

CAPITAL UPDATE

News of legislative, regulatory, and other matters of interest to New York's physicians
Published by Governmental Affairs Division/Medical Society of the State of New York ★ 155 Washington Ave. ★ Albany, NY 12210
(518)465-8085 ★ www.mssny.org ★ email: albany@mssny.org ★ Morris M. Auster, Esq. ★ Patricia F. Clancy ★ Zina Cary ★ Nicholas Hospodar

<u>State Budget Delayed Until Next Week - Physician Advocacy Needed on Pressing Healthcare Issues</u>

With State Budget negotiations continuing following passage of another temporary Budget extender this week until Monday, April 8, physicians must continue to contact their legislators to oppose various Executive Budget proposals that will adversely impact patient access to community-based physician care. MSSNY continues to work with numerous allies including specialty societies in its advocacy on the following issues.

• **Protecting the Treatment Services Provided through CPH.** Both the Assembly and Senate have opposed a proposal in Part L of the HMH Art. 7 Executive Budget bill to repeal authorization for the MSSNY's Committee for Physicians Health (CPH) program. CPH-Repeal-Oppose(mssny.org). CPH has for over 40 years provided needed treatment services for thousands of physicians facing behavioral health or addiction issues. CPH is not funded out of the General Fund but through a \$30 set-aside through the physicians' biennial registration fee that results in an annual appropriation to CPH of \$990,000.

Please contact your legislators to thank them for advocating to preserve this essential program and urge that they maintain this position. Restore CPH Program (p2a.co)

• **Protecting Continued Access to Excess Medical Malpractice Insurance Coverage.**Both the Assembly and Senate have opposed a proposal in Part K of the Art. 7 HMH Budget bill to impose huge new costs on the nearly 16,000 physicians enrolled in the Excess Medical Malpractice Insurance program, by requiring physicians to pay 50% of the coverage cost Excess Change Oppose (mssny.org). This would be a nearly \$40 million hit to community-based physicians across the state who already pay among the highest medical liability insurance costs in the nation.

Please contact your legislators to thank them for advocating to prevent this unfair cost imposition, and ask that they maintain this position Reject Excess Insurance Cut (p2a.co)

Preserving Patient Access to Physician-Led Team Care. Both the Assembly and Senate
have opposed a series of scope expansion proposals in Part Q of the Art. 7 HMH Budget bill
to permit Physicians Assistants (PAs) to practice without any physician supervision or
collaboration after 8,000 clinical hours if they practice in primary care or are employed by

a hospital; Permitting dentists to perform screening tests for HIV, Hepatitis and Diabetes; and authorizing pharmacists dispensing PrEP on a non-patient specific prescription basis. Protect Physician-Led Team Care (mssny.org)

Please contact their legislators to thank them for advocating to protect physician-led team care, and urge that they maintain this position: Preserve Physician-led Healthcare (p2a.co)

• **Preserving Physicians' Right to Appeal Claim Underpayments.** Both the Assembly and Senate have opposed a proposal in Part H of the Art. 7 HMH Budget bill that would repeal the ability of physicians to bring claim disputes with Medicaid Managed Care plans to the Independent Dispute resolution (IDR) process <u>IDR-Repeal-Oppose (mssny.org)</u>. This change would lead to steep health insurer payment cuts and network reductions and discourage many physician specialists from providing essential on-call emergency department care.

Please contact your legislators to thank them for advocating to preserve this important right, and urge that they maintain this position Retain Right to IDR (p2a.co)

Protecting Patient Access to Needed Medications and Treatments. Both the
Assembly and Senate have opposed proposals in Part I of the Art. 7 HMH Budget bill that
would increase prior authorization hassles for Medicaid prescriptions by repealing
"prescriber prevails" protections Prescriber-Prevails-Repeal-Oppose(mssny.org), as well as
giving power to Medicaid to reimburse physicians for injectable medications at amounts
even less than what the physician office paid to acquire the injectable medication Opposecuts (mssny.org)

(DIVISION OF GOVERNMENTAL AFFAIRS)

MSSNY Continues Efforts to Make Payment Parity for Telehealth Services Permanent

As Governor Hochul, the Senate and Assembly continue to negotiate the terms for the final budget for FY2024-25, MSSNY is keeping up the drumbeat to make payment parity for Telehealth-delivered healthcare services permanent. The State Senate is proposing that the law be made permanent while Governor Hochul and the Assembly have proposed a one-year extension of the current law, from its current expiration date of April 1.

The policy was enacted in the FY2022-23 state budget after the use of Telehealth services exploded during the COVID-19 pandemic. For a time, connecting virtually was the only option for patients and their physicians to connect. As the pandemic has receded, in-person visits have increased but Telehealth remains an important modality for patients to receive needed healthcare services.

Physicians are urged to contact their state legislators and Governor Hochul <u>take action</u> to voice support for permanent payment parity for Telehealth services. We will share updates as budget negotiations continue over the next few weeks.

(CARY)

New York Remains One of the Worst States to be a Physician - Please Don't Make That Worse Through a Huge Increase in Liability Costs

New York's continued designation as one of the worst states in the country in which to be a physician Best & Worst States for Doctors in 2024 (wallethub.com) is a major contributing factor to care shortages we face in New York. As legislators seek to address these gaps in access to care, we can ill afford to make this problem worse by enacting legislation (A.9232/S.8485) under discussion in the State Budget to greatly increase the damages awardable in wrongful death actions. Physicians are urged to contact their legislators Reducing Medical Liability Costs (p2a.co) to request that any legislation to expand liability costs also take corresponding steps to help reduce our already staggering medical liability costs.

