

2017 Legislative Session

MONITORED HOUSE BILLS THAT PASSED

HB 43 **2017 AMENDED BUDGET**

<http://www.legis.ga.gov/legislation/en-US/Display/20172018/HB/43>

HB 43, the Amended Fiscal Year 2017 budget, recognizes \$606.2 million in additional revenue or 2.5 percent over the original Fiscal Year 2017 budget. This brings the total appropriation for Amended FY 2017 to \$24.3 billion.

HB 44 **FY2018 BUDGET**

<http://www.legis.ga.gov/legislation/en-US/Display/20172018/HB/44>

House Bill 44, the Fiscal Year 2018 budget, is set by a revenue estimate of \$24.9 billion. This represents an increase of \$1.25 billion, or 5.3 percent, over the FY 2017 original budget. It provides appropriations for the State Fiscal Year beginning July 1, 2017, and ending June 30, 2018;

HB 86 **SEXUAL ABUSE DEFINITION EXPANSION - INCLUDE SEX TRAFFICKING**

<http://www.legis.ga.gov/legislation/en-US/Display/20172018/HB/86>

Relating to reporting of child abuse, so as to expand the definition of sexual abuse to include acts involving trafficking a person for sexual servitude

HB 154**DENTAL HYGIENIST - EXPANSION OF SCOPE OF PRACTICE**

<http://www.legis.ga.gov/Legislation/en-US/display/20172018/HB/154>

HB 154 authorizes licensed dental hygienists to perform application of sealants, oral prophylaxis, fluoride treatment, oral hygiene education, processing of radiographs, and any protocols regarding urgent dental issues that arise under the general supervision of the authorizing licensed dentist. Licensed dental hygienists shall perform their duties only if a licensed dentist is in the dental office or treatment facility, personally diagnoses the condition to be treated, personally authorizes the procedure and remains in the dental office or treatment facility while the procedure is being performed by the dental hygienist, and before dismissal of the patient. No licensed dental hygienist shall diagnose, prescribe, determine the initial dosage, or increase the initial dosage of nitrous oxide, practice dentistry, or do any kind of dental work other than to remove calcareous deposits, secretions, and stains from the surfaces of the teeth and practices that are prescribed by rule or regulation. The requirement of direct supervision shall not apply to the educational training of dental hygiene students at an institution approved by the board and the Commission on Dental Accreditation of the American Dental Association, or its successor agency, when such instruction is carried out under such degree of supervision by a licensed dentist. Direct supervision shall not apply to the performance of dental hygiene duties at approved dental facilities of the Department of Public Health, county boards of health, or the Department of Corrections or the performance of dental hygiene duties by personnel of the Department of Public Health or county boards of health at approved offsite locations. Dental screenings in schools, volunteer community health settings, senior centers, family violence shelters hospitals, clinics, state, county, local and federal public health programs will not require direct supervision.

HB 198**COMMISSION ON WOMEN/SCHOOL VACCINES/FITNESS PROGRAM**

<http://www.legis.ga.gov/Legislation/en-US/display/20172018/HB/198>

Requiring school systems to include information relating to influenza and its respective vaccines if, and only if, the school system already provides information on immunizations, infectious diseases, medications, or other school health issues.

Relating to annual fitness assessment program - eliminate the repealed on June 30, 2019.

Relating to the Georgia Commission on Women - assigned to the Department of Public Health for administrative purpose

HB 206**AUDIT BILL**

<http://www.legis.ga.gov/Legislation/en-US/display/20172018/HB/206>

This bill amends 'The Pharmacy Audit Bill of Rights' and removes an exception relating to faults in certain audits conducted by the Department of Community Health. Any clerical or unintentional error in billing, coding, or required documentation shall not constitute fraud for the medical assistance provided. No such claim shall be subject to criminal penalties without proof of intent to commit fraud. A provider of medical assistance shall be allowed 30 days following notice to the provider of an error or incomplete documentation identified pursuant to an audit or review in order to correct such miscalculation. A provider of medical assistance shall be given the right to a hearing for any attempted withholding of reimbursement or earning by the department or its agents if it correlates to an error, omission, or incomplete documentation relating to the provision of medical assistance.

