Office of Government and Community Affairs

2018 State Legislative Session Report
Emory’s Office of Government and Community Affairs (OGCA) team is comprised of seven members: two members that handle federal affairs, two focused on state affairs, two members that work on community affairs, and an Executive Administrative Assistant. The 2018 State Legislative Session Report is brought to you by the State Affairs team of Emory’s Office of Government and Community Affairs.

The OGCA State Affairs team serves as the official liaison between Emory and Georgia’s legislative, executive and regulatory bodies, including the Governor’s Office, the Georgia General Assembly and state agencies that administer higher education and healthcare programs. It is our responsibility to continually monitor each of these entities for any legislative or regulatory changes that could impact Emory. We strive to create new, and build upon existing, relationships with state officials and to find ways for Emory to strengthen its partnership with the state. Please do not hesitate to reach out to any of us with questions.

Cameron Taylor  
Vice President  
cameron.taylor@emory.edu

Jessica Davis  
Director of Federal Affairs  
jessica.ann.davis@emory.edu

Kallarin Mackey  
Director of State Affairs  
kallarin.r.mackey@emory.edu

Abby Meadors  
Executive Administrative Assistant  
abymeadors@emory.edu

Kendra Price  
Government Affairs Manager  
kendra.price@emory.edu

Hillary Thrower  
Assistant Director  
hillary.thrower@emory.edu

Betty Willis  
Senior Associate Vice President  
betty.willis@emory.edu
Budgets: Amended FY 2018 and FY 2019

Each year, the General Assembly passes and the Governor signs two separate budgets, with the primary one being the budget for the upcoming fiscal year (July 1-June 30). The other is the “amended” fiscal year budget, which makes adjustments to the current fiscal year to account for unanticipated needs that arise. The budget includes the following provisions of interest to Emory:

AFY 2018

The Amended budget totaled $25.4 billion in state funds and $45.9 billion including matching federal funds. Governor Nathan Deal signed the AFY 2018 budget on March 9, 2018.

- $23 million to fully fund both deemed and non-deemed private hospitals eligible for the Disproportionate Share Hospital (DSH) program.
- An increase in $19.9 million for Medicaid enrollment, medical services utilization and medical trend.
- $1.22 million in grant funds to offset cost due to the higher number of flu cases and services provided within hospitals.
- Increased funds for programs legislatively authorized in the 2017 session:
  - Prescription Drug Monitoring Program (HB 249) - $583,000
  - Office of Cardiac Care (SB 102) - $194,000
- $2.8 million in one-time funds for additional Behavioral Health Crisis Center beds.

FY 2019

The Fiscal Year 2019 budget totaled $26.2 billion in state funds and $51 billion including matching federal funds. Governor Deal signed the FY 2019 budget on May 2, 2018. The budget includes the following provisions of interest to Emory:

- An increase of $600,000 to provide grants to rural hospitals for Electronic Intensive Care Units (eICU) to improve patient outcomes and reduce the need for long distance travel away from local communities to obtain this level of care. This will allow the Emory eICU program to expand in rural Georgia.
- An increase of $61,320 to fund four Emory OB/GYN residency slots at $15,330 per slot.
- An increase of $43,500 to fund three existing Emory psychiatry residency slots at $14,500 per slot.
- An increase in capitation rates to $14,500 for 10 existing Community and Preventive Medicine residency slots at Emory University School of Medicine and Morehouse School of Medicine.
- An increase in non-emergent services to Medicaid patients in the emergency room. Currently, Medicaid pays a $50 "triage" fee. In FY 2019, the fee will increase to $60 for urban hospitals and $70 for rural hospitals.
- An increase of $100,000 in funding for the Emory Autism Center’s project with the Georgia Department of Public Health.
UPCOMING 2018 STUDY COMMITTEES

Study committees are appointed or selected to perform a specific task or study a certain issue. After the committee examines the topic, a report is released which includes any findings, recommendations, or legislative proposals the committee deems appropriate. The following legislative study committees are expected to meet this summer and fall. The Emory OGCA team looks forward to participating in these committees to provide information that could help further Emory’s mission.

