

Health Care Highlights[©]

A Comprehensive Newsletter Covering Activities of the West Virginia Legislature and State Government

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Welcome to the 6th issue of award-winning *Health Care Highlights* for 2015. This year marks the 27th year of our unique health care publication. Our newsletter reaches more than 5,000 health professionals and health policymakers.

Health Care Highlights is published weekly during the regular legislative session and monthly during the periods in between legislative sessions by the firm **Government Relations Specialists, LLC**. *Health Care Highlights* provides a special focus on health topics of interest, legislative health deliberations, and a special section featuring the history and status of all health care bills introduced in the West Virginia state Senate and the House of Delegates.

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Today is the 41st day of the 60-day regular legislative session, and the last day to introduce bills in the Senate. The deadline for House bills is Tuesday. This week, we continue tracking all health care-related bills under consideration by the House and Senate. Currently, 880 House bills have been introduced. The Senate is considering 540 bills. Of the 1,420 total bills introduced so far this session, many are similar to bills from previous legislative sessions or are rules bills. We are currently tracking 241 health care-related bills, which is about 17% of all bills so far. In addition, this week we will report actions taken by legislative committees and other health care news.

2015 Key Legislative Dates

Feb. 23: Last day to introduce bills in the Senate. ([Senate Rule 14](#))

Does not apply to originating or supplementary appropriation bills or resolutions.

Feb 24: Last day to introduce bills in the House. ([House Rule 91a](#))

Does not apply to originating or supplementary appropriation bills or resolutions.

March 1: Bills due out of committees in house of origin to ensure three full days for readings.

March 4: Last day to consider bills on third reading (passage stage) in house of origin for "cross-over." ([Joint Rule 5b](#))

Does not include budget or supplementary appropriation bills.

March 14: Adjournment at midnight. ([WV Const. Art. VI, §22](#))

March 15: Extended session possible, but not expected, to work only on the Budget Bill and other appropriation bills.



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MPLA Bill Very Close to Passage

A bill that would modernize medical liability reforms and avert a potential health care crisis has passed both the House and Senate, but is back before the House for concurrence on Senate amendments. The bill, **SB 6**, passed the Senate on Feb. 2 and the House last Tuesday (Feb. 17). However, the Senate amended House changes and asked the House to agree.

The Medical Professional Liability Act, first passed in 2003, places caps on the amounts that juries can award to successful plaintiffs in malpractice lawsuits for trauma and non-economic damages.

The new legislation broadens the definitions of medical activities, medical facilities and health care providers and clarifies inclusion of physician assistants, advanced professional registered nurses, pharmacies and pharmacists, nursing homes, and others; tightens expert witness requirements; clarifies the collateral source definition; and ties the trauma cap to inflation (the Consumer Price Index) with an upper limit of 150% of the original amount.

A broad coalition of West Virginia's health care community supports the bill, including the West Virginia Hospital Association, the West Virginia Health Care Association, the West Virginia Academy of Family Physicians, Emergency Medical Services - West Virginia Coalition, the West Virginia Behavioral Healthcare Providers Association, the West Virginia State Medical Association, and the West Virginia Osteopathic Medical Association. They have lots of support from lawmakers and the public.

Senate Passes Medicaid Hospital UPL Bill

The Senate on Friday unanimously passed its version of a bill to extend the health care provider tax for eligible acute care hospitals. Like its counterpart in the House (**HB 2614**), **SB 398** would increase the tax rate for the Upper Payment Limit (UPL) program from .62% to .72%. It also provides for disbursement of any funds remaining in the Eligible Acute Care Provider Enhancement Account. The bills are supported by the West Virginia Hospital Association. Both bills are now before the House Finance Committee – where expectations favor passage of the Senate bill.

Oral Chemotherapy Bill on Amendment Stage in House

A bill that would prevent insurance companies from charging higher copayments, deductibles or coinsurance for oral anti-cancer treatments advanced from the House Health and Human Resources last Tuesday, and will be on 2nd reading (amendment stage) on the House floor today. The bill, **HB 2493**, would bring West Virginia in line with 34 other states and the District of Columbia. Passage is anticipated on Tuesday before the bill moves to the Senate.

The West Virginia Cancer Treatment Fairness Coalition strongly supports **HB 2493**, which would eliminate the cost disparity between oral and intravenous anti-cancer medications, ensuring access to all anti-cancer medications for all cancer patients. The disparity occurs because traditional intravenous therapies are covered under the medical provisions of health policies. Oral anti-cancer medications, taken at home, are covered under a policy's pharmaceutical provisions, which on a percentage basis may have higher copays and deductibles, resulting in high, burdensome out-of-pocket expenses for patients.

The West Virginia Cancer Treatment Fairness Coalition is part of a national, patient-centered coalition representing cancer patients, health care professionals and cancer care centers, and is focused on ensuring affordable access to all anti-cancer regimens. The bill is supported by the West Virginia Academy of Family Physicians, the West Virginia Academy of Eye Physicians & Surgeons, the WV-American Cancer Society – Cancer Action Network, the West Virginia Oncology Society, the West Virginia Physical Therapy Association and the West Virginia State Medical Association.

Oral oncology parity laws already are in place in surrounding states, including Ohio, Kentucky, Virginia and Maryland. The laws do not mandate coverage of oral chemotherapy, but simply state that if a health plan covers "chemotherapy" treatment, the patients' out-of-pocket costs must be the same, regardless of how the therapy is administered.

State parity laws do not apply to Medicare or Medicaid. Health plans covered under the federal Employee Retirement Income Security Act (ERISA), also are exempt. The bill also does not apply to PEIA. To fill the ERISA gap, a federal bill known as the Cancer Drug Coverage Parity Act has been introduced in Congress. Requirements under **HB 2493** would apply to policies or contracts issued or renewed after Jan. 1, 2016. The bill also allows for health insurance company cost containment measures if the cost of compliance exceeds 2% of the total cost of coverage.

APRN “Compromise Bill” Sparks Controversy

Legislation that would create a separate licensing board for advanced practice registered nurses (APRNs) was introduced in the Senate on Thursday, then debated less than two hours later by the Senate Committee on Health and Human Resources. After a series of presentations, the committee laid over the 36-page bill (**SB 516**) for further consideration.

The proposed WV Board of Examiners for Advanced Practice Registered Nurses would remove APRNs from the purview of the WV Board of Examiners for Registered Professional Nurses. The new nine-member board would be composed of four APRNs, two physicians, two health care consumers and an APRN educator. The APRNs would include a nurse midwife, a nurse practitioner, a certified registered nurse anesthetist and a clinical nurse specialist. All members would be appointed by the Governor to five-year terms and could not serve more than two consecutive terms.

Several other provisions of the bill would alter prescriptive authority for APRNs as well as requirements for collaborative agreements with physicians. It would allow APRNs to practice independently in specified circumstances.

Robert Knittle, executive director of the West Virginia Board of Medicine, said he received a copy of the bill just 40 minutes prior to the Health Committee meeting. “We have not been a party to the development of this bill,” said Knittle. “It clearly cannot be considered a ‘compromise bill.’ In fairness, we should have the opportunity to look at it, so that we can respond intelligently to it. I believe this merits a little more involvement from everyone.”

Proponents of the bill began circulating blast emails to rally support as early as Tuesday morning. The emails dubbed the bill as a “compromise,” in apparent reference to a lengthy debate during the 2014 regular session, focused on a Legislative Auditor’s Performance Evaluation & Research Division (PERD) report, as well as an interim study by the Joint Committee on Government Organization, which failed to draft legislation after months of testimony in a subcommittee.

During an October 2014 meeting, the subcommittee heard compelling presentations from Knittle; Ernie Miller, DO, president of the West Virginia Board of Osteopathic Medicine; Art Rubin, DO, president of the WV Osteopathic Medical Association; Sherri Young, DO, physician representative for the WV Academy of Family Physicians; and Hoyt Burdick, MD, past president of the WV State Medical Association. At that time, Knittle noted, “If you’re going to practice medicine in West Virginia, you should be regulated by the Board of Medicine.”

