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2020 Federal and State Legislative Outlook & Advocacy

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No financial conflicts of interest

Learning Objectives:

1. Describe the AOA's federal and state policy focus areas;
2. Examine how state and federal legislative proposals could impact the osteopathic medical profession; and
3. Illustrate how physician advocacy affects legislative outcomes.

2020 Federal and State Legislative Outlook

LEAD



2019 Federal Legislative Accomplishments

Issue	Advocacy/Partnership	Result
Increasing the federal minimum age to purchase tobacco.	AOA partnered with 14 specialty osteopathic associations: AAO, ACOEP, ACOFP, ACOI, ACONP, ACOOG, ACOP, ACOS, AOAAM, AOAQ, AOASM, AOCA, AOCD, and AOQR.	Signed into Law by the President in December, 2019.

2020 Federal Priorities

FEDERAL

- Strengthening Physician Workforce
- Access & Affordability
- Regulatory Reform
- Entitlement Reform
- Public Health
- FY 2021 Funding Priorities

2019/2020 Federal Ongoing Efforts

Issue	Advocacy/Partnership	Result
Teaching Health Center Graduate Medical Education (THCGME)	Partnered with 23 state osteopathic affiliates on letters to their Members of Congress.	Added 33 co-sponsors. Reauthorized through May 2020.
Surprise Medical Billing	Partnered with 29 state osteopathic affiliates on letters to their Senators.	Ongoing efforts to include “arbitration.”
Prior Authorization	Targeted partnership with 8 state osteopathic affiliates on letters to their House of Representative in W&M.	Added 5 co-sponsors.