HOUSE STUDY COMMITTEES

House Study Committee on Incorporating Law Enforcement in the Pathway to Treatment for Persons Having Challenges with Drug Use and Mental Health (HR 913)
- The committee will study ways to strategically widen community behavioral health and social service as an enhanced pathway to treatment and social services in behavioral health interventions.

House Study Committee on Risks Associated with Kratom (HR 1160)
- The committee will study the conditions, needs, issues, and problems related to the use of the drug, Kratom.

House Study Committee on Retrospective Emergency Room Policies (HR 1194)
- The committee will study the conditions, needs, issues, and problems related to emergency rooms.

House Study Committee on the Workforce Shortage and Crisis in Home and Community Based Settings (HR 1257)
- The committee will study the workforce shortage in Georgia and determine ways that staffing issues can be addressed.

House Study Committee on Professional Licensing Boards (HR 1374)
- The committee will study ways to optimize the effectiveness and efficiency of each professional licensing board in this state.

House Study Committee on Industrial Hemp Production (HR 1473)
- The committee will investigate the feasibility of developing industrial hemp in Georgia and determine the potential economic benefits that industrial hemp production may have for rural areas of the state.
Senate Study Committee on Service Animals for Physically or Mentally Impaired Persons (SR 467)
- The committee will study whether there is a need for a uniform certification process or the issuance of information cards, whether there is a need to criminalize the use of a “fake service animal,” and whether the rights of trainers of service animals should be clarified, etc.

Senate Study Committee on Prescribing Patterns for Antidepressants and Other Psychotropic Medications (SR 489)
- The committee will study the statistics of prescribing patterns for these types of medications and recommend any action or legislation which the committee deems necessary or appropriate.

Senate Study Committee on Dyslexia (SR 761)
- The committee will study the educational impact of dyslexia on the education and lives of children, adults, and students in Georgia.

Senate Study Committee on Risks Associated with Kratom (SR 832)
- The committee will study the conditions, needs, issues, and problems related to the use of the drug, Kratom.

Senate Study Committee on Certificate of Need Reform (SR 1063)
- The committee will study the conditions, needs, issues, and problems regarding the Certificate of Need program and recommend any action or legislation which the committee deems necessary or appropriate.

Senate Study Committee on the Financial Impact of Atlanta Annexation on Schools (SR 1067)
- The committee will study the conditions, needs, issues, and problems relating to the City of Atlanta’s recent annexation of property into its corporate limits that includes Emory University and some surrounding areas.

Joint Study Committees

Joint Study Committee on Low THC Medical Oil Access (HB 65)
- The committee will study in-state cultivation and access of medical marijuana.
The General Assembly introduces over 2,000 bills annually, and the OGCA state team tracks every bill that has the potential to impact Emory. While a small percentage of bills actually reach the finish line with a signature from the Governor, a bill’s mere introduction is informative and the OGCA state team pays attention to all legislative priorities. The following bills passed this year and are relevant to Emory because they have the ability to impact specific areas of our mission.

**House Bill 65 – Medical Marijuana** (Rep. Allen Peake) adds Post Traumatic Stress Disorder and intractable pain to the list of conditions eligible for treatment by cannabis oil and also creates a Joint Study Commission on Low THC Medical Oil.
*Effective July 1, 2018*

**House Bill 513 – Newborn Signs** (Rep. Pam Dickerson) requires the Georgia Department of Human Services to develop standards for a sign that shall be posted at any medical facility, fire station, or police station to inform the general public that the facility is an authorized safe place to leave a newborn child.
*Effective July 1, 2018*

**House Bill 635 – Elder Abuse** (Rep. Sharon Cooper) requires the district attorney in each judicial circuit to establish an Adult Abuse, Neglect, and Exploitation Multi-Disciplinary Team in order to coordinate the investigation of suspected abuse, neglect, or exploitation of a disabled adult or elder person. Additionally, the bill outlines the persons or agencies who shall have reasonable access to records concerning reports of elder, disabled adult, or resident abuse.
*Effective July 1, 2018*