On Thursday, Sen. Roman Prezioso and other committee members seemed taken aback by the series of events. “Who has this bill been compromised with?” he asked. “If there was a compromise, I want to know who did the compromising.”

Elizabeth Baldwin, representing the West Virginia Nurses Association, said APRNs want to be able to practice in an environment that is “least restrictive . . . consistent with public health and safety.” She said APRNs want to be “part of the solution” in addressing West Virginia’s overburdened primary care system, and that the bill’s provisions are “based largely on PERD recommendations.” The committee appeared concerned that key PERD recommendations weren’t there.

Legislative Auditor Aaron Allred told Senate Health that PERD could find no evidence that removing APRNs from current regulations would solve the rural health shortage in West Virginia. Several states which allow APRNs to practice independently do not track data on their success, he said. Regarding prescriptive authority, Allred said, “We do not believe they should have the authority to write Schedule II drugs like doctors can.”

Under the bill, APRNs would be allowed to prescribe a non-renewable 72-hour supply of hydrocodone combination medications and a 30-day supply of any FDA-approved drug to treat Attention Deficit Hyperactivity Disorder, without refill. Certain drugs listed under Schedule III would be limited to a 30-day supply without refill.

Sen. Tom Takubo, an osteopathic physician and vice chair of the committee, questioned Baldwin extensively about how the APRN scope of practice under the bill is different from the practice of medicine by a physician. “We will always collaborate. It’s part of our health care professionalism,” Baldwin said. “We are not asking to practice medicine, or to go beyond our scope of practice and training. We’re not trying to say we’re physicians in any way, shape or form.” Takubo did not appear to be convinced.

Comparative Fault Conference Report Filed

A conference committee report was filed in the Senate on Friday regarding **HB 2002**, which sets limits on fault when multiple defendants are involved. If eventually signed into law by Gov. Earl Ray Tomblin, the bill will require defendants to only pay for their share of damages, and not to be held liable for damages that were caused by others.

The bill passed the House on Jan. 27, and the Senate on Feb. 9 – but the House refused to concur with Senate amendments.

“Passing this bill is one more step toward placing West Virginia’s civil justice system in line with the rest of the nation,” Senate President Bill Cole said on Feb. 9. “This move ensures the person who is responsible pays their fair share of the damages they cause. It’s common sense.”

Senators Mitch Carmichael, Corey Palumbo and Charles Trump and Delegates Dana Lynch, J.B. McCuskey and John Shott comprised the conference committee.

Drug Treatment Pilot Program Originated in House

A proposed drug treatment pilot program, originated Thursday in the House Committee on Health and Human Resources, would study up to 200 enrollees in the state Supreme Court’s Adult Drug Court Program and the Division of Corrections’ work release program struggling with opioid addiction. The bill, **HB 2880**, will be on first reading today (Feb. 23).

The bill’s lead sponsor, Delegate Chris Stansbury, said the court and the division would select a research partner to assist in the program. The partner could be a state university or a nationally recognized criminal justice research institute with extensive experience in the evaluation of criminal justice and substance abuse projects.

Although the medication is not specified in the bill, the intent is to study the use of Vivitrol® or naltrexone, as a long-release, non-narcotic alternative to methadone or suboxone, which Stansbury described as opiate derivatives that themselves can be addictive and divertible. Naltrexone is designed to “eliminate the cravings associated with opioid use, Stansbury said. “This is just another tool in the toolbox that we need to study here in West Virginia. It’s already being used in communities around the state.”

Ohio initiated a similar pilot study of the opiate blocker in 2014 in partnership with Case Western Reserve University. Participants would spend six to 18 months in the program and receive monthly injections of Vivitrol or a similar drug at a cost of \$550 to \$600 per month. Participants would have to be “clean” of opiates to start the program, and would engage in extensive psycho-social therapy and coaching.

Delegate Mike Pushkin and others expressed concern that naltrexone could push addicts to other types of drugs, such as methamphetamine or cocaine, or could lead to overdoses because individuals wouldn’t feel the expected effects of an opiate and simply keep indulging. “The answer to the drug program is not more drugs,” said Pushkin, who volunteers at Highland Hospital. “This is going to cost the taxpayers a lot of money, and it’s not going to work.”

Stansbury and Delegate Kelli Sobonya pointed out that West Virginia is in a “death spiral” of drug addiction and overdose fatalities. “It’s not a panacea,” Stansbury said, “but it may provide a safety net for some.”

Smoking Bill Still Smolders

The House Government Organization Committee on Friday (perhaps ironically, “Tobacco Free Day” at the Capitol) rejected a bill (**HB 2208**) that would give county commissioners the sole authority to regulate smoking, removing that responsibility from local health departments. The bill would allow county commissioners to authorize smoking at racetrack casinos, and bars or gambling parlors that have video poker machines. (A Senate bill, **SB 109**, which would exempt veterans’ and active duty military groups from indoor smoking regulations is on 1st reading Monday, Feb. 23).

The House committee vote came after a sparsely attended public hearing on Tuesday (weather issues) and further public comment Friday. Lobbyists in favor of the bill immediately cried foul, alleging that many of the “no” voice votes actually came from audience members. The committee could decide to reconsider the bill at its next meeting (9 a.m. today).

Charity Care Bill Advances

A bill designed to encourage practitioners to render uncompensated care to low-income patients in exchange for immunity from liability was amended Thursday to apply only to physicians. The bill, **HB 2741**, advanced from the House Committee on Health and Human Resources to the Judiciary Committee.

The amended bill adds a definition for “charity care” and provides immunity unless the conduct is grossly negligent or willful and wanton. The bill encompasses care provided either in free clinics or private offices. Patients would receive notification in writing. An attempt to further amend the bill to include physician assistants, advanced practice registered nurses and dentists failed.

A similar bill, **HB 2727**, which allows out-of-state health care professionals to provide charity care at free medical clinics, received the committee’s endorsement on Tuesday. That bill also advanced to the Judiciary Committee.

In other business, House Health:

- Advanced **HB 2631**, the Alcohol and Drug Overdose Prevention and Clemency Act. This bill, proposed by the Governor, provides limited immunity to a person who seeks emergency medical assistance for someone experiencing a drug or alcohol overdose. It also provides immunity to the overdose victim upon completion of a drug rehab program, as approved by the prosecutor. And, it also provides limited immunity to law enforcement. The bill now moves to the Judiciary Committee.
- Approved a drug testing program for applicants and recipients of the Temporary Assistance for Needy Families (TANF) program. During an earlier public hearing, eight people spoke in opposition to **HB 2021**, none in favor. Cassie Burdyshaw, policy director of the American Civil Liberties Union – West Virginia, said such testing amounts to an illegal search under the 4th Amendment and represents “an unconstitutional intrusion on our individual right to privacy.” Jim McKay, state coordinator for Prevent Child Abuse West Virginia, said TANF provides “concrete support to families in times of need. Without that support, you have more incidence of child abuse and neglect. That’s what the research says.” A DHHR representative said TANF provides a maximum of \$420 per month for a family of five. Less than 4,500 WV adults receive TANF benefits. The drug testing program, she noted, would cost an estimated \$3.3 million in its first year and \$2.2 million annually thereafter.

GO-HELP on Life Support

The Governor’s Office of Health Enhancement and Lifestyle Planning (GO-HELP) appears to be headed for the scrap heap, saving \$250,000 from the state’s current fiscal budget. The House Health Committee moved the bill (**SB 267**) on to the Judiciary Committee last Tuesday; it already had cleared the Senate on Feb. 10.

GO-HELP was created by the Legislature in 2009 as part of West Virginia’s far-reaching “Roadmap to Health” initiative. It was tabbed to be responsible for coordination of all health care reform initiatives and development of a five-year strategic plan. The director of GO-HELP assumed the drug company marketing and advertising annual reporting requirements of the repealed WV Pharmaceutical Cost Management Council. The GO-HELP director reviewed all medical home pilot projects at PEIA and Medicaid, and made recommendations for possible expansion. An advisory HELP panel of five governmental health officials and nine public members was appointed by the governor to advise him and the Legislature on the delivery of health care services. There also were 2 ex-officio legislative members.