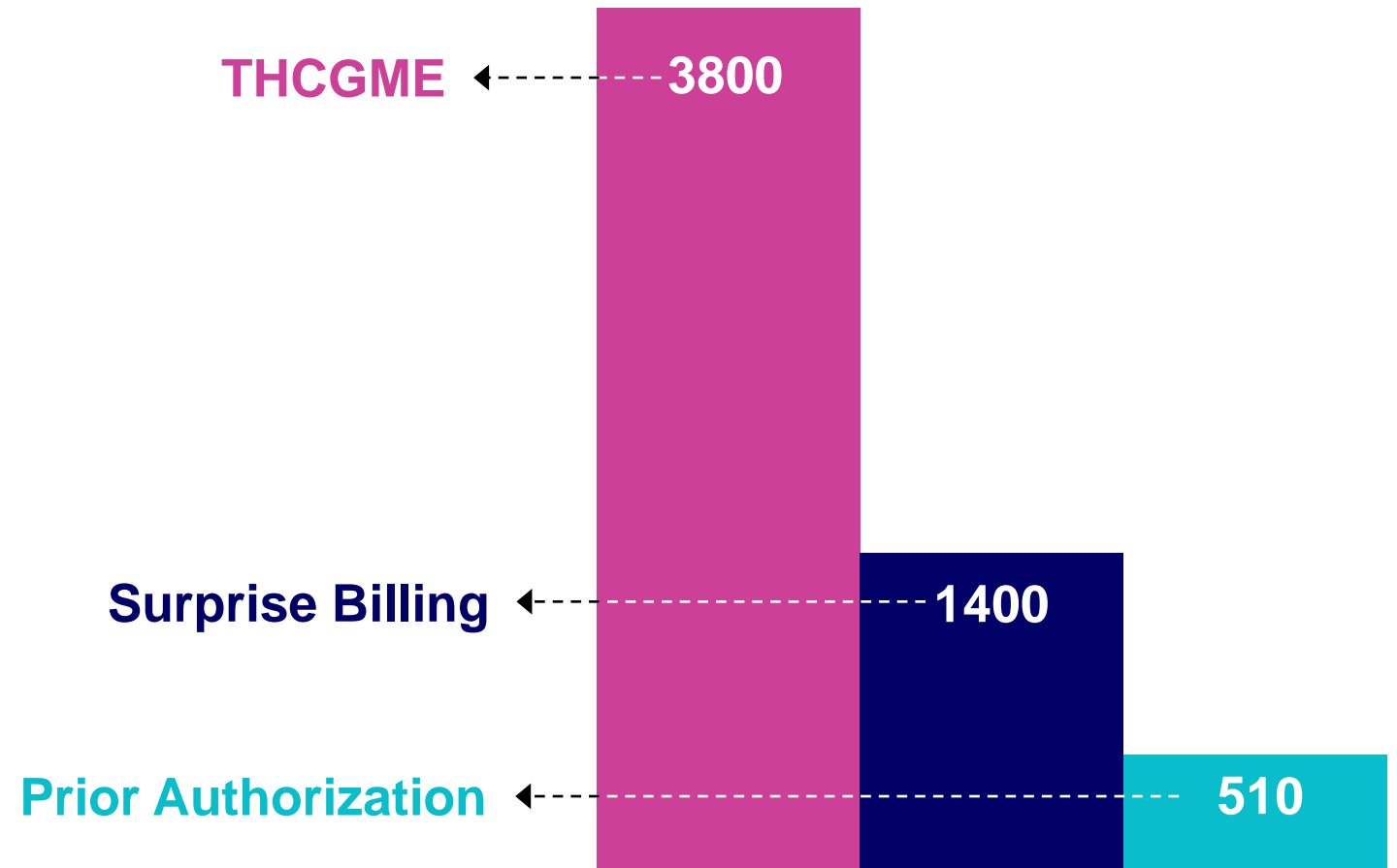
Federal Advocacy Analytics

- Launched the Osteopathic Advocacy Network
- Over 8,000 letters and social media posts sent to Capitol Hill in 2019
- 45 Advocacy Alerts sent to AOA Members
- Non-members included in certain emails and advocacy alerts to demonstrate member value
- Launched the first Specialty Fly-in

We also...

- Partnered with 10 state affiliates to launch grassroots efforts at the state level since 2019!

Top three federal advocacy alerts in 2019



2020 State Priorities

STATE


- Scope of Practice & New Licensure Types
- Osteopathic Equivalency and Recognition
- Truth in Advertising
- Physician Workforce
- Telemedicine
- Prescription Drug Misuse, Abuse & Diversion
- Access & Affordability
- Interstate Medical Licensure Compact
- Public Health

2019/2020 State Efforts

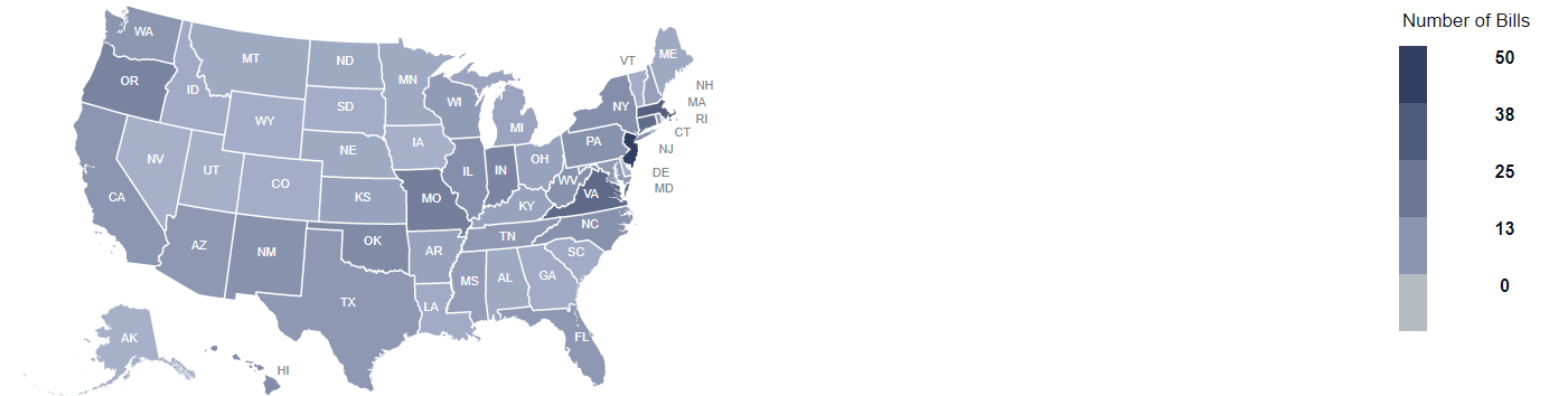


Issue	Advocacy/Partnership	Result
Scope Expansions: Optometrists & Psychologists	Arkansas & Hawaii Affiliates	Bill passed but ballot initiative underway (AR); bill defeated (HI) (both 2019)
Physician Assistant (PA) Independent Practice	Hawaii, Oklahoma & Maine Affiliates	2019 bill defeated (HI); 2020 bills under consideration (OK & ME)
New Licensure Types: Assistant Physician (AP) & Doctor of Medical Science (DMS)	Arizona, Tennessee & New Hampshire (APs); Tennessee (DMS)	All Tennessee & New Hampshire bills defeated (2019); Arizona bill amended to study AP issue (under consideration in 2020)
Osteopathic Medical Boards	Oklahoma & Maine Affiliates	5-year reauth in OK (2019); under consideration in ME (2020)