HB 249**PRESCRIPTION MONITORING DATABASE**

<http://www.legis.ga.gov/legislation/en-US/Display/20172018/HB/249>

HB 249 requires those who have a Drug Enforcement Administration (DEA) permit number to enroll in a prescription monitoring database and update that database when that individual writes a prescription for controlled substances or is a dispenser of controlled substances. Violation of this requirement is to be handled administratively by the state regulatory governing board for the prescriber. Moreover, dispensers of such prescriptions must submit information to the prescription monitoring database every 24 hours. Patient information in the prescription monitoring database must be in compliance with the rules of the federal 'Health Insurance Portability and Accountability Act (HIPPA) of 1996'. Both prescribers and dispensers of controlled substances may delegate not more than two individuals of their staff to have access and update the prescription monitoring database, so long as those individuals are properly licensed or have a proper criminal record background check.

HB 249 provides for exceptions for the prescribers' requirement to update the database when the prescription for those controlled substances for: no more than a three-day supply (26 pills); the prescriptions are to be administered and used by a patient on the premises of a hospital or healthcare facility; the patient has had outpatient surgery and the supply is for no more than 10 days (40 pills); the patient is in an outpatient hospice program; or the patient is receiving treatment for cancer. In addition, overdose rescue kits have been removed from the list of dangerous drugs and can be supplied over the counter and are required to be a certain minimum strength.

HB 341**SEX TRAFFICKING**

<http://www.legis.ga.gov/Legislation/en-US/display/20172018/HB/341>

HB 341 adds those who patronize or solicit a person who is the victim of sexual servitude to the offense of sex trafficking. Moreover, sex trafficking a person for sexual servitude is added to the list of dangerous sexual offenses where the violator must register as a sex offender. HB 341 also clarifies and corrects the Code regarding probation for consecutive sentences for sexual offenses where probation can only be imposed upon the final consecutive sentence. In addition, the bill adds pimping and pandering to a list of offenses where the offender must serve at least 24 hours of incarceration. HB 341 also removes the sunset provision on the requirement for posting the human trafficking hotline in certain locations.

HB 343**REPLACE TERM "MENTAL RETARDATION"**

<http://www.legis.ga.gov/Legislation/en-US/display/20172018/HB/343>

HB 343 replaces the outdated term "mental retardation" in the Code with "developmental disability" where developmental disability has the exact same meaning.

HB 391**SAFE HARBOR LOCATIONS FOR NEWBORNS**

<http://www.legis.ga.gov/legislation/en-US/Display/20172018/HB/391>

Would extend the time a mother can give up a newborn from seven to 30 days and add police and fire stations to the list of allowed safe harbor locations. A mother would not be prosecuted for leaving a newborn in the custody of an employee at a police or fire station if the newborn is no more than 30 days old, and she would be allowed to decline to provide her name. The state Department of Human Services would take the newborn into custody and reimburse for any medical costs.

HB 427**CANCELABLE LOANS FOR PRACTITIONERS IN UNDERSERVED RURAL AREAS**

<http://www.legis.ga.gov/legislation/en-US/Display/20172018/HB/427>

HB 427 goal is to address the shortage of physicians and health care practitioners in underserved rural Georgia. The bill's intent is to attract quality providers to areas in dire need of medical assistance. HB 427 would expand the current service cancelable loan program for physicians and practitioners in underserved rural areas by making loans available to dentists, physician assistants and advanced practice registered nurses who have completed their medical or health care education and would allow those loans to be repaid by those health care practitioners agreeing to provide health care services in rural areas

HB 486

PROXY CAREGIVERS TRAINING

<http://www.legis.ga.gov/Legislation/en-US/display/20172018/HB/486>

HB 486 allows for the Department of Behavioral Health and Developmental Disabilities and the Department of Community Health to select the training curricula for medication administration by proxy caregivers employed or contracted to providers of home and community based services, community residential alternative services, or community living services.