After an auspicious start, GO-HELP apparently floundered. On Tuesday, Delegates Don Perdue and Barbara Fleischauer unsuccessfully attempted to salvage the prescription drug oversight portion of the office’s original duties and move them to the state Department of Health and Human Resources. Two remaining GO-HELP employees and a third “on loan” from the state Health Care Authority currently work through Cabinet Secretary Karen Bowling’s office on the Health Innovation Collaborative. Their amendment’s aim to manage and negotiate prescription drug costs also would have required an annual report to the Legislative Oversight Commission of Health and Human Resources Accountability.

Opponents of the amendment pointed out that similar reports from pharmaceutical manufacturers are already provided to the federal government. Further, they observed that the reports from drug companies which had been provided for many years to GO-HELP have just been stored in boxes with no review or action. Delegate Kelli Sobonya commented, “The mission of GO-HELP has clearly not matched what they have been doing. If we let that ball drop, it’s on us, not them.”

West Virginia Legislature

Health Care Bill Status as of 2/20/15

To review current status, visit www.legis.state.wv.us

To find a particular bill, look below for the bill number under a general health category. A description of the bill is provided along with the bill's lead sponsor, additional information about the bill, committee references and other legislative action. For those receiving this newsletter electronically, please note that bill numbers are web-links to the bill text, so you may click on the blue bill number while holding down the control key and information on the bill will open in your web browser.

APPROPRIATIONS & BUDGET

- [SB 233](#) Cole+ **Budget Bill SFY 2016** (see [HB 2016](#)) *Bill proposed by Governor. Of note; 26.3% of all state expenditures are allocated for Health and Human Resources. To Finance.*
- [SB 443](#) Cole+ **Supplemental appropriation to Medicaid** *Governor's bill to provide \$9.7 million for fiscal 2015 from State Excess Revenue Lottery Fund. To Finance*
- [SB 463](#) Cole+ **Supplemental appropriation to Medicaid** (see [HB 2771](#)) *Governor's bill to provide \$14.7 million for fiscal 2015. Finance reported, on 1st reading 2/23.*
- [SB 464](#) Cole+ **Supplemental appropriation Medicaid** (see [HB 2698](#), [HB 2770](#)) *Governor's bill to provide \$9.7 million for fiscal 2015 from State Excess Lottery Revenue Fund. To Finance*
- [SB 465](#) Cole+ **Expires appropriations and cash balances in State Fund, General Revenue** (see [HB 2769](#)) *Governor's bill to expire funds from various accounts for fiscal 2015. To Finance*
- [SB 468](#) Cole+ **Expires funds to State Fund, General Revenue** (see [HB 2766](#)) *Governor's bill to expire funds from Joint Expenses and DHHR, DHS, TRIP Fund. To Finance*
- [SB 471](#) Cole+ **Supplemental appropriation to Human Rights Commission and Medicaid** (see [HB 2763](#)) *Governor's bill to provide \$42,845 to HRC and \$100 million in federal funds to Medical Services. Finance reported, on 1st reading 2/23.*
- [SB 474](#) Cole+ **Supplemental appropriate to the Bureau for Senior Services for Medicaid** (see [HB 2760](#)) *Governor's bill transfer \$31.36 million from fiscal 2015 lottery profits to Lottery Senior Citizens Fund To Finance*
- [HB 2016](#) Armstead+ **Budget Bill SFY 2016** (see [SB 233](#)) *Bill proposed by Governor. Of note; 26.3% of all state expenditures are allocated for Health and Human Resources. To Finance.*
- [HB 2698](#) Armstead+ **Supplemental appropriation to Medicaid** (see [SB 464](#)) *Governor's bill to provide \$9.7million for fiscal 2015 from State Excess Revenue Lottery Fund. To Finance*
- [HB 2760](#) Armstead+ **Supplemental appropriate to the Bureau for Senior Services for Medicaid** (see [SB 474](#)) *Governor's bill transfer \$31.36 million from fiscal 2015 lottery profits to Lottery Senior Citizens Fund. To Finance*
- [HB 2763](#) Armstead+ **Supplemental appropriation to Human Rights Commission and Medicaid** (see [SB 471](#)) *Governor's bill to provide \$42,845 to HRC and \$100 million in federal funds to Medical Services. To Finance*
- [HB 2766](#) Armstead+ **Expires funds to State Fund, General Revenue** (see [SB 468](#)) *Governor's bill to expire funds from Joint Expenses and DHHR, DHS, TRIP Fund. To Finance*
- [HB 2769](#) Armstead+ **Expires appropriations and cash balances in State Fund, General Revenue** (see [SB 465](#)) *Governor's bill to expire funds from various accounts for fiscal 2015. To Finance*
- [HB 2770](#) Armstead+ **Supplemental appropriation Medicaid** (see [SB 464](#)) *Governor's bill to provide \$9.7 million for fiscal 2015 from State Excess Lottery Revenue Fund. Finance reported, on 3rd reading 2/23.*
- [HB 2771](#) Armstead+ **Supplemental appropriation to Medicaid** (see [SB 463](#)) *Governor's bill to provide \$14.7 million for fiscal 2015. To Finance*

BOARD LICENSURE AND REGULATION

- [SB 22](#) Beach **Expands Board of Registered Professional Nurses from 5 members to 10** To Gov. Org., then Finance
- [SB 126](#) Beach **Rewrites the article concerning the practice of psychology** To Health, then Gov. Org.
- [SB 239](#) Kirkendoll+ **Eliminates unnecessary boards, etc.** (see [SB 255](#)) *Interim bill recommended. To Gov. Org.*