**House Bill 673 – Hands-Free Georgia Act** (Rep. John Carson) prohibits an individual from physically holding or supporting a wireless telecommunication device or a stand-alone electronic device or reaching for devices in such a way that the driver is no longer seated in a driving position while operating a motor vehicle. The prohibition does not apply to:
- Voice to text communications
- The use of devices for the purpose of navigation with a GPS system
- Dash camera video recording devices that record the front and rear of the vehicle

Violating this provision is punished as a misdemeanor with a fine of $50 for the first offense, $100 for the second, and $150 for all subsequent offenses. Moreover, a 1-point deduction on the offender’s driver’s license is assessed on the first violation of this statute. A second offense results in a 2-point assessment, a third or subsequent violation results in a 3-point assessment. The prohibited conduct shall not apply while reporting a traffic accident, an emergency situation, or a hazardous road condition. In addition, on the first offense of distracted driving, an offender can present a hands-free device to the court and be waived of fines and point deductions.
*Effective July 1, 2018*

**House Bill 683 – Amended Fiscal Year 2018 Budget** (Speaker David Ralston)
For additional details, please see page 3.
*Effective March 9, 2018*
House Bill 684 – Fiscal Year 2019 Budget (Speaker David Ralston)
For additional details, please see page 3.
*Effective July 1, 2018*

House Bill 697 – Sales and Use Tax (Rep. Darlene Taylor) extends the exemption on sales and use tax to non-profit health centers and non-profit volunteer health centers to June 30, 2019.
*Effective July 1, 2018*

House Bill 701 – Drug Testing (Rep. Kevin Tanner) amends definitions for drug testing for state employment to allow testing for all forms of opioids. It shall not be defined as an “illegal drug” pursuant to a valid prescription or when used as otherwise authorized by state or federal law.
*Effective July 1, 2018*

House Bill 751 – Georgia Emergency Communications Authority Act (Rep. Alan Powell) establishes the Georgia Emergency Communications Authority with the primary purpose to administer, collect, audit, and remit 9-1-1 revenues for the benefit of local governments.
*Effective January 1, 2019*

House Bill 769 – Micro-hospitals (Rep. Rick Jasperse) stems from recommendations from the House Rural Development Council. This bill provides for the establishment of the Rural Health System Innovation Center and the creation of micro-hospitals. It also provides for a grant program for insurance premium assistance for physicians practicing in medically underserved rural areas of the state, and increases the value of the tax credit to 100 percent related to contributions to rural hospital organizations. The following is a brief overview of each section of the bill:

- Sections 1 and 2 of the bill allow remote pharmacy drug orders for hospital patients by a pharmacist licensed in this state, who is located within the United States, from a remote location indicating that the specific drug order has been reviewed by a pharmacist.
- Section 3 directs the Georgia Department of Community Health to take steps to streamline and expedite the credentialing and billing process for state medical plans and examine the potential for a uniform billing platform. The department will also review standardization of billing codes among providers, post billing criteria on the department’s website, and enable concurrent processes for credentialing and contract negotiation for new providers. Billing for telehealth-delivered care, which allows for payments to both the on-site presenter and off-site provider, will be examined. The Georgia Department of Community Health will also review maximized billing for a patient who sees multiple specialists through multiple encounters during a single visit in a safety net setting. A Rural Center for Health Care Innovation and Sustainability will be established through the existing Office of Rural Health to provide leadership training and health data analysis for rural hospitals. This postsecondary institution partner will have a health program or college that focuses on rural and underserved areas of the state.
- Sections 4 and 5 define “micro-hospital” to mean a hospital in a rural county which has at least two and not more than seven inpatient beds and provides emergency services seven days a week and 24 hours per day. The legislation allows for the creation of micro-hospitals without requiring a new Certificate of Need (CON) when a hospital is closing or recently closed and is purchased by a hospital in a contiguous county. The relocation of any micro-
hospital can occur within the same county, as long as the facility does not propose to offer any new or expanded clinical health services at the new location.

- Section 6 creates a grant program within the Georgia Board of Physician Workforce to provide financial assistance for liability premiums for some rural physicians as an offset for establishing and/or operating a practice in an unserved or underserved area of the state.
- Section 7 revises the tax credits for rural hospitals to allow ‘S’ corporation shareholders, limited liability company members, and married couples filing a joint return to contribute $10,000 per taxable year, and single or head of household filers to contribute $5,000 per taxable year. The credit’s sunset is extended through December 2021.  