2020 State Grassroots Tracking


State Affiliate Bill Tracking

🔍
🗒 Hide Map
📄 Download Map
📄 Download



Bill	Status Text	AOA Position	State	Date Introduced	Source Link	Number of Cosponsors
1 A.B.575: Relating to: regulation of physician assistants, creating a Physician Assistant ...	Passed Original Chamber	Watching	WI	10/25/2019	External Link	8
2 S.B. 50: Revise Certain Provisions Regarding The Practice Of A Certified Registered Nurs...	Enacted	Oppose	SD	01/16/2020	External Link	24
3 S.B.2151: Nursing-Delegation	Introduced or Prefiled	Watching	IL	02/15/2019	External Link	0
4 H.B.4081: Requires supervising physician, or supervising physician organization, to enter ...	Out of Committee	Watching	OR	01/27/2020	External Link	10

Tennessee

Scope Expansion – HB 810, would create a new class of healthcare professionals known as Graduate Physicians

Arkansas

Scope Expansion – HB 1251, removes certain limitations for optometrists to perform surgery on eye

New Jersey

Surprise Billing– Federal legislation, attempts to address surprise billing, but leaves the physician without an appeals process

Indiana

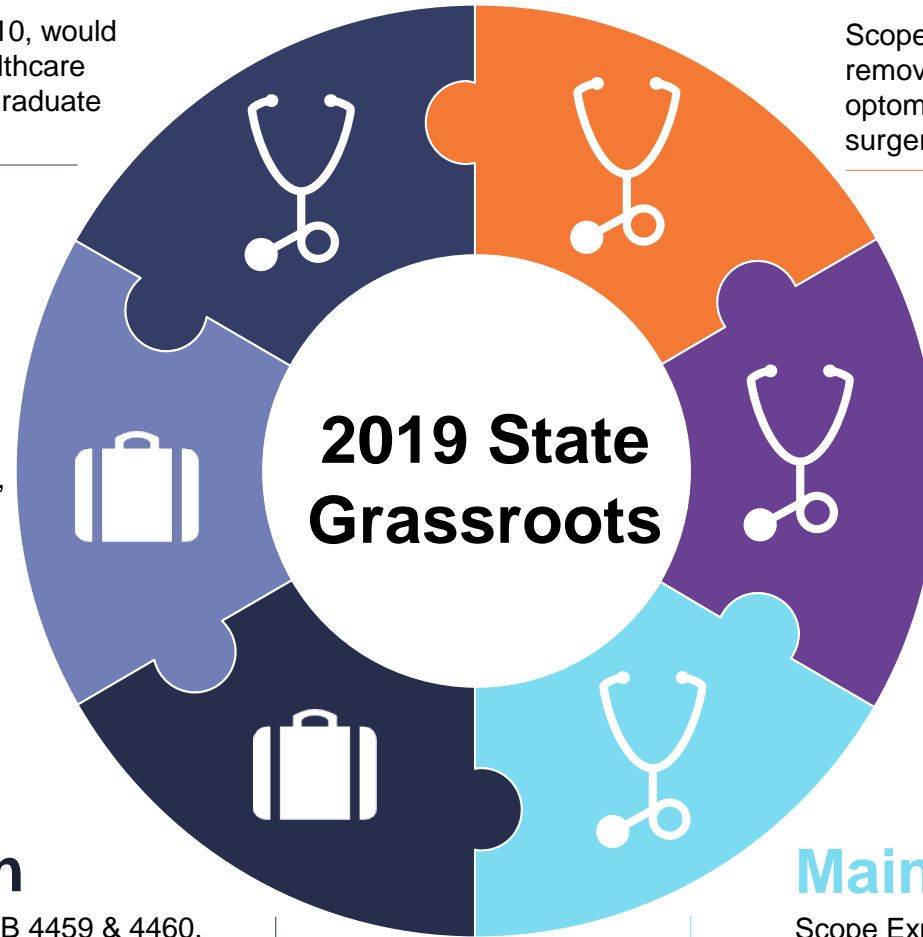
Scope Expansion – HB 1097, expands prescriptive authority for APRNs

Michigan

Surprise Billing– HB 4459 & 4460, attempts to address surprise billing, but leaves the physicians without an appeals process