- [SB 255](#)** Cole+ **Eliminates unnecessary boards, councils, task forces, commissions and committees** (see **SB 239, SB 294, HB 2101, HB 2177, HB 2469**) *Bill proposed by Governor. Gov. Org. reported Com. Sub., Judiciary reported, passed Senate 2/10; House Gov. Org. reported, passed House 2/20; pending approval by the Governor.*
- [SB 294](#)** Cole+ **Eliminates unnecessary boards, etc.** (see **SB 255**) *Bill proposed by Governor. Gov. Org. reported, Judiciary reported, passed Senate 2/19, to House Gov. Org.*
- [SB 330](#)** Ferns **Adopts Interstate Medical Licensure Compact** (see **HB 2496**) *This bill allows physicians to be licensed in multiple states, affirms that the practice of medicine occurs where the patient is located at the time of physician-patient encounter, and requires the physician to be licensed by the state medical board where the patient is located. It is supported by the state Board of Medicine and the state Board of Osteopathic Medicine. Similar legislation has been introduced in 14 other states. Interstate Cooperation reported Com. Sub., to Health*
- [SB 334](#)** Ferns **Updates telemedicine and medical services delivery standards** (see **HB 2497**) *Reformulates what constitutes the unauthorized practice of medicine and podiatry under the Board of Medicine, including qualified exemptions. Also updates and defines telemedicine and medical services delivery standards. It establishes criminal penalties for unauthorized medical practice. Gov. Org. reported, Health reported Com. Sub., passed Senate 2/20; to House Judiciary*
- [SB 355](#)** Hall, M. **Implements quality control procedures for agency rules** To Gov. Org., then Finance
- [SB 506](#)** Carmichael **Requires athletic trainers to be licensed by WV Board of Physical Therapy** (see **HB 2746**) To Gov. Org.
- [HB 2101](#)** Morgan+ **Eliminates unnecessary boards, etc.** (see **SB 255**) *Interim bill recommended. To Gov. Org.*
- [HB 2103](#)** Howell+ **Requires licensing boards to provide public access to disciplinary actions** *Also requires medical and health license applicants to submit to state/national crime records checks with fingerprints. Gov. Org. amended, to Finance – On agenda for 2/23.*
- [HB 2177](#)** Armstead+ **Eliminates unnecessary boards, etc.** (see **SB 255**) *Bill proposed by Governor. To Gov. Org.*
- [HB 2233](#)** Walters+ **Requires review of legislative rules 5 years after initial approval** To Judiciary, then Finance
- [HB 2239](#)** Howell+ **Creates a Board of Health Professions** *Under review by affected boards. To Health, then Gov. Org.*
- [HB 2259](#)** Hamrick+ **Requires the Governor to fill vacancies on professional boards within 60 days** To Gov. Org.
- [HB 2269](#)** Walters+ **Requires DHHR rules to be no more stringent than corresponding federal laws** To Judiciary
- [HB 2272](#)** Ellington+ **Allows Pharmacy Board to maintain official Rx program** *Health reported, Gov. Org. reported, passed House 2/20; to Senate.*
- [HB 2469](#)** Armstead+ **Eliminates unnecessary boards, etc.** (see **SB 255**) *Bill proposed by Governor. To Gov. Org.*
- [HB 2496](#)** Ellington+ **Adopts Interstate Medical Licensure Compact** (see **SB 330**) *This bill allows physicians to be licensed in multiple states, affirms that the practice of medicine occurs where the patient is located at the time of physician-patient encounter, and requires the physician to be licensed by the state medical board where the patient is located. It is supported by the state Board of Medicine and the state Board of Osteopathic Medicine. Similar legislation has been introduced in 14 other states. Health amended, to Judiciary - on agenda 2/23.*
- [HB 2497](#)** Ellington+ **Updates telemedicine and medical services delivery standards** (see **SB 334**) *Reformulates what constitutes the unauthorized practice of medicine and podiatry under the Board of Medicine, including qualified exemptions. Also updates and defines telemedicine and medical services delivery standards. It establishes criminal penalties for unauthorized medical practice. The bill authorizes rule-making. Health amended, to Judiciary*
- [HB 2737](#)** Householder+ **Prohibits licensure boards from hiring or contracting with a lobbyist** *Gov. Org. reported, to Judiciary*
- [HB 2746](#)** Ashley+ **Requires athletic trainers to be licensed by WV Board of Physical Therapy** (see **SB 506**) To Gov. Org.

CHILDREN

- [SB 7](#)** Stollings+ **Requires CPR and care for conscious choking instruction in schools** (see **HB 2007**) *This bill requires 30 minutes of CPR training prior to graduation. It also includes training in first aid and care instructions for conscious choking. Teachers are not required to be certified trainers in CPR; instruction may be provided by community members. Schools may opt to include information regarding use of automated external defibrillators (AEDs). Any instruction that results in certification must be taught by an authorized CPR/AED instructor. Passed Senate 2/2; passed House 2/11; pending approval by the Governor.*
- [SB 68](#)** Unger+ **Creates Healthy Children and Healthy Communities Act** To Health, then Finance
- [SB 69](#)** Unger+ **Requires public school screening for dyslexia** To Education, then Finance
- [SB 132](#)** Miller+ **Reduces school nurse staffing ratio** To Health, then Finance

- [SB 286](#)** Ferns+ **Streamlines medical exemptions to compulsory immunizations and vaccine boosters of students** (see **HB 2556**) Health reported Com. Sub., 2nd reference to Judiciary dispensed; passed Senate 2/18; to House Health, then Judiciary
- [SB 296](#)** Walters+ **Provides maximum licensed school psychologist-pupil ratio** To Education, then Finance
- [SB 424](#)** Ferns+ **Eliminates compulsory tuberculosis testing for low-risk school children and personnel** (see **HB 2669**) Health reported, Education reported, on 1st reading 2/23.
- [HB 2007](#)** Stansbury+ **Requires CPR and care for conscious choking instruction in schools** (see **SB 7**) To Education, then Finance
- [HB 2250](#)** Rodighiero **Allows holiday sweets in schools with parental or guardian consent** To Education
- [HB 2255](#)** Rodighiero **Increases felony penalties for exposing children to meth manufacturing** To Judiciary
- [HB 2258](#)** Cowles **Parents' Bill of Rights** To Health, then Finance
- [HB 2261](#)** Cowles **Requires automated external defibrillators in public schools** To Education, then Finance
- [HB 2443](#)** Pasdon+ **Requires CPR and first aid instruction in schools** To Education
- [HB 2510](#)** Campbell+ **Allows sweets at school parties to teach balanced nutrition, moderation** Health reported, to Education
- [HB 2556](#)** Cowles+ **Allows religious exemptions to compulsory immunizations** (see **SB 286**) To Health, then Judiciary
- [HB 2623](#)** Caputo+ **Establishes guidelines and materials to warn about sudden cardiac arrest** To Education, then Health
- [HB 2669](#)** Ellington+ **Eliminates compulsory tuberculosis testing for low-risk school children and personnel** (see **SB 424**) Education reported, 2nd reference dispensed, passed House 2/20; to Senate.
- [HB 2848](#)** Rohrbach+ **Requires state Board of Education to implement K-12 drug awareness program** To Education
- [HB 2866](#)** Guthrie+ **Establishes procedures for Body Mass Index screenings in schools** To Education

HOSPITALS

- [SB 244](#)** Carmichael+ **Permits patients to designate a lay caregiver to provide aftercare** (see **HB 2100**) To Health, then Judiciary
- [SB 336](#)** Ferns+ **Eliminates rate review of hospitals by Health Care Authority** To Gov. Org., then Judiciary
- [SB 398](#)** Ferns+ **Extends expiration date for UPL health care provider tax on eligible acute care hospitals** (see **HB 2614**) Health reported, Finance reported, passed Senate 2/20; to House Finance
- [SB 399](#)** Ferns **Requires open board meetings for nonprofit or government hospitals** Health reported, to Judiciary
- [HB 2034](#)** Williams **Provides civil immunity for hospital volunteers providing good faith emergency care** To Judiciary
- [HB 2100](#)** Williams+ **Permits hospital patients to designate a lay caregiver to provide aftercare** (see **SB 244**) *Interim bill recommended by Select Committee on PEIA/Seniors/Long-Term Care.* Health amended, passed House 2/19; to Senate Health
- [HB 2248](#)** Rodighiero **Patient Safety Act establishing direct-care RN to patient ratios** To Health, then Gov. Org.
- [HB 2376](#)** McGeehan+ **Creates the Save the Hospitals Act** *This bill exempts nonprofit hospitals that provide uncompensated care from paying sales tax, and allows credits against the medical provider tax.* To Gov. Org., then Finance
- [HB 2614](#)** Ellington+ **Extends expiration date for UPL health care provider tax on eligible acute care hospitals** (see **SB 398**) House will use Senate bill. Health reported, to Finance
- [HB 2652](#)** Ellington+ **Reduces the assessment paid by hospitals to the Health Care Authority** *This bill would cap the assessment at no more than one-tenth of 1% of the hospital's gross receipts and defines the items to be used in that calculation. It would have a \$1.3 million annual impact on the HCA. The bill is supported by the WV Hospital Association.* Health amended, to Finance - On agenda for 2/23.
- [HB 2741](#)** Householder+ **Encourages uncompensated care by providing liability immunity** Health amended, to Judiciary
- [HB 2754](#)** Householder+ **Encourages uncompensated care by providing liability immunity** To Health

INSURANCE & HEALTH COVERAGE

- [SB 28](#)** Hall, D. **Requires health insurance coverage for nonnarcotic pain relief systems** To Health, then Finance
- [SB 84](#)** Stollings+ **Redefines "third-party administrator" to include pharmacy benefits managers** To Insurance, then Judiciary – On agenda for 2/23.
- [SB 97](#)** Laird **Sets maximum air-ambulance fees paid by PEIA** *Only HealthNet currently has a contract.* To Insurance, then Finance
- [SB 120](#)** Stollings+ **Recodifies laws for DHHR and Medicaid** To Health, then Gov. Org.
- [SB 262](#)** Cole+ **Transfers CHIP and Children's Health Insurance Agency from Department of Administration to DHHR** (see **HB 2210**) *Bill proposed by Governor.* Health reported, Judiciary reported, passed Senate 2/10; House Gov. Org. reported, passed House 2/18; pending approval by the Governor.
- [SB 267](#)** Cole+ **Eliminates GOHELP** (see **HB 2209**) *Bill proposed by Governor; would save \$250,000 from current budget.* Health reported, Judiciary reported, passed Senate 2/10; House Health reported; to Judiciary.