**Effective July 1, 2018**

**House Bill 803 – Elder Trafficking** (Rep. Wendell Willard) creates the offense of trafficking a disabled adult or elder person when a person uses deception, coercion, exploitation, or isolation and knowingly recruits, harbors, or transports a victim for the purpose of appropriating the resources of that victim for one’s own or another person’s benefit. The crime of trafficking a disabled adult or elder person is punished as a felony with a term of imprisonment for not less than one nor more than 20 years and a fine not to exceed $100,000. Each violation constitutes a separate offense. Physicians or any person acting under the direction of a physician, who is acting in good faith within the scope of their practice, shall not be punished under this bill.  

**Effective July 1, 2018**

**House Bill 818 – Reimbursement** (Rep. Lee Hawkins) allows healthcare providers to choose the method of reimbursement from insurers.  

**Effective January 1, 2019**

**House Bill 830 – Controlled Substances** (Rep. Buddy Harden) is the annual controlled substance update regarding Schedule I, II, IV, and V drugs to include new synthetic opiates and synthetic marijuana.  

**Effective May 3, 2018**

**House Bill 844 – Hearing Impaired** (Rep. Penny Houston) renames the “Georgia Commission on Hearing Impaired and Deaf Persons” to the “Georgia Commission for Deaf or Hard of Hearing.” This legislation expands the commission from seven to 10 members and also creates a multi-agency task force within the commission to make recommendations to the General Assembly and the governor for improvements to the state-wide system of developmental and educational services for children from birth to third grade who are deaf or hard of hearing.  

**Effective May 8, 2018**

**House Bill 909 – Perinatal Facilities** (Rep. Deborah Silcox) requires the Georgia Department of Public Health to establish a procedure and criteria for a perinatal facility to request approval as a designated facility which has achieved a particular maternal or neonatal level of care. In establishing or revising the criteria for maternal and neonatal levels of care, the department shall conduct public comment hearings, solicit the views of hospitals, birthing centers, health care providers, and related professional associations. On or before December 31, 2019, the department shall post and annually update a list of designated facilities on its website.  

**Effective July 1, 2018**
House Bill 918 – Tax Code Update (Rep. Chuck Efstration) provides for the annual Internal Revenue Code (IRC) update for the 2017 and 2018 tax years. For an exhaustive list of all the changes, please see the text of the bill here.

Effective July 1, 2018 (Part I)
Effective March 2, 2018 (Part II)

House Bill 930 – Transportation (Rep. Kevin Tanner) creates the Atlanta-region Transit Link “ATL” Authority. This authority is attached to the Georgia Regional Transportation Authority (GRTA) for administrative purposes and will serve as the transit planning organization for the 13-county metro Atlanta region. The region is comprised of the counties currently under the jurisdiction of GRTA: Cherokee, Clayton, Coweta, Cobb, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding, and Rockdale Counties and will allow these counties to impose sales taxes of up to 1 percent for mass transit. The bill also establishes the governance structure of the ATL, as well as funding mechanisms and further allows Gwinnett County to hold a vote on joining MARTA this year. The ATL oversees all transit planning, funding, and operations within the region.

Effective May 3, 2018, except:
Effective January 1, 2019 (Part I)
Effective July 1, 2021 (Section 4-4 of Part IV)

House Resolution 1292 – GARD Council (Rep. Sharon Cooper) urges the Georgia Alzheimer’s and Related Dementia Advisory Council to study providing access to quality long-term care for individuals with Alzheimer’s disease or related dementia.

House Resolution 1363 – Controlled Substances (Rep. Sharon Cooper) urges the United States Congress to amend the ‘Controlled Substances Act of 1970’ to reclassify marijuana as a Schedule II drug so that its medical benefits and effects may be researched. It further urges Congress to enact the ‘Marijuana Effective Drug Study Act’ (MEDS Act) if it is unwilling to reclassify marijuana.