Maine

Scope Expansion – LD 1660 & 1648, expands scope of practice for PAs



2019 State
Grassroots

Mississippi

Scope Expansion – HB 613, expand the scope of APRNs after 3,600 practice hours

Michigan

Prior Authorization – SB 612, streamlines the prior-authorization process



Arizona

Scope Expansion – HB 2419, establishes a new class of licensure, Assistant Physician (AP)

Florida

Scope Expansion – HB 607, grants independent practice for APRNs and PAs

2020 State Grassroots Alert (FL)



FLORIDA ADVOCACY: Florida's Legislature Considers Bill to Grant Independent Practice to PAs and APRNs. Tell your Representatives to Oppose HB 607

709 actions taken

91 needed to reach next goal

Florida's lawmakers are considering a bill (HB 607) that puts your patients in jeopardy. This bill would grant independent practice for Advanced Practice Registered Nurses (APRNs) and Physician Assistants (PAs) without requiring them to meet the same standards as osteopathic physicians, and allowing them to decide what treatments fall within their scope of practice without physician oversight.

The bill recently passed out of committee and is now being considered by the State House Health Care Appropriations Committee. We have a chance to make an impact and help protect patient safety.

Write your Florida representatives and tell them that patient safety is in jeopardy and urge them not to support HB 607. It's important that legislators also hear personal stories, so please add your own personal experience as a practicing osteopathic physician or medical student and how this change would affect you and your patients to the letter.

Act now!

FL Whip Ramon Alexander (D-FL-008)

Subject

Whip Alexander, Patient Safety is in Jeopardy, Please Oppose HB 607

Message

Dear Whip Alexander,

As an osteopathic physician, my team relies on me to make difficult healthcare decisions on a daily basis. Patient safety is my utmost priority, and that is being jeopardized by Florida House Bill 607 (HB 607). This legislation expands the scope of practice of Advanced Practice Registered Nurses (APRNs) and Physician Assistants (PAs) by granting them independent practice. I am concerned that allowing practitioners with much less training than me to have independent practice could place the health and safety of Florida's patients at risk.

I support a physician-led, team-based approach to medical care because this model ensures that professionals with adequate medical education and training are appropriately involved in patient care. APRNs and PAs provide valuable contributions to the health care team, but their education and training lacks the necessary qualifications to treat patients without physician oversight.

To further elaborate, osteopathic physicians education includes:

- Four years of medical school, which consists of two years of didactic study totaling upwards of 750 lecture/practice learning hours just within the first two years, plus two more years of clinical rotations done in community hospitals, major medical centers, and doctors' offices.
- 12,000 to 16,000 hours of supervised postgraduate medical education, i.e. residencies, where DOs develop



2020 State Grassroots Alert (AZ)



Arizona Osteopathic Medical Association

AMERICAN OSTEOPATHIC ASSOCIATION

TREATING OUR FAMILY AND YOURS

AZ GRASSROOTS: Write your State Legislator and Ask Them to Protect Arizona Patients Today!

85 actions taken

15 needed to reach next goal

We need your help. Legislators are considering a bill this week, HB 2419, that establishes a new class of licensure in Arizona, Assistant Physician (AP), that would create a two-tier health care system and put patient safety at risk. APs are medical school graduates who would be allowed to provide primary care services in rural or underserved areas with limited supervision by a fully licensed physician. While we can agree there is a primary care shortage in the state, especially in rural and underserved areas, this is not the way to address it.

This bill allows APs to prescribe schedule II-V drugs, including controlled substances, but omits other important details regarding APs' scope and instead allows them "to provide treatment...that is consistent with that [AP's] skill, training and competence..." On top of these concerns, it is also unclear that this new program will even address the issue of physician shortage in the state. In 2018, 98.48% of osteopathic medical students matched into a residency slot, which leaves a very small pool of potential APs. Further, despite the fact that more than 2,400 AOA accredited primary care residency slots have gone unfilled over the last five years, the bill does not set a time limit on AP licensure renewals, which would actually help encourage these individuals to continue to pursue residency training leading to full physician licensure and help solve the state's physician shortage issues.

Allowing these graduates to practice without completing the full physician training and licensure exam series evincing their ability to safely deliver patient care is a step in the wrong direction for Arizona, and could jeopardize the health and safety of the public. Write your legislator today and ask them to oppose this bill!

Act now!