- [SB 274](#)** Cole+ **Allows flexibility to DHHR in complying with TANF** (see **HB 2382**) *Bill proposed by Governor. Health reported, Judiciary reported Com. Sub., passed Senate 2/17; to House Judiciary.*
- [SB 289](#)** Takubo+ **Prohibits higher copayments, deductibles or coinsurance for oral anti-cancer medications** *Thirty-four states have passed similar legislation, including all surrounding states except PA. Supported by all leading cancer and medical groups. (see **HB 2493**)* To Insurance, then Judiciary – On agenda for 2/23.
- [SB 295](#)** Ferns+ **Establishes appeal process for DHHR Board of Review and for Medicaid decisions** (see **HB 2589**) Health reported, Judiciary reported, passed Senate 2/10; to House Judiciary
- [SB 363](#)** Cole **Allows Court of Claims to set max rate/service limitations for health reimbursement** Health reported, to Judiciary
- [SB 366](#)** Ferns+ **Creates Patient Protection and Transparency Act** *Requires information to consumers when purchasing health coverage through an insurance exchange about covered services, network providers and Rx drugs on a non-discriminatory basis.* To Insurance, then Finance – On agenda for 2/23.
- [SB 368](#)** Nohe **Adopts NAIC standards on risk-based capital reporting for health organizations** (see **HB 2728**) Insurance reported Com. Sub., to Judiciary
- [HB 2047](#)** Shott **Continues the Medicaid Fraud Control Unit in the Attorney General’s office** Health reported, to Judiciary
- [HB 2209](#)** Armstead+ **Eliminates GOHELP** (see **SB 267**) *Bill proposed by Governor.* To Gov. Org.
- [HB 2210](#)** Armstead+ **Transfers CHIP and Children’s Health Insurance Agency from Department of Administration to DHHR** (see **SB 262**) *Bill proposed by Governor. Health amended,* to Gov. Org.
- [HB 2173](#)** Rodighiero **Provides reduced rates to married workers without children under PEIA** To Insurance, then Finance
- [HB 2215](#)** Householder+ **Protects individuals seeking coverage through WV Health Benefit Exchange** To Health, then Judiciary
- [HB 2216](#)** Ellington+ **WV Health Benefit Exchange Act** Health amended, to Judiciary
- [HB 2242](#)** Longstreth+ **Requires health insurers to reimburse ambulance service providers directly** To Insurance, then Finance
- [HB 2244](#)** Rodighiero **Provides state health care services to active duty and inactive military personnel** To Insurance, then Finance
- [HB 2260](#)** Ellington+ **Prohibits DHHR from expanding managed care without Legislature’s approval** To Health, then Finance
- [HB 2382](#)** Armstead+ **Allows flexibility to DHHR in complying with TANF** (see **SB 274**) *Bill proposed by Governor. Health amended,* to Judiciary
- [HB 2403](#)** Rodighiero **Qualifies children of state employees who make \$25,000 or less for CHIP** To Health, then Finance
- [HB 2493](#)** McCuskey+ **Prohibits higher copayments, deductibles or coinsurance for oral anti-cancer medications** *Thirty-four states have passed similar legislation, including all surrounding states except PA. Supported by all leading cancer and medical groups. (see **SB 289**)* Insurance reported, Health reported Com. Sub., on 2nd reading 2/23.
- [HB 2509](#)** Faircloth+ **Determines federal health care legislation invalid in WV** To Health, then Judiciary
- [HB 2589](#)** Ellington+ **Appeal process for DHHR Board of Review and Medicaid decisions** (see **SB 295**) Health amended, to Judiciary
- [HB 2660](#)** Frich+ **Requires registration and regulation of health insurance exchange navigators and non-navigator assisters under the Affordable Care Act** To Health, then Judiciary
- [HB 2661](#)** Frich+ **Provides for protection and privacy of those seeking health insurance under the ACA** To Health, then Judiciary
- [HB 2728](#)** McCuskey+ **Adopts NAIC standards on risk-based capital reporting for health organizations** (see **SB 368**) To Insurance amended, to Finance
- [HB 2860](#)** Manchin+ **Requires same copayments to licensed occupational therapists, speech pathologist and physical therapists as to physicians** To Health, then Judiciary

MEDICAL LIABILITY

- [SB 2](#)** Gaunch+ **Predicates actions for damages upon comparative fault principles** (see **HB 2002**) To Judiciary
- [SB 6](#)** Ferns+ **Needed revisions to Medical Professional Liability Act (MPLA)** *Supported by all leading health care, hospital, long-term care and medical groups. Opposed by trial lawyers. (see **HB 2006**)* Judiciary reported Com. Sub. . passed Senate 2/2; House Judiciary amended; passed House 2/17; Senate amended 2/20 and asks House to concur.
- [SB 377](#)** Boso+ **Limiting civil liability of pharmaceutical manufacturers or sellers providing warning to learned intermediary** *WV is the only state in the U.S. without this doctrine.* To Judiciary – On agenda for 2/22.
- [SB 456](#)** Takubo+ **Allows letters of merit to be admissible in actions against health providers** To Judiciary- On agenda for 2/22
- [SB 532](#)** Trump+ **Provides civil immunity for clinical practice plans, and medical and dental schools** To Judiciary, then Finance

[HB 2002](#) Wagner+ **Predicates actions for damages upon comparative fault principles** (see [SB 2](#)) Judiciary reported Com. Sub., floor amendment adopted; passed House 1/27; Senate Judiciary amended; passed Senate 2/9; Conference committee filed report 2/20.

[HB 2006](#) Weld+ **Needed revisions to Medical Professional Liability Act (MPLA)** (see [SB 6](#)). *House will use Senate bill.*

[HB 2091](#) Manchin **False Claims Act** *This bill failed last year and is not expected to pass this session.* To Judiciary, then Finance

[HB 2454](#) Ferro+ **Adds “pharmacist” & “pharmacy” to definition of MPLA health provider** (see [SB 6](#)) To Health, then Judiciary

[HB 2811](#) Westfall+ **Deletes obsolete provisions in code regarding Physicians Mutual Insurance Co.** *This bill provides that the company need not operate as a nonprofit, so long as it remains a domestic company.* Insurance amended, to Finance

MISCELLANEOUS

[SB 30](#) Hall, D.+ **Permits the sale of raw milk** Agriculture reported Com. Sub., Health reported Com. Sub., passed Senate 2/20; to House Health.