House Resolution 1376 – Hospital Financials (Rep. Matt Hatchett) urges the House Rural Development Council to solicit input from the hospitals in this state on their financial condition including profitability, community benefit, cash reserves and viability projections as well as to receive recommendations from the hospital industry on legislative or regulatory changes that could ensure viability of the health care industry.
SENATE LEGISLATION THAT PASSED

**Senate Bill 118 – Autism** (Sen. Renee Unterman) increases the age of coverage for the treatment of Autism Spectrum disorders from six-years to 20-years old and the limit on coverage from $30,000 per year to $35,000 per year.  
*Effective January 1, 2019*

**Senate Bill 321 – Medicaid Fraud** (Sen. Blake Tillery) increases the civil penalty for Medicaid fraud from between $5,500 and $11,000 to between $11,181 and $22,363 for each false or fraudulent claim. The Medicaid program penalty of three times the amount of damages is retained.  
*Effective May 3, 2018*

**Senate Bill 339 – Free Speech Policies** (Sen. William Ligon) requires the Board of Regents of the University System of Georgia to develop a free speech policy to be implemented at all state institutions within the system. This bill enumerates seven principles the board shall address when adopting regulations and policies regarding free speech, including:

- Protect freedom of speech and press for all persons.
- Foster learning through the sharing of different ideological positions.
- Require each institution to publish content-neutral time, place, and manner restrictions on expressive activities for the use of facilities and resources using the least restrictive means necessary for that use in order to foster learning through the sharing of different ideological positions.
- Assure that the institution does not shield students and teachers from speech protected by the First Amendment.
- Assure that students and faculty can assemble and engage in expressive activity that is lawful, does not interfere with classroom instruction, and is permitted by university policies.
- Assure that the institution is open to speakers invited by students and faculty, so long as the speaker complies with university policies.
- Protect students and their guests who peacefully protest, so long as they do not interfere with classroom instruction, violate university policy, or interfere with previously scheduled events.

The bill also mandates that the board establish a range of disciplinary sanctions for anyone under the jurisdiction of any state institution who has violated the board’s policies on free speech. It also provides that the board must submit a yearly report to the governor and General Assembly which includes information regarding barriers or disruptions of free expression, administrative handling of discipline, substantial difficulties in maintaining administrative and institutional neutrality, and any criticisms or recommendations the board would like to include. This does not apply to private institutions.  
*Effective July 1, 2018*

**Senate Bill 364 – Physician Assistants** (Sen. Chuck Hufstetler) authorizes a higher supervisory ratio (1:8) for physician assistants who have completed a board-approved anesthesiologist assistant program.  
*Effective July 1, 2018*
Senate Bill 370 – Medical Assistance (Sen. John Wilkinson) requires the Georgia Department of Community Health to submit a state plan amendment to waive the first $25,000 value of any estate to the Centers for Medicare and Medicaid Services (CMS). In the event that such amendment to the state plan is not approved, this change shall stand repealed in its entirety.  
*Effective July 1, 2018*

Senate Bill 382 – Optometrists (Sen. P.K. Martin) requires the Georgia Department of Public Health (DPH) to provide guidance on certain training programs for doctors of optometry who administer pharmaceutical agents by injection. The legislation adds that any injectable training program approved by the State Board of Optometry, prior to its approval by the board, is subject to the guidance DPH to ensure that the necessary, appropriate curriculum is in place.  
*Effective July 1, 2018*

Senate Bill 402 – Broadband (Sen. Steve Gooch) the “Achieving Connectivity Everywhere Act” directs the state’s Department of Community Affairs to map out what parts of the state are “unserved” and lack internet access. Lawmakers define “unserved” as 20 percent or more of locations in a census block not having internet access. The bill allows the Georgia Department of Transportation to give up its rights of way for private investors to install fiber-optic cables along interstates and set up small 5G cellphone poles along state roads. The bill also states local governments could lose certification if it charges companies an “unreasonable amount” of more than $100 to apply for permits for broadband network projects. It also looks to make the process uniform in terms of rates local governments charge broadband providers to install utility poles.  
*Effective May 7, 2018*