HR 202

STUDY COMMITTEE - DISTRACTED DRIVING

<http://www.legis.ga.gov/Legislation/en-US/display/20172018/HR/282>

A RESOLUTION creating the House Study Committee on Distracted Driving

2017 Legislative Session

MONITORED SENATE BILLS

THAT PASSED

SB 16

CANNABIS OIL EXPANSION OF TREATMENTS

<http://www.legis.ga.gov/Legislation/en-US/display/20172018/SB/16>

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Senate Bill 16 makes six conditions eligible for treatment with a limited form of cannabis oil allowed in Georgia: Alzheimer's disease, AIDS, autism, epidermolysis bullosa, peripheral neuropathy and Tourette's syndrome. Patients in hospice care could also possess the oil.

SB 47

LICENSURE EXEMPTIONS FOR VISITING SPORTS TEAMS - PHYSICIANS/PAs

<http://www.legis.ga.gov/legislation/en-US/Display/20172018/SB/47>

Relating to physicians, physician assistants, and others, so as to provide for licensure exemption for visiting sports teams' physicians; to provide for requirements; to provide for limitations; to provide for agreements with other states; to provide for related matters; to repeal conflicting laws; and for other purposes.

SB 52

LPCAs - ELIMINATE SUNSET ON 1013 AUTHORIZATION

<http://www.legis.ga.gov/legislation/en-US/Display/20172018/SB/52>

SB 52 repeals the sunset provision on the authorization for a licensed professional counselor to deliver a person who is mentally ill or alcohol or drug dependent to the nearest available emergency receiving facility serving the county in which the patient is found for an examination.

SB 70

HOSPITAL BED EXTENT THE SUNSET

<http://www.legis.ga.gov/Legislation/en-US/display/20172018/SB/70>

BILL to be entitled an Act to amend Article 6C of Chapter 8 of Title 31 of the Official Code of Georgia Annotated, relating to the hospital Medicaid financing program, so as to extend the sunset provision; to provide for an effective date; to repeal conflicting laws; and for other purposes.

- *A tax on hospitals that supports Georgia's Medicaid program would be extended until 2020*

- *The so-called “bed” tax, which is due to expire this year, is a 1.45 percent levy on hospitals’ net revenues.*
- *Based on a percentage of patient revenue, the hospital fee raises about \$311 million annually and allows the state draw down an additional \$600 million in federal money to help fund Medicaid and support hospitals that provide care to large numbers of uninsured patients.*

SB 88

'Narcotic Treatment Programs Enforcement Act'

<http://www.legis.ga.gov/legislation/en-US/Display/20172018/SB/88>

Senate Bill 88 provides for the regulation of narcotic treatment programs. The 'Narcotic Treatment Programs Enforcement Act' applies to any system of treatment provided for chronic heroin or opiate-like drug-dependent individuals that administers narcotic drugs under physicians' orders either for detoxification purposes or for maintenance treatment in a rehabilitative context offered by any county board of health, partnership, corporation, association, or person or groups of persons engaged in such administration.

The Department of Community Health is authorized and directed to create all rules and regulations necessary for narcotic treatment programs. The department shall establish an information forum for potential applicants no less than 14 days prior to the start of an open enrollment period, which shall be held December 1, 2017 through December 31, 2017, to accept applications for narcotic treatment. It is mandatory for a representative of the applicant to attend the information forum. Failure to attend and comply with this record of attendance requirements shall disqualify any applicant from consideration during open enrollment. The Department of Community Health will also establish an application review process committee that consists of staff and the Department of Behavioral Health and Developmental Disabilities.

The Department of Community Health shall issue up to four licenses per region to a governing body for any narcotic treatment program which meets all the rules and regulations; however, the department shall establish a review process to determine if a waiver should be granted to allow any additional licensed narcotic treatment programs in a region. The department shall have full authority to determine the requirements for a waiver to be considered for review.