[SB 48](#) Yost+ **Modifies guidelines for treating injured workers** To Health, then Judiciary

[SB 346](#) Ferns **Creates Mental Health, Veterans and Service Members Court Act** To Judiciary, then Finance

[SB 425](#) Plymale+ **Provides WVU, MU and WVSOM more authority to invest assets** (see [HB 2815](#)) Education reported, passed Senate 2/20; to House Education, then Finance

[SB 505](#) Hall, D.+ **Allows physician liens on claims and causes of action by injured parties** To Judiciary

[SB 539](#) Carmichael+ **Allows release of medical records in certain civil actions** To Judiciary

[HB 2390](#) Rodighiero **Requires public restrooms to provide hand sanitizers** To Health, then Finance

[HB 2439](#) Smith, P.+ **Creates enhanced criminal penalties for assaults against pregnant women** To Judiciary

[HB 2448](#) Sobonya+ **Permits the sale of raw milk** To Agriculture, then Health

[HB 2449](#) Sobonya+ **Permits co-owners of cows to receive their raw milk** To Agriculture, then Health

[HB 2511](#) Walters+ **Exempts health care sharing ministries from state requirements of health insurance** *A “health care sharing ministry” is a faith-based nonprofit organization that is tax-exempt under IRS code.* Health reported, to Judiciary

[HB 2595](#) McGeehan+ **Redefines “affected persons” in certificate of need requirements** To Health, then Judiciary

[HB 2613](#) Ellington+ **Requires state and federal criminal background checks** Health amended, to Judiciary

[HB 2795](#) Westfall+ **Permits release of medical records without court order** To Judiciary

[HB 2797](#) Campbell+ **Changes terminology in code to “intellectually disabled” and “disabled”** To Health

[HB 2815](#) Pasdon+ **Provides WVU, MU and WVSOM more authority to invest assets** (see [SB 425](#)) To Education, then Finance

[HB 2825](#) Walters+ **Requires DHHR to increase direct care rates to meet state’s new minimum wage** To Health, then Finance

[HB 2827](#) Howell+ **Abolishes the James “Tiger” Morton Catastrophic Illness Fund and Commission** *This fund provided assistance through legislative appropriation, as well as donations of cash, property, gifts and grants. According to the bill, the fund duplicates existing federal programs. Remaining funds will be transferred to the state’s General Fund.* To Gov. Org., then Finance – On agenda for 2/23.

NURSING HOMES, LONG TERM CARE & SENIORS

[SB 64](#) Stollings+ **Provides exemption from moratorium for specialty skilled nursing beds** To Health

PRESCRIPTION MEDICATIONS & DRUG USE/ABUSE/DIVERSION

[SB 9](#) Stollings+ **Relates to opioid antagonists** (see [SB 335](#) [HB 2009](#)) To Health

[SB 16](#) Stollings+ **Requires the state Board of Pharmacy to identify specialty drugs** To Health, then Judiciary

[SB 18](#) Stollings+ **Overdose Prevention Act** (see [SB 230](#), [HB 2045](#)) Health reported, to Judiciary

[SB 20](#) Stollings **Allows public health agencies to bill patients for STD and HIV testing** To Health, then Judiciary

[SB 66](#) Stollings **Revises fees for manufacturer/distributor/dispenser/researcher of controlled substances** To Health, then Finance

[SB 81](#) Plymale+ **Increases penalty for illegally transporting certain controlled substances into WV** To Judiciary

[SB 99](#) Carmichael+ **Mandates drug testing of legislators & certain recipients of state/federal funds** To Health, then Judiciary

[SB 230](#) Stollings+ **Overdose Prevention Act** (see [SB 18](#), [HB 2045](#)) To Health, then Judiciary

[SB 231](#) Stollings+ **Relates to opioid antagonists** (see [SB 335](#), [HB 2009](#)) To Health

[SB 232](#) Stollings+ **Provides expedited partner therapy for sexually transmitted disease** (see [HB 2046](#)) To Health, then Judiciary

[SB 270](#) Stollings+ **Changes 50% to 60% as criteria for pain management clinic designation** To Health, then Judiciary

- [SB 335](#)** Cole+ **Creates Access to Opioid Antagonists Act** *Bill proposed by Governor.* (see **[HB 2009](#)**, **[HB 2543](#)**) *Allows initial responders to possess and administer opioid antagonists in suspected opioid-related overdoses; ensures opioid antagonists are made available to individuals at risk of overdose, as well as to relatives, friends and caregivers; and establishes responsibilities for licensed health care providers who prescribe opioid antagonists. Provides for data collection, training and rule making.* Passed Senate 2/2, passed House 2/11; pending approval by Governor.
- [SB 348](#)** Blair+ **Requires DHHR to create drug screen pilot program for cash assistance applicants** Health reported Com. Sub., to Finance
- [SB 428](#)** Stollings+ **Permits certain optometrists, APRNs and PAs to prescribe Schedule II hydrocodone combination drugs for up to three days.** (see **[HB 2776](#)**) To Health, then Judiciary
- [SB 458](#)** Stollings+ **Requires prescription for ephedrine, pseudoephedrine and other meth precursors** (see **[HB 2611](#)**) To Health, then Judiciary
- [SB 494](#)** Takubo+ **Allows businesses to stock epinephrine auto-injectors for emergencies** (see **[HB 2648](#)**) *This bill allows what are commonly known as EpiPens to be obtained, stocked and stored by certain businesses in the state to be used following training in emergency situations involving anaphylaxis (severe allergic reaction) for a customer, visitor or employee. It follows similar legislation passed in Florida and other states.* To Health, then Judiciary – awaiting House bill.
- [SB 497](#)** Stollings+ **Permits school nurses to possess and administer opioid antagonists** To Health, then Judiciary
- [SB 523](#)** Cole+ **Alcohol and Drug Overdose Prevention and Clemency Act** (see **[HB 2631](#)**) *Bill proposed by Governor. The bill provides limited immunity to a person who seeks emergency medical assistance for someone experiencing a drug or alcohol overdose. It also provides immunity to the overdose victim upon completion of a drug rehab program. It also provides limited immunity to law enforcement.* To Judiciary – On agenda for 2/22.
- [SB 535](#)** Nohe+ **Exempts community rehabilitation programs from sales taxes** To Finance
- [HB 2009](#)** Fast+ **Creates Access to Opioid Antagonists Act** (see **[SB 335](#)**) Health amended, to Judiciary. *House will use Senate bill.*
- [HB 2021](#)** Lane **Mandates drug testing for recipients of federal-state and state assistance** Health amended, to Finance
- [HB 2026](#)** Howell+ **Allows terminally ill patient access to investigational, non-FDA approved drugs** To Health, then Judiciary
- [HB 2044](#)** Perdue+ **Relates to opioid antagonists** (see **[SB 335](#)**, **[HB 2009](#)**) To Health, then Judiciary
- [HB 2045](#)** Perdue+ **Overdose Prevention Act** (see **[SB 18](#)**, **[SB 230](#)**) Health amended, to Judiciary
- [HB 2046](#)** Perdue+ **Provides expedited partner therapy for sexually transmitted disease** (see **[SB 232](#)**) Health reported, to Judiciary
- [HB 2104](#)** Arvon+ **Prohibits business licenses for selling drug paraphernalia** (see **[HB 2180](#)**) Health amended, to Judiciary
- [HB 2136](#)** Phillips, R.+ **Increases criminal penalties for transporting controlled substances** To Judiciary, then Finance
- [HB 2174](#)** Marcum+ **Increases criminal penalties for transporting controlled substances** To Judiciary
- [HB 2180](#)** Hamilton+ **Prohibits business licenses for selling drug paraphernalia** (see **[HB 2104](#)**) To Health, then Judiciary
- [HB 2373](#)** Rodighiero **Prohibits new methadone treatment programs and clinics** To Health, then Judiciary
- [HB 2397](#)** Rodighiero+ **Prohibits new methadone treatment programs and clinics** To Health, then Judiciary
- [HB 2455](#)** Sobonya+ **Requires release of minor’s medical records for drug testing to parent or guardian** To Health, then Judiciary
- [HB 2543](#)** Armstead+ **Creates Access to Opioid Antagonists Act** *Bill proposed by Governor.* (see **[SB 335](#)**) To Health, then Judiciary
- [HB 2544](#)** Householder+ **Allows optometrists to prescribe certain Schedule II hydrocodone combination opioids** (see **[HB 2776](#)**)
- [HB 2611](#)** Perdue+ **Requires Rx for pseudoephedrine and other meth precursors** (see **[SB 458](#)**) To Health, then Judiciary
- [HB 2631](#)** Armstead+ **Alcohol and Drug Overdose Prevention and Clemency Act** (see **[SB 523](#)**) *Bill proposed by Governor. The bill provides limited immunity to a person who seeks emergency medical assistance for someone experiencing a drug or alcohol overdose. It also provides immunity to the overdose victim upon completion of a drug rehab program. It also provides limited immunity to law enforcement.* Health reported, to Judiciary
- [HB 2648](#)** Pasdon+ **Allows businesses to stock epinephrine auto-injectors for emergencies** (see **[SB 494](#)**) *This bill allows what are commonly known as EpiPens to be obtained, stocked and stored by certain businesses in the state to be used following training in emergency situations involving anaphylaxis (severe allergic reaction) for a customer, visitor or employee. It follows similar legislation passed in Fla. and other states. Supported by major medical and health organizations, Cancer Treatment Fairness Coalition, WV Chamber of Commerce and WV Hospitality & Travel Association.* Health amended, Judiciary reported Com. Sub., on 2nd reading 2/23
- [HB 2670](#)** Rodighiero+ **Allows PAs to prescribe certain Schedule II hydrocodone combination opioids** (see **[HB 2776](#)**)
- [HB 2711](#)** Marcus+ **Provides for a scratch-off Lottery game to fund a drug treatment facility** To Judiciary, then Finance
- [HB 2723](#)** Howell **Changes sunset date of the Multi-State Real-Time Tracking System to June 2023** To Health, then Judiciary
- [HB 2733](#)** Ellington+ **Removes certain hydrocodone combination drugs from Schedule III** Health amended, on 2nd reading 2/23
- [HB 2734](#)** Ellington+ **Changes sunset date of the Multi-State Real-Time Tracking System to June 2017** To Health, then Judiciary