Senate Bill 406 – Background Checks (Sen. Brian Strickland) creates the Georgia Long-term Care Background Check Program, which requires comprehensive criminal background checks for owners, applicants for employment, and employees providing care or owning a personal care home, assisted living community, private home care provider, home health agency, hospice care, nursing home, skilled nursing facility, or an adult day care. This requirement would begin for new applicants on October 1, 2019, but existing employees and owners have until January 1, 2021 to submit a records check application to the Georgia Department of Community Health (DCH). DCH is authorized to conduct national fingerprint based criminal background checks and provide an appeals process. Additionally, DCH is to establish and maintain a caregiver registry so that employers who are family members or guardians of elderly persons can obtain an employment eligibility determination from DCH for personal care applicants and employees.  
*Effective October 1, 2019*

Senate Bill 407 – Criminal Justice & PDMP (Sen. Brian Strickland) includes criminal justice reform and also gives Technical College System of Georgia (TCSG) campus policemen the power to make arrests for offenses committed on TCSG property and for offenses committed upon any public or private property within 500 feet of such property. This portion of the bill does not impact private colleges or universities. The bill also includes language that authorizes the Georgia Department of Public Health to share information from the Prescription Drug Monitoring Program (PDMP) with equivalent programs in other states, streamlines the registration requirements for
physician delegates, and allows for the PDMP to interface with health care providers’ electronic health records.

*Effective July 1, 2018*

**Senate Bill 422 – Pharmacists** (Sen. Renee Unterman) relates to clinical laboratories and provides changes to provisions exempting pharmacists from blood tests and interpreting the results. Pharmacists performing such tests shall make reasonable efforts to report the results obtained from the test to the patient’s physician of choice.

*Effective July 1, 2018*

**Senate Bill 444 – Alzheimer’s and Related Dementia** (Sen. Renee Unterman) named the ‘Senator Thorborn ‘Ross’ Tolleson, Jr., Act’ creates the Georgia Alzheimer’s and Related Dementias State Plan Advisory Council to ensure that focus remains on implementing and amending the goals set forth in the Georgia Alzheimer’s and Related Dementias State Plan as needed. The advisory council will submit a report to the governor and the General Assembly every three years on the work of the advisory council.

*Effective July 1, 2018*

**Senate Resolution 593 - Adult Changing Stations** (Sen. Valencia Seay) urges the United States Congress to establish a policy whereby public facilities shall be required to consider adult changing stations.

**Senate Resolution 865 – Respiratory Health** (Sen. Fran Millar) supports the creation of the State of Georgia Council on Respiratory Health Promotion under the Georgia Department of Public Health.

**Senate Resolution 1058 – Military Healthcare** (Sen. Tonya Anderson) urges the United States Congress to halt the transfer of current and former military personnel's health care costs from the federal government to the states.
LEGISLATION THAT DID NOT PASS

House Bill 81 – Income Tax Credit (Rep. Tom McCall) would have allowed hospitals owned and operated by a hospital authority to receive income tax refund setoffs for the collection of medical debts.

House Bill 149 – Trauma Scene Cleanup (Rep. Alan Powell) would have provided regulation for trauma cleanup services under the Georgia Bureau of Investigation.

House Bill 161 – Needle Exchange (Rep. Betty Price) would have allowed agents of harm reduction organizations the ability to sell, lend, rent, lease, give, exchange, and distribute hypodermic syringes or needles.

House Bill 301 – Preceptor Tax Credit (Rep. Jodi Lott) would have increased the preceptor tax credit for physicians to $500 for the first three preceptorship rotations and $1,000 for any further rotations up to ten. It also increases APRNs’ preceptor tax credit to $375 for the first three preceptorship rotations and $750 for any further rotations up to ten.

House Bill 519 - Step Therapy (Rep. Sharon Cooper) would have required health benefit plans to utilize certain clinical review criteria to establish step therapy protocols for prescription drugs and also creates exceptions to override step therapy protocols where a drug is contra-indicative or ineffective.

House Bill 542 - Social Hosting (Rep. Emory Dunahoo) would have expanded criminal responsibility and civil liability for providing or allowing individuals under 21 years of age to consume alcoholic beverages.

