As the 2016 Legislative session roared past its midway point this week, several health care priorities pushed ever closer to their respective finish lines, while others languished and saw their chances of becoming law dwindle.

For ACP, the highlight of the week was the Senate Banking and Insurance Committee’s passage of SB 132, the Direct Primary Care Bill. Opposition was, for the first time, intense, but the bill moved on to the Fiscal Policy Committee.

Although the House continues to dawdle on bills that would restrict formulary changes for stabilized patients, both SB 1084 and SB 1142 both have advanced to the Appropriations Committee, having passed all of their “substantive” committees. Meanwhile, consensus was achieved on the controversial ER Balance Billing, with a House compromise allowing non-contracted physicians to charge the insurance company the usual and customary amount for such services while holding the patient harmless.

On the scope of practice front, bills to allow PA and ARNP prescribing of controlled substances (but not independent practice) advanced to the Senate Appropriations Committee.

The Legislature now takes four days off for the President’s Day recess, after which much of next week will be devoted to budget consideration, with hope being to have budget conferences next weekend. That would be a good omen for an on-time departure in 2016.