- [HB 2776](#) Stansbury+ **Permits certain optometrists, APRNs and PAs to prescribe Schedule II hydrocodone combination drugs for up to three days per 30-day period** (see [SB 248](#)) *Bill originated in House Health. Passed House 2/18; to Senate Health*
- [HB 2806](#) Householder+ **Creates a methamphetamine registry** To Health
- [HB 2880](#) Stansbury+ **Creates addiction treatment pilot program** Health originated bill, on 1st reading 2/23

PROFESSIONALS: HEALTH & MEDICAL

- [SB 21](#) Beach+ **Removes MD collaboration for Rx authority for APRNs and certified nurse midwives** (see [HB 2450](#)) *This bill was not recommended for passage by the Joint Gov. Org./Gov. Ops interim committee.* To Health, then Gov. Org.
- [SB 343](#) Blair+ **Exempt chiropractors from CE on veterans' mental health conditions** Gov. Org. reported Com. Sub., Judiciary reported, passed Senate 2/20; to House Gov. Org.
- [SB 501](#) Karnes+ **Requires midwives to file annual reports to Bureau for Public Health** To Health
- [SB 516](#) Leonhardt+ **Creates new licensing board for APRNs** *Does not follow major recommendations of the PERD Audit Report for APRNs. Leading medical organizations strongly oppose this bill.* Health laid over, then Finance
- [HB 2084](#) Manchin **Prohibits discrimination by health care workers** To Health, then Judiciary
- [HB 2098](#) Hamrick+ **Authorizes health professionals to provide services at state-run veterans' facilities without obtaining authorization to practice** Veterans' Affairs amended, Health amended, passed House 2/19; to Senate Health
- [HB 2408](#) Ellington+ **Requires public health officers and physician faculty members to enter into collaborative agreements with APRNs** To Health, then Judiciary
- [HB 2432](#) Ellington+ **Allows Board of Pharmacy to license felons** Health reported, to Gov. Org.
- [HB 2450](#) Campbell+ **Removes MD collaboration for Rx authority for APRNs and certified nurse midwives** (see [SB 21](#)) *This bill was not recommended for passage by the Joint Gov. Org./Gov. Ops interim committee.* To Health, then Gov. Org.
- [HB 2470](#) Campbell+ **Retains nursing education faculty by giving them a \$2,500 tax deduction** To Education, then Finance
- [HB 2500](#) Rodighiero **Allows local board of health to appoint PAs as local health officers** To Health, then Judiciary
- [HB 2662](#) Stansbury+ **The Eye Care Consumer Protection Law** *This bill prohibits optometrists from operating eye exam kiosks.* Health reported Com. Sub., on 2nd reading 2/23
- [HB 2708](#) Skinner+ **Requires suicide prevention training for mental health service providers** To Health, then Judiciary
- [HB 2727](#) Householder+ **Permits out-of-state health providers to provide care at free medical clinics** Health amended, to Judiciary
- [HB 2829](#) Householder+ **Defines "midwife," "certified midwife" and "midwifery," and requires annual report to the Bureau for Public Health** To Health

REPRODUCTIVE RIGHTS & ABORTION

- [SB 236](#) Karnes+ **Limits health insurance coverage for elective abortions to supplemental policies** To Insurance, then Judiciary – On agenda for 2/23.
- [SB 271](#) Karnes+ **Requires providers to administer anesthesia to an unborn fetus older than 7 weeks** To Health, then Judiciary
- [SB 277](#) Miller+ **Requires issuance of certificate of birth resulting in stillbirth** Health reported Com. Sub., Judiciary reported Com. Sub., passed Senate 2/18; to House Judiciary
- [HB 2031](#) Romine **Prohibits abortion based solely on gender of the fetus** To Health, then Judiciary
- [HB 2153](#) Perry+ **The Pain-Capable Unborn Child Protection Act** To Health, then Judiciary
- [HB 2172](#) Rodighiero **Requires abortion providers to obtain parental notification or consent in writing** To Health, then Judiciary
- [HB 2256](#) Rodighiero **Prohibits state funding of abortions** To Health, then Judiciary
- [HB 2371](#) Smith, P.+ **Appoints a guardian ad litem to represent interest of unborn child** To Judiciary
- [HB 2440](#) Frich+ **Prevents taxpayer subsidies of health plans covering abortion** To Health, then Judiciary
- [HB 2458](#) Sobonya+ **Prohibits school employees from assisting students with abortion** To Education, then Judiciary
- [HB 2468](#) Ireland+ **No State-Funded Transportation for Abortion Act** To Health, then Judiciary
- [HB 2568](#) Sobonya+ **The Pain-Capable Unborn Child Protection Act** Health amended, Judiciary reported Com. Sub., passed House 2/11; Senate Judiciary reported, on 1st reading on 2/23.
- [HB 2715](#) Sobonya+ **Prohibits taking minors across state lines for an abortion without parents' consent** To Health, then Judiciary
- [HB 2799](#) Miller+ **Requires all high schools to teach fetal development** To Education, then Judiciary

RULE MAKING & LEGISLATIVE REVIEW

State agencies, boards and commissions are often given statutory authority to promulgate rules. These are known as “legislative review” during the interim period by the Legislative Rule-Making Review Committee, and if approved, then are introduced for legislative consideration in individual rules-bills. The rules-bills are then assigned to various committees, eventually ending up in the Judiciary Committees of the Senate and House of Delegates. There they are bundled into categories of rules-bills.

SENATE RULES BILLS

SB 175 Rules Bundle. Authorizes Department of Health and Human Resources (DHHR), to promulgate legislative rules. This rules-bill bundle now includes these individual rules previously contained in the following bills: Judiciary reported Com. Sub. ; passed Senate 2/3; House Health amended, Judiciary amended, on 1st reading 2/23.

DHHR **SB 171** Chronic pain management licensure. (see **HB 2293**).