Narcotic treatment programs shall not provide a bounty, free services, free medication, or other rewards for patient referral to such program. Narcotic treatment programs shall not provide temporary discounted financial incentives to a potential patient that do not conform to the schedule of fees established by the department's rules and regulations. To prevent simultaneous enrollment of a patient in more than one program, all programs shall comply with the policies and participate in the central registry operated by the Department of Behavioral Health and Developmental Disabilities.

SB 96

**NURSING HOMES PRONOUNCEMENT OF DEATH
AUTHORIZATION EXPANDED**

<http://www.legis.ga.gov/legislation/en-US/Display/20172018/SB/96>

Relating to health, so as to authorize the pronouncement of death by registered professional nurses, nurse practitioners, or physician assistants of patients in nursing homes **even if they are organ donors**; to provide for the pronouncement of death by registered professional nurses, nurse practitioners, or physician assistants of patients in hospice care even if they are organ donors; to amend Code Section 45-16-25 of the Official Code of Georgia Annotated, relating to coroner's or county medical examiner's duties after notice of suspicious or unusual death, so as to make a conforming change;

SB 102

OFFICE OF CARDIAC CARE

<http://www.legis.ga.gov/legislation/en-US/Display/20172018/SB/102>

Relating to emergency medical services, so as to provide for the designation of emergency cardiac care centers; to provide for the establishment of the Office of Cardiac Care within the Department of Public Health; to provide for rules and regulations

SB 104

**SEX TRAFFICKING HOTLINE NUMBER/VEHICLE
HIJACKING/COUNTERFEIT&FALSE PROOF OF
INSURANCE/UNDERSKIRT FILMING/FENTANYL**

<http://www.legis.ga.gov/legislation/en-US/Display/20172018/SB/104>

Relating to the posting of the human trafficking hotline model notice requirement in government buildings and online sites and to delete the sunset provision for the mandatory posting and add the statewide hotline number to the national hotline number posting

Relating to hijacking a motor vehicle as being in the first degree and create a new crime of hijacking a motor vehicle in the second degree; to change provisions relating to burglary in the second degree involving a vehicle;

Relating to change provisions relating to punishment for the unlawful manufacture, sale, or distribution of a counterfeit or false proof of insurance document;

Relating to prohibit the use of a device to film underneath or through an individual's clothing under certain circumstances;

Relating to provide for exceptions; to include the sale, manufacture, delivery, or possession of fentanyl and related substances within the prohibition of trafficking certain drugs; change provisions relating to Schedule I and II controlled substances;

SB 106**ANESTHETIST/PAIN MANAGEMENT CLINICS**

<http://www.legis.ga.gov/Legislation/en-US/display/20172018/SB/106>

Relating to licensure requirements for pain management clinics, so as to revise a provision relating to the health care professionals who must be on-site at a pain management clinic in order for the clinic to provide medical treatment or services

READS AS FOLLOWS:

No controlled substance shall be prescribed or dispensed in a pain management clinic¹⁰ nor shall a controlled substance prescription be distributed to a patient from a pain management clinic ~~shall provide medical treatment or services, as defined by the~~ unless a physician, a physician assistant authorized to prescribe controlled substances under an approved job description, or an advanced practice registered nurse authorized to prescribe controlled substances pursuant to a physician protocol is on-site at the pain management clinic. **For purposes of this article, dispensing shall not include the administration of anesthesia by a certified registered nurse anesthetist practicing pursuant to Code Section 43-26-11.1**

SB 109**EMSP AND NURSE LICENSURE INTERSTATE COMPACT AGREEMENTS**

<http://www.legis.ga.gov/legislation/en-US/Display/20172018/SB/166>

Senate Bill 109 enacts the "**Recognition of Emergency Medical Services Personnel Licensure Interstate Compact**" (REPLICA) to facilitate the day-to-day movement of emergency management services (EMS) personnel across state boundaries. The compact recognizes that states have a vested interest in protecting the public's health and safety through the shared licensing and regulation of EMS personnel.