House Bill 636 – Genetic Counselors (Rep. Deborah Silcox) would have provided for the licensure of genetic counselors and for continuing education requirements under the Georgia Composite Medical Board.

House Bill 646 – Bariatric Surgery Coverage (Rep. Katie Dempsey) would have reinstated a pilot program to provide coverage for bariatric surgical procedures for the treatment and management of obesity and related conditions under the Georgia Department of Community Health.

House Bill 743 – Cardiac Arrest Prevention (Rep. David Clark) ‘Jeremy Nelson and Nick Blakely Sudden Cardiac Arrest Prevention Act’ would have required the Georgia Department of Education to develop and publish guidelines relating to cardiac arrest where students and parents are required to sign a form at the beginning of the school year prior to athletic participation stating they have received and reviewed cardiac arrest symptoms and warning signs material.

House Bill 774 - Campus Booting (Rep. Alan Powell) would have taken away current control by local ordinances and regulates the practice of booting vehicles throughout Georgia while increasing the customary fee to remove a booting device from $75 to $85.
**House Bill 747 – Hemophilia** (Rep. Sharon Cooper) would have allowed Medicaid recipients to receive unrestricted access to medications prescribed for the treatment of hemophilia.

**House Bill 799 – Insurance** (Rep. Sharon Cooper) would have prohibited hospitals from billing patients for anything other than co-payments, co-insurance, and deductibles for post-stabilization services provided in an out-of-network hospital. It also requires the hospitals to notify a patient’s health plan prior to providing post-stabilization care.

**House Bill 847 – Psychology Interjurisdictional Compact** (Rep. Joyce Chandler) would have allowed psychologists to enter into an interstate compact administered under the State Board of Examiners of Psychologists and to practice telepsychology in states in which they are not licensed but are members of the compact.

**House Bill 974 - Certificate of Need** (Rep. Chuck Martin) would have exempted integrated surgery centers from Certificate of Need (CON) requirements. An ‘integrated surgery center’ is defined as an ambulatory surgical center built and operated in connection with an integrated athletic training and educational facility for athletes, medical training research activities, and physician training education for sports medicine. SB 462 and SB 184 include similar language and are listed below.

**Senate Bill 8 - Balance Billing** (Sen. Renee Unterman) aimed to address the issue of “surprise billing” by placing certain disclosure requirements on hospitals, physicians, and insurance companies for non-emergency services.

**Senate Bill 55 - Psychiatric Advance Directive** (Sen. Josh McKoon) would have allowed a competent adult to express his or her mental health care treatment preferences and desires directly through instructions written in advance and indirectly through appointing an agent to make mental health care decisions on behalf of that person.

**Senate Bill 81 – Children’s Hospitals** (Sen. Renee Unterman) would have created a new facility category in the Certificate of Need code to allow children’s hospital beds to be co-located in other hospitals and creates a Medicaid reimbursement for inter-facility transfers.

**Senate Bill 184 – Certificate of Need** (Sen. Chuck Hufstetler) would have exempted integrated surgery centers from Certificate of Need (CON) requirements.

**Senate Bill 334 - Board of Nursing** (Sen. Renee Unterman) would have moved the Georgia Board of Nursing from the Secretary of State’s Office to the Georgia Department of Community Health.

**Senate Bill 351 - APRN Scope** (Sen. Renee Unterman) would have allowed APRNs to order imaging without it being a “life threatening situation” and increases the number of Nurse Practitioners a physician may supervise from four to eight.

**Senate Bill 325 - Interstate Compact** (Sen. Kay Kirkpatrick) would have allowed physicians, assistants, and others to enter into an interstate medical licensure compact administered under the Georgia Composite Medical Board.
**Senate Bill 352 – Opioids** (Sen. Renee Unterman) would have addressed opioid abuse by creating the Commission on Substance Abuse and Recovery, prohibits patient brokering or kick-backs for referrals, addresses billing fraud issues for “hi-tech drug screening,” and requires education for middle and high school students related to substance abuse and the dangers of using drugs.

**Senate Bill 359 – Surprise Billing** (Rep. Chuck Hufstetler) would have contained transparency requirements to help patients better determine when a provider may be out-of-network. For emergency situations, the bill sets a minimum standard of payment for out-of-network providers and requires the insurer to pay such amount to the provider.