DHHR **SB 173** Medication administration. (see **HB 2329**)

DHHR **SB 176** Nursing home licensure. (see **HB 2328**)

DHHR **SB 177** Statewide trauma / emergency care system. (see **HB 2331**)

SB 199 Rules Bundle. Authorizes various health-related boards to promulgate legislative rules. This rules-bill bundle now includes these individual rules previously contained in the following bills: To Judiciary

MEDICAL BOARD SB 197 PA licensure. (see **HB 2341**)

PHYSICAL THERAPY BOARD SB 200 Fees for PTs and PT assistants. (see **HB 2300**)

OSTEOPATHIC MEDICAL BOARD SB 201 Board fees. (see **HB 2299**)

OSTEOPATHIC MEDICAL BOARD SB 202 PA licensure. (see **HB 2348**)

PHARMACY BOARD SB 203 Immunizations administered by pharmacists. (see **HB 2350**)

PHARMACY BOARD SB 204 Pharmacy technician registration. (see **HB 2351**)

PHARMACY BOARD SB 205 Controlled substances monitoring. (see **HB 2352**)

PHARMACY BOARD SB 223 Licensure and practice of pharmacy. (see **HB 2349**)

TAXES, FEES & LOANS

SB 98 Carmichael Increases taxes on tobacco, beer, wine and liquor To Finance

SB 386 Ferns Excludes mobile X-ray services from health care provider tax Health reported, to Finance

SB 531 Kessler+ Increases cigarette tax to fund substance abuse and workforce development To Finance

SB 534 Takubo+ Increases excise tax on cigarettes To Finance

HB 2127 Howell+ Provides a corporate net income tax credit for manufacturers of medical devices To Finance

HB 2559 Trecost Increases the excise tax on cigarettes To Health, then Finance

HB 2633 Perdue+ Funding substance abuse services by increasing taxes on beer, wine and liquor To Health, then Finance

HB 2634 Perdue+ Increases the excise tax on cigarettes and all other tobacco products To Health, then Finance

TOBACCO

SB 109 Blair+ Exempts veterans’ and active duty military groups from indoor smoking rules Military reported Com. Sub., Judiciary reported Com. Sub., on 1st reading 2/23.

SB 400 Ferns Allows certain employers to discriminate vs. tobacco users (see **HB 2689**) Health reported Com. Sub., to Judiciary

HB 2208 McGeehan+ Gives county commissioners sole authority to regulate smoking A public hearing was held 2/17 in House Chambers and 2/20 in committee Political Subdivisions amended, Gov. Org. defeated on voice vote.

HB 2667 Skinner+ Requires list of ingredients in nicotine-based vapor products To Health

HB 2689 Fast+ Allows certain employers to discriminate vs. tobacco users (see **SB 400**) To Health, then Judiciary

February Capitol Health Care Events

February 23	West Virginia Pharmacists Association Day WV for Medical Marijuana Day
February 25	West Virginia Immunization Network Day West Virginia Nurses Association Day Eat Right West Virginia Day WV Commission for Deaf and Hard of Hearing Day
February 27	WV Action Day / National MS Society

Medicaid Fraud Control Unit on the Move?

The Medicaid Fraud Control Unit currently housed within the state Department of Health and Human Resources would be transferred to the Attorney General's office under a bill advanced last Tuesday by the House Health Committee. The AG's office would have prosecutorial authority under **HB 2047**, which would be effective July 1, 2016. The bill is now before the Judiciary Committee.

According to an educational handout prepared by DHHR, the MFCU recovered nearly \$40 million in the last two years as a result of more than 30 investigations involving health care fraud or patient abuse, neglect or financial exploitation. Of the \$40 million, \$27 million was allocated to the Medicaid program. Removing the program would hinder DHHR's ability to work collaboratively among bureaus to combat fraud and seek recoveries, the handout said. The unit was cited as a "best practice" by the Centers for Medicare and Medicaid Services.

Delegate Patrick Lane, however, said debate on the failed Fair Claims Act during the 2014 regular session indicated a gap in the state's ability to investigate and prosecute Medicaid fraud, and recovery funds for the state. Supporters and opponents of the bill both expressed dismay that no one from the Attorney General's office attended the committee meeting. "I don't know whether they think it's a snow day for the folks downstairs or not," Lane remarked.

According to the handout, the MFCU case backlog has decreased by 68% since a PERD audit, from 171 cases to 54 cases as of Dec. 31, 2014. The unit is budgeted for two attorneys, and the positions are 75% federally funded. The AG's office is requesting \$341,000 to hire three Medicaid fraud attorneys, the handout observed; it was not clear whether federal funding would still be available.

In other business Tuesday, House Health:

- Approved **SB 175**, authorizing DHHR to promulgate legislative rules. The bill moves to the Judiciary Committee.
- Reported a committee substitute for **HB 2662**, the Eye Care Consumer Protection Law, which prohibits optometrists from operating eye exam kiosks in shopping malls. The bill will be on 2nd reading Monday (Feb. 23).
- Amended **HB 2733**, which removes certain hydrocodone drugs from Schedule III of the Uniform Controlled Substances Act, in keeping with federal changes made in October 2014. The bill also extends the Multi-State Real Time Tracking System to June 30, 2017. It is on 2nd reading Monday (Feb. 23).

In Other Health Care Highlights

... The Senate Committee on Health and Human Resources took action on five bills during its meeting last Tuesday, including: passage of **SB 18**, the Overdose Prevention Act, which now moves to the Judiciary Committee; passage of a committee substitute for **SB 30**, relating to drinking raw milk, which later passed the Senate on Friday (Feb. 20) and now moves to the House Health Committee; passage of a committee substitute for **SB 334**, relating to the practice of medicine and telemedicine, which later passed the Senate on Friday (Feb. 20) and now moves to the House Judiciary Committee; passage of **SB 363**, which allows the Court of Claims to set maximum rates and service limitations for reimbursement of health care services, and now moves to the Judiciary Committee; and passage of **SB 424**, which eliminates mandatory tuberculosis testing for school children and personnel. The bill will be on 1st reading on Monday (Feb. 23). ...

... More than 33,000 West Virginians were among the 11.4 million Americans who selected new health insurance plans or were automatically re-enrolled under the Affordable Care Act, according to a snapshot report from the U.S. Department of Health and Human Services. The figures were undated through Feb. 15. HHS Secretary Sylvia Burwell, a native West Virginian, said that in the 37 states (including WV) using HealthCare.gov, "nearly 8 in 10 consumers had the option of getting covered for as little as \$100 a month or less with financial assistance that lowered the cost of their monthly premium. They now can fill prescriptions and take their children to the doctor. Some no longer have to choose between paying for health care and paying their utility bill." ...

... The Accreditation Council for Pharmacy Education has affirmed the full accreditation of the University of Charleston's Doctor of Pharmacy program. The council's Board of Directors met in January, removed probation and restored the program's status to "accredited." The university was notified of the decision Feb. 5. The UC School of Pharmacy enrolled its first students in 2006, and received full accreditation when the first class graduated in May 2010. ...

Health Care Highlights®

Thom Stevens, Editor

A Comprehensive Newsletter Covering Activities of the West Virginia Legislature and State Government

Your Best Source for West Virginia Legislative & Governmental Health Information

Quotes of the Week:

... ***“It’s not like we’re letting Al Capone out of jail. We’re talking about a misdemeanor.”***

- Delegate Mike Pushkin, on limited immunity provisions in the Alcohol and Drug Overdose Prevention and Clemency Act.

... ***“Of course, I rise in support of my own amendment.”***

- Delegate Denise Campbell, during debate over HB 2741, the Uncompensated Care Liability Act.

... ***“Some emails are just people banging pots and pans. But some are real personal. They’re all about an issue that’s important to somebody.”***

- Sen. Tom Takubo, as quoted in a *Sunday Gazette-Mail* profile, on the volume of communications from constituents.

... ***“My view of lobbyists wasn’t the greatest. What I’m finding is that everybody has an advocate and most of the time they’re very helpful. They help me understand the issue better.”***

- Sen. Ed Gaunch, in that same *Sunday Gazette-Mail* profile.

... ***“None of this is going to work. But it’s got to sound like it is going to work.”***

- Unnamed political strategist, crafting an alternative to pending legislation.

Inside Health Care Highlights This Issue

Welcome to the 6th Issue in 2015

2015 Key Legislative Dates

MPLA Bill Very Close to Passage

Senate Passes Medicaid Hospital UPL Bill

Oral Chemotherapy Bill on Amendment Stage in House

APRN “Compromise Bill” Sparks Controversy

Comparative Fault Conference Report Filed

Drug Treatment Pilot Program Originated in House

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GO-HELP on Life Support

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In Other Health Care Highlights . . .

Quotes of the Week