The compact is designed to: (1) increase public access to EMS personnel; (2) enhance the states' ability to protect the public's health and safety, especially patient safety; (3) encourage the cooperation of member states in the areas of EMS personnel licensure and regulation; (4) support licensing of military members who are separating from an active duty tour and their spouses; (5) facilitate the exchange of information between member states regarding EMS personnel licensure, adverse action, and significant investigatory information; (6) promote compliance with the laws governing EMS personnel practice in each member state; and (7) invest all member states with the authority to hold EMS personnel accountable through the mutual recognition of member state licenses.

Any member state may require an individual to obtain and retain a license to practice in a member state. A home state's license authorizes an individual to practice in a remote state only if the home state: (1) currently requires the use of the National Registry of Emergency Medical Technicians (NREMT) examination as a condition of issuing initial licenses at the EMT and paramedic levels; (2) has a mechanism in place for receiving and investigating complaints about individuals; (3) notifies the commission, in compliance with the terms of the compact, of any adverse action or significant investigatory information regarding an individual; and (4) requires a criminal background check of all applicants for initial licensure within five years of activation of the compact.

To have the privilege to practice under the terms and provisions of this compact, a member must be at least 18 years old, possess a current unrestricted license in a member state, and practice under the supervision of a medical director.

This Bill also relates to an interstate compact known as the "**Nurse Licensure Compact**." This will facilitate the exchange of information between party states in the areas of nurse regulation, investigation and adverse actions, promote compliance with the laws governing the practice of nursing in each jurisdiction, invest all party states with the authority to hold a nurse accountable for meeting all state practice laws in the state in which the patient is located at the time care is rendered through the mutual recognition of party state licenses, and decrease redundancies in the consideration and issuance of nurse licenses; and Provide opportunities for interstate practice by nurses who meet uniform licensure requirements.

A state must implement procedures for considering the criminal history records of applicants for initial multistate license or licensure by endorsement. Such procedures shall include the submission of fingerprints or other biometric-based information by applicants for the purpose of obtaining an applicant's criminal history record information from the Federal Bureau of Investigation and the agency responsible for retaining that state's criminal records.

All compact states authorized to take adverse action against a nurse's multistate licensure privilege such as revocation, suspension, probation or any other action that affects a nurse's authorization to practice under a multistate licensure privilege. If a compact state takes such action, it shall promptly notify the administrator of the coordinated licensure information system. The administrator of the coordinated licensure information system shall promptly notify the home state of any such actions by other compact states.

A nurse may hold a multistate license, issued by the home state, in only one compact state at a time. If a nurse changes primary state of residence by moving they must apply for licensure in the new home state, the prior home state will be deactivated in accordance with applicable rules adopted by the Commission.

Each compact state shall enforce this Compact and take all actions necessary and appropriate to effectuate this Compact's purposes and intent. The Commission shall be entitled to receive service of process in any proceeding that may affect the powers, responsibilities or actions of the Commission, and shall have standing to intervene in such a proceeding for all purposes. Failure to provide service of process in such proceeding to the Commission shall render a judgment or order void as to the Commission, this Compact or promulgated rules.

SB 121 **"JEFFERY DALLAS GAY JR ACT/OPIOIDS**

<http://www.legis.ga.gov/legislation/en-US/Display/20172018/SB/121>

SB 121 is the 'Jeffery Dallas Gay Jr. Act' which allows for the opioid antagonist Naloxone, with a minimum strength, to be sold over the counter without a prescription. The state health officer is allowed to issue a standing order to prescribe opioid antagonists on a statewide basis and every pharmacist in the state is required to retain a copy of said order.