**Senate Bill 375 – Adoption** (Sen. William Ligon) The “Keep Faith in Adoption and Foster Care Act” would have allowed adoption and foster care agencies to decline to accept a referral for foster care or adoption services under a contract with the State based on the child-placing agency’s sincerely held religious beliefs.

**Senate Bill 462 – Certificate of Need** (Sen. John Albers) would have exempted integrated surgery centers from Certificate of Need (CON) requirements.
LEGISLATION THAT WAS VETOED

Senate Bill 357 – Health Coordination and Innovation Council (Sen. Dean Burke) would have established the Health Coordination and Innovation Council of the State of Georgia.

The Governor’s veto message states:

“Senate Bill 357, while well-intentioned, creates several unnecessary additional levels of government. The proposed director of health care policy and strategic planning along with the Health Coordination and Innovation Council and an additional advisory board would be attached to the Governor’s Office of Planning and Budget, yet the director of OPB would have no functional control over these newly created positions and entities. In addition to the practical management and organizational issues presented by this structure, a new Governor will be elected this November and it should be left to that individual to shape their executive team in 2019. For the foregoing reasons, I VETO SB 357.”

House Bill 754 – Domestic Insurers (Rep. Jason Shaw) would have allowed a Georgia domestic insurer to divide into two or more insurers and allocate assets and obligations, including insurance or reinsurance policies, to the new company.

The Governor’s veto message states:

“House Bill 754 would allow insurers domiciled in Georgia to divide into two or more insurers. Any plan of division must be submitted to and approved by the Commissioner of Insurance, giving the Commissioner broad discretion to decide on a case by case basis if the company meets the requirements to divide. If a company was deemed acceptable by the Commissioner to divide and one of the resulting insurers stopped turning a profit, issues could arise as to how to distribute the liability. I am unaware of the need for the division process provided for in HB 754 and am unconvinced that the appropriate safeguards are provided for in the proposed legislation. For the foregoing reasons, I VETO HB 754.”
On March 14, Dr. Walter Curran, Jr., MD, FACR, Executive Director of Winship Cancer Institute, and other Winship leaders were presented a commendation by Governor Deal recognizing Winship for its designation as a National Cancer Institute (NCI) comprehensive cancer center.

Pictured (left to right): Dr. Kim Kerstann, PhD, Senior Director for Research Administration of Winship Cancer Institute; Dr. Walter Curran, Jr. MD, FACR, Executive Director of Winship Cancer Institute; Governor Nathan Deal; Dr. Suresh Ramalingam, MD, Deputy Director of Winship Cancer Institute

Throughout the session, Emory’s OGCA team and the Emory Proton Treatment Center worked together to host a number of behind-the-scenes legislative tours for lawmakers, their staffs and even their spouses.

Pictured (left to right): Rep. John Deffenbaugh (R- Lookout Mountain), Executive Director of Winship Cancer Institute Dr. Walter Curran, Jr. MD, FACR, Majority Leader Jon Burns (R-Newington), Winship medical physicist Dr. Samantha Hedrick, Rep. Mark Newton (R-Augusta), Dayle Burns, Rep. Matt Gurtler (R-Tiger)
On January 30, the Georgia Department of Public Health (DPH) hosted the state’s first ever Telehealth Day at the Capitol. Emory was invited to participate and showcase its work in telehealth. Legislators, lobbyists, and visitors participated in live tele-retinopathy and tele-dermatology screenings right from Emory’s booth at the Capitol.

Pictured: Emory telehealth providers and support staff, plus Suleima Salgado, Telehealth Director for the Department of Public Health (front left)

On February 2, State Rep. Doreen Carter (D-Lithonia) hosted the third annual Women’s Go Red Luncheon and Rally at the Georgia State Capitol. Rep. Carter was joined by Dr. Gina Lundberg from Emory Women’s Heart Center, guests from Grady Cardiology, and the American Heart Association.

Pictured: Emory Dr. Gina Lundberg and Georgia State Rep. Doreen Carter (front row), lawmakers, support staff, community members and leaders.