Select Recipients

2 Recipients

MS Sen. Brice Wiggins (R-MS-052)

MS Rep. Charles Busby (R-MS-111)

Submit Selected Letters

Or edit letters before submitting

MS Sen. Brice Wiggins (R-MS-052)

Subject

Sen. Wiggins, please oppose HB 2419 to protect patient safety in our state!

Message

Sen. Wiggins,

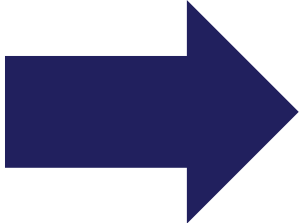
I'm writing to you as an osteopathic physician (DO) and constituent to ask you to oppose HB 2419. When patients come to see me, they trust that I have the training and skills to treat them while protecting their health and safety. My patients know that their safety is my utmost priority and that I will make the right healthcare decisions for them because of the rigorous medical school and residency training that I completed. HB 2419 jeopardizes patient safety by creating a new class of physician, "Assistant Physician (AP)", who are allowed to provide primary care services to patients in rural and underserved areas without having undergone the supervised residency training that all other physicians (MDs and DOs) like myself complete. Confusingly for patients, APs are medical school graduates (i.e. physicians), but unlike fully licensed physicians they have not completed standardized training or passed a full licensing exam series designed to test their competency to independently deliver medical care. I worry that allowing them to practice in underserved areas could put the safety of some of Arizona's most vulnerable patients at risk.

As a DO, I share the legislature's concern about the physician workforce shortage in our state - especially the lack of access to primary care. However, I'm concerned this legislation will not effectively address this issue while lowering the standard of care in rural and underserved areas. Specifically, I have the following concerns:

Advocating for the Profession Back Home



Osteopathic Advocacy Network



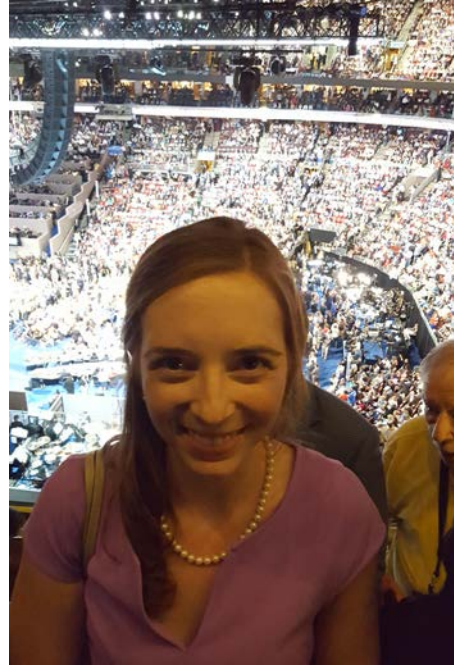
Get involved at

www.osteopathic.org/grassroots

Advocating for the Profession



Sen. Patrick Toomey
(R-PA)



Democratic
National
Convention



House Minority Whip
Rep. Steve Scalise
(R-LA-1)



Rep. Dwight Evans
(D-PA-3)

2020 Congressional Calendar

■ Both chambers in session ■ Senate only in session ■ House only in session

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President's Day Recess

- February 17–21
- Encourage advocates to build a relationship with district staff
- Meeting to be held in district office

Easter/Passover Recess

- April 6–17
- DO Day Follow-up
- Encourage representative to visit advocate's place of work, known as a "site-visit"
- Continue to build relationship and trust with the staff

Memorial Day Recess

- May 25–29
- May 22 - funding Deadline for THCGME and other programs
- Potential legislative asks on surprise billing

August Recess

- August 10–28
- Encourage all OAN members to attend town halls

2020 DO Day on Capitol Hill Agenda

DO Day on Capitol Hill will take place Monday,
March 30 and Tuesday, March 31, 2020

SUNDAY

8 AM: SOMA Convention

3 PM: BEL Update

4 PM: AOA/OPAC Update

MONDAY

2 PM: Check-in & Reg.

3 PM: Issue Briefings

4 PM: Advocacy Training

7 PM: SOMA Reception

TUESDAY

7 AM: Welcome Intro

7:30 AM: Keynote

8 AM: Issue Recap

9 AM: March to Hill



Potential 2020 DO Day Topics

Surprise Billing

- A fair process for independent dispute resolutions with the ability to bundle claims
- Stronger network adequacy requirements for insurers.
- Incorporate actual billed charges



Osteopathic Medicine

Education of Osteopathic Medicine

THCGME

Reauthorize the THCGME Program

Discussion & Questions

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Thank You!

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