ADVOCACY

TMA Day on the Hill – March 7, 2017

Dr. Tracey Doering, your new governor, along with Dr. Richard Lane, your immediate past governor and several other TNACP members joined with their respective county medical societies to visit with their legislators at TMA’s Day on the Hill.

Dr. Doering is 5th from the left and Dr. Lane is hidden immediately to her right. Dr. Kevin Smith, TNACP membership chair is the first gentleman on the left.

Several issues of concern to practicing internists were discussed in small groups with individual legislators including Speaker of the House, Representative Beth Harwell.

HB1106/SB0856 – The Health Care Provider Stability Act – “Insurance, Health, Accident - As introduced, revises various provisions regarding when a health insurance entity can make, and when a health insurance entity is required to notify a provider of, changes in the provider’s fee schedule”. This bill was worked on in committee last year and is important as it provides predictability to physicians regarding fee schedules with payers. - SUPPORT

HB0413/SB0298 – Prohibition of Mandatory Maintenance of Certification – “Physicians and Surgeons - As introduced, prohibits certain adverse actions against a physician on the basis of the physician’s failure to maintain specialty board certification or maintenance of licensure under a framework established by the Federation of State Medical Boards.” The Senate bill was introduced by Sen. Dr. Richard Briggs, past TMA Chair Board of Trustees and current TMA member, and basically supports the position that MOC
should be voluntary. The bill would prohibit health insurance plan participation or payment, hospital privileges, or state medical licensure based solely on MOC status. – SUPPORT

HB1150/SB744 – Patients for Fair Compensation -Healthcare Liability – “As introduced, enacts the "Insurance Costs Reduction Act." – This bill has been promoted by a group out of Atlanta “Patients for Fair Compensation.” It is intended to replace our current civil medical liability system with an administrative patient compensation system for physicians only. You may receive mailings from this group promoting this legislation. TMA and TNACP have several concerns with this including, it is untested, will increase the number of liability claims filed, changes the threshold from provable medical negligence to avoidable medical injury, adds mandatory fiscal contributions by physicians on top of current malpractice insurance premiums, potentially could result in a large increase in reports to the National Data Bank, does not provide a right to appeal an administrative law judge’s decision, and will likely make Tennessee a less favorable state to which to recruit new physicians. – OPPOSE

Look for discussions on medical marijuana and accompanying legislative proposals. ACP updated its position statement on marijuana this past year. To access this, go to ACP’s website for Current Policy Papers

https://www.acponline.org/advocacy/current-public-policy-papers

then scroll down to Prescription Drugs and Public Health Related Topics. Under that is a paper entitled: Supporting Research into the Therapeutic Role of Marijuana: An ACP Policy paper (February 2008).

Another hot issue is scope of practice. The Tennessee Nursing Association has held fast to its desire for independent practice and TMA did not file its patient centered physician led team based care bill in deference to a summer study task force. TMA’s position echoes ACP’s position paper published in the Annals of Internal Medicine of November 5, 2013 on “Principles Supporting Dynamic Clinical Care Teams.”


Sen. Briggs discussed a different proposal to address the primary care shortage in Tennessee. This would-be legislation to create a new licensee called Doctor of Medical Science (DMS), which would be regulated under the Board of Medical Examiners. This is a project at Lincoln Memorial University – DeBusk College of Osteopathic Medicine that would allow a physician assistant with three years’ clinical experience to take a two-year course with examination to then enter into a collaborative practice agreement with a hospital or medical group practice and be limited to practicing primary care. TMA government affairs is reviewing this proposal. – UNDECIDED.

The above information comes from the visit to the legislature, preparatory handouts from TMA, and the Tennessee Legislative web site: http://www.legislature.state.tn.us/. The photo was extracted from the March Nashville Academy of Medicine newsletter.

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