SB 125 **PAs/HYDROCODONE PRESCRIPTIVE RIGHTS**

<http://www.legis.ga.gov/legislation/en-US/Display/20172018/SB/125>

SB 125 allows a physician to delegate to a physician assistant the ability to issue a single non-refillable prescription for hydrocodone for a maximum 5-day supply consisting of not more than 30 tablets for adults (300 milligrams) and not more than 30 tablets (100 milligrams) for individuals under the age of 18. In addition, a physician assistant who has been delegated this authority is required to complete three hours of continuing education biennially in the appropriate ordering and use of Schedule 2 controlled substances. APRN language was removed.

SB 153 **OPTOMETRISTS – EXPAND SCOPE OF PRACTICE**

<http://www.legis.ga.gov/legislation/en-US/Display/20172018/SB/221>

Increases the scope of practice for optometrists by allowing for pharmaceutical agents to be administered through injections.

SB 193

**POSITIVE ALTERNATIVES FOR PREGNANCY & PARENTING
GRANT PROGRAM/EXPEDITED PARTNER THERAPY**

<http://www.legis.ga.gov/legislation/en-US/Display/20172018/SB/193>

Bill Summary: SB 193 relates to the Positive Alternatives for Pregnancy and Parenting Grant Program. The purpose of the program is to develop a state-wide effort that promotes healthy pregnancies and childbirth by awarding grants to non-profit organizations that provide pregnancy support services. Nothing shall prohibit any direct client service provider from promoting or expending non-grant funds for a political or religious purpose when a grant agreement has been established with the Department of Public Health.

Also, this bill relates to prescription drug orders and control of venereal disease to provide for an **expedited partner therapy** for patients with chlamydia or gonorrhea. "Expedited partner therapy" means the practice of prescribing or dispensing antibiotic drugs to the sexual partner or partners of a patient clinically diagnosed with chlamydia or gonorrhea without physical examination of the partner or partners.

SB 201

FAMILY LEAVE ACT

<http://www.legis.ga.gov/Legislation/en-US/display/20172018/SB/201>

Relating to general provisions relative to labor and industrial relations, so as to allow employees to use sick leave for the care of immediate family members; to provide for definitions; to provide for conditions to take leave

SR 188

**SENATE STUDY COMMITTEE - BARRIERS TO GEORGIANS'
ACCESS TO ADEQUATE HEALTHCARE**

<http://www.legis.ga.gov/legislation/en-US/Display/20172018/SR/188>

A RESOLUTION creating the Senate Study Committee on Barriers to Georgians' Access to Adequate Healthcare; and for other purposes.

SB 242

EXPANDING THE NURSE PROTOCOL AGREEMENT

<http://www.legis.ga.gov/Legislation/en-US/display/20172018/SB/242>

relating to delegation of certain medical acts to advanced practice registered nurses, so as to provide an exception to the number of advanced practice registered nurses with which a delegating physician can enter into a protocol agreement at any one time for nurses in certain locations under certain conditions - extending the protocol agreement to 8 with no more than 4 being supervised at any one time.

<http://www.legis.ga.gov/legislation/en-US/Display/20172018/SB/41>

SB 41 relates to pharmacies and pharmacists to provide for the licensure of durable medical equipment suppliers. "Durable medical equipment" is defined as equipment for which a prescription is required, including repair and replacement parts, and which can withstand repeated use; has an expected life of at least three years; is primarily and customarily used to serve a medical purpose; generally is not useful to a person in the absence of illness or injury; and is appropriate for use in the home.

Any person who supplies durable medical equipment to a consumer and submits a claim for reimbursement by a third party shall possess a durable medical equipment supplier license issued by the Georgia State Board of Pharmacy. Licenses shall be effective for 36 months from the date of issuance and shall not be transferable or assignable. The board reserves the right to initially and periodically inspect the applicant's or licensee's office or place of business within the state. A required fee will be established by the Georgia State Board of Pharmacy.

The board may issue a license to a Medicare-enrolled, out-of-state manufacturer or wholesale distributor that provides durable medical equipment directly to consumers if the manufacturer or wholesale distributor possesses a valid license from another state. Those manufacturers or wholesale distributors are exempt from the requirements.