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New York's liability costs far exceed any other state in the country. Increasing these costs by any amount, let alone the potential 40% increase that actuaries have predicted when analyzing this legislation, will exacerbate existing patient access to care challenges in our healthcare system. Governor Hochul recently vetoed – for the second time – legislation that would have expanded the types of damages awardable in wrongful death actions. Her veto message appropriately highlighted the "significant unintended consequences" of this proposal, including the impact to our community healthcare infrastructure because of the likely huge increase in liability costs it would face through these expanded liability awards.

(AUSTER)

MSSNY Gearing Up for Legislative Action to Increase Patient Access to Timely & Consistent Care

With negotiations for the final state FY2024-25 budget expected to wrap up in the next few weeks, physicians are urged to contact their Assemblymembers and Senators through MSSNY's Grassroots Action Center to ask that they work to enact A.7268/S.3400 before the Session ends this year. This bill, sponsored by Assembly Insurance Committee Chair David Weprin and Senate Insurance Committee Chair Neil Breslin, would make significant progress toward remedying the harm caused by excessive prior authorization requirements. It would require that health plan utilization review criteria be evidence-based, and peer reviewed, reducing the insurer time limit for reviewing prior authorization requests and limiting when an insurer can withdraw or repeat a previously granted prior authorization. The standards within this bill are based on recommendations made by several respected health care advocacy organizations to improve patient care. Additionally, this legislation will protect patients' access to needed prescription medications and tests to facilitate accurate diagnosis.

Excessive Prior Authorization requirements can cause unnecessary delays in needed care for patients, and disruption to continuity of care. Moreover, delay in authorization of prescriptions, tests, or procedures can cause needless anxiety for patients already stressed by the uncertainty regarding their condition. A recent survey of physicians by the American Medical Association (AMA) reported that 94% of responding physicians said that the prior authorization process delayed patient access to necessary care and nearly 90% of the respondents indicated that prior authorization led to somewhat, or significant, negative outcomes.

Please contact your Assemblymembers and Senators <u>Grassroots Action Center</u> to let them know you support passage of A.7268 (Weprin)/S.3400 (Breslin).

(CARY)

MSSNY House of Delegates CME Day Thursday April 11, 2024 Registration Now Open Medical Matters CME Webinar What's That Spot?

Less than three months into 2024 and the total number of measles cases in the United States have exceeded the total number of cases in 2023. Exacerbating the spread of measles, multiple types of rashes tend to mimic one another making differential diagnosis tricky. Learn more about discerning the presentation, comorbidities and causes of a variety of rashes by registering for the Medical Matters webinar, *What's That Spot?* on **Thursday April 11th at 7:30am**. William Valenti, MD, chair of MSSNY's Infectious Diseases Committee and Kira Geraci-Ciardullo, MD, MPH both members of MSSNY's Committee on Emergency Preparedness and Disaster/Terrorism Response will serve as faculty for this webinar. Register now

Educational objectives are:

- Describe rash types, causes, variations, and diagnoses.
- Differentiate diffuse, vesicular, and maculopapular rashes (using case studies)
- Summarize best practices for diagnosing rash presentations.

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Additional information or assistance with registration may be obtained by contacting Melissa Hoffman at_mhoffman@mssny.org

The Medical Society of the State of New York is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

The Medical Society of the State of New York designates this live activity for a maximum of 1.0 AMA PRA Category 1 credits^{$\dagger M$}. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

(HOFFMAN)

Registration now open: Veterans Matters CME Webinars

New York State is home to more than 800,000 veterans, and a recent study showed that nearly half of these veterans receive healthcare services outside of the VA system. MSSNY Veterans Matters webinars provide physicians with essential information to treat veteran patients.

<u>Veterans Matters: TBI in Returning Veterans</u>, takes place on **April 11, 2024 @ 8:40 AM**. The faculty for this webinar is David Podwall, MD. Educational Objectives:

- Identify signs and symptoms indicative of the spectrum from concussion/mild TBI to severe TBI.
- Examine evidence-based treatment modalities and when to refer to a specialist.
- Identify red flags that indicate alternate or more severe pathology.
- Outline an appropriate management plan for a patient presenting with concussion/TBI including a return to "normal life" protocol.

<u>Veterans Matters Burn Pits: Psychological and Physical Impact on Veterans</u>, takes place on **April 11, 2024 @ 9:50 AM**. The faculty for this webinar is Frank Dowling, MD and Mary Lee-Wong, MD.

Educational Objectives:

- Describe the reported physical and psychological sequelae after burn pit exposure.
- Outline possible symptoms that can result from burn pit exposure.
- Define aerosolized airborne hazards dissipated from prevalent items in burn pits.
- Identify different types of diseases that can be caused by burn pit exposure.

Additional information or assistance with registration may be obtained by contacting Nicholas Hospodar at nhospodar@mssny.org.

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*This program is supported in whole by a grant from the New York State Office of Mental Health.

(HOSPODAR)