continues to be a source of concern for many rural health providers. While the non-binding budget proposal is unlikely to be adopted by Congress, the President again proposes cuts to the Critical Access Hospital (CAH) system and other members of the rural health safety net. As in years past, the President's proposal suggests cutting all CAH reimbursement from 101% of cost to 100% while completely excluding current CAHs that are within 10 miles of another health care facility, regardless of the care that other facility offers or who it is intended to serve. Additionally, the budget proposal calls for additional cuts to bad debt

reimbursement for all providers. Even discretionary programs designed to help CAHs are being cut; the Rural Health Flexibility Grant line is cut by 15 million dollars.

[Read more](#)