



CAPITAL UPDATE

News of legislative, regulatory, and other matters of interest to New York's physicians

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Bills to Increase Patient Access to Timely & Consistent Care Clear Assembly Insurance Committee

MSSNY's big advocacy push in support of prior authorization reform legislation [A.7268-A (Weprin)/S.3400 (Breslin)] cleared a major hurdle this week when it was unanimously reported from the Assembly Insurance Committee to the Rules Committee. Joining MSSNY in supporting this bill are the New York State Psychiatric Association (NYSPA), the American College of Obstetricians & Gynecologists (ACOG), the New York State Association of Family Physicians, a host of other specialty medical societies and patient advocates from the NY State Bleeding Disorders Coalition (NYSBDC). The bill would make significant progress toward remedying the harm caused by prior authorization by requiring that health plan utilization review criteria be evidence-based, and peer reviewed, reducing the insurer timeframe for reviewing prior authorization requests and limiting when an insurer can withdraw or repeat a previously granted prior authorization.

Prior Authorization frequently imposes overwhelming burdens that cause unnecessary delays in needed care for patients. Delay in authorization of prescriptions, tests, or procedures can cause needless anxiety for patients already stressed by the uncertainty regarding their condition. Moreover, 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.

The bill has also advanced from the Senate Health Committee to the Finance Committee. Please contact your Assemblymembers and Senators through MSSNY's [Grassroots Action Center](#) (GAC) to let them know you support passage of A.7268A/S.3400 this year!

Additionally, among the many positive health insurer reform bills that were advanced by the Insurance Committee this week include:

[AB 38](#) (Rosenthal) Requires health insurance coverage of scalp cooling devices to help patients preserve hair during chemotherapy.

[AB 901](#) (McDonald) – Supplements current step therapy protections by requiring a health insurer to follow certain rules when establishing a step therapy protocol.

[AB 1619](#) (Rosenthal) Prohibits insurers from restricting or imposing delays in the distribution of antiretroviral prescription drugs prescribed to a person for HIV or AIDS.

[AB 1696](#) (Hunter) Requires certain insurance policies allow patients additional screenings for breast cancer when the provider deems such screening is necessary under nationally recognized clinical practice guidelines.

[AB 5129](#) (Dinowitz) Provides for a right of health insurer enrollees to continue to receive services from a provider who disaffiliates.

[AB 8576](#) (McDonald) which would prohibit the imposition of a charge or deduction from a payment due to a health care provider because such payment is made through electronic or paper means.

MSSNY will continue to update members as these bills progress over the next two weeks with the last scheduled day of the 2024 Legislative Session on Thursday June 6.

(CARY)

Revised Wrongful Death Liability Expansion Legislation Does Not Alter Fundamental Concerns About Harm to Healthcare System

Physicians are again urged to contact their legislators [Reducing Medical Liability Costs \(p2a.co\)](#) to request that any legislation to expand liability against physicians and hospitals also take corresponding steps to bring down New York's already staggering medical liability costs. Legislation (A.9232-B/S.8485-A) to expand damages awardable in wrongful death actions is again moving in the Assembly and Senate, with the latest versions not lessening the material adverse impact of the two earlier versions that were vetoed by Governor Hochul.

The new legislation reduces the retroactive applicability and reduces the number of individuals that can bring these actions. However, it does not change the fundamental nature of the new types of damages that would be awardable through this legislation, which was largely the basis for the 2022 actuarial study that concluded that this bill could produce a 40-45% increase in medical liability premiums. This week, MSSNY joined with 17 specialty societies in a letter [S8485-A.9232-A-joint-letter.pdf \(mssny.org\)](#) to the entire Legislature urging comprehensive liability reform instead of one-sided proposals such as this that would exacerbate already challenging patient access to care issues.

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 patient access to care shortages we face in New York.

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 similar legislation, will exacerbate existing patient access to care challenges in our healthcare system. Governor Hochul has twice vetoed 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.

Please urge your legislators to work for the enactment of comprehensive legislation to bring down these untenable costs instead of increasing them and exacerbating existing patient access to care issues.

(AUSTER)

Final Weeks of Session Brings Numerous Concerning Scope Expansion Bills

The recently enacted State Budget importantly rejected numerous proposals that would have threatened patient safety by removing the important oversight and/or collaboration that physicians provide in the delivery of patient care. However, as we enter the final days of the scheduled 2024 Legislative Session, MSSNY is continuing to work with affected specialty societies to oppose the litany of bills under consideration that would inappropriately expand the scope of services that can be provided by various non-physicians without adequate physician oversight. These problematic bills include, but are not limited to:

- **A.8378/S.9038** which would allow Physician Assistants (PAs) to practice independently without physician oversight after 8,000 hours of practice. There have been extensive discussions over the last few weeks on various potential amendments to narrow the scope of the bill. Nevertheless, MSSNY and specialty societies continue to raise patient safety concerns about any effort to eliminate physician supervision requirements, particularly when options exist to change regulations to increase the number of PAs a physician can supervise.
- **A.2217-B/S.2254-B** which would significantly expand the scope of practice of a podiatrist to treat conditions of the ankle and leg.
- **A.6958-A/S.769-A** would allow Nurse Anesthetists to administer anesthesia with reduced physician oversight.
- **S.66-A/A.1262-A** which would grant prescribing rights to psychologists similar to psychiatrists. You can send a letter to your legislators in opposition here:
- **A.2300/S.9716** would remove all time/visit limitations on patient access to physical therapy services without referral from a physician.

At the same time, MSSNY is working together with numerous specialty societies in support of legislation (**S.9214/A.10009**) that advanced from the Senate Higher Education Committee to the Finance Committee this week that would require healthcare practitioners to provide greater disclosure of their professional credentials in their advertisements and in their clinical encounters with their patients.

(AUSTER)

Peer to Peer (P2P) Program:

Stress and burnout among physicians have been documented for years. The COVID-19 pandemic is exacerbating the public health problem of physician burnout in New York state. Throughout the pandemic, physicians and other health professionals have faced concerns about safety, overworking and feelings of loss. Without an intervention, it is possible that a high number of physicians over the next few years may develop chronic stress reactions, anger, clinical depression, substance abuse, post-traumatic stress disorder and suicidality. MSSNY's P2P program allows physicians, residents, and medical students to talk with a peer about work or life stressors.

If someone you know is struggling with life stressors, reach out to the P2P program to connect them to a peer supporter!

**Email: P2P@mssny.org and request that you be connected with a peer supporter
Phone: 1-844-P2P-PEER (1-844-727-7337) and request that you be connected with a peer supporter**

(RENTO)

Registration Now Open Medical Matters CME Webinar

[Public Health! What is it Good for?](#)

Wednesday June 12, 2024 @ 7:30am

Join a group of public health experts on **June 12th at 7:30am** for the next Medical Matters webinar, ***Public Health! What is it Good for?*** This webinar will be a panel discussion with Dr. William Valenti, Dr. Arthur Cooper and Tom Henery, Preparedness Training Manager at the New York State Department of Health, examining the evolving nature of public health and ways to navigate it in relation to a world in which technology is continually advancing and changing the practice of medicine. [Register here](#)

Educational Objectives:

- Discuss the primary tenets of public health including the evolving nature of public health emergencies and the process of gaining knowledge and developing tools.
- Identify lessons learned related to public health responses to recent and historical public health emergencies.
- Outline public health priorities for future public health emergencies including social media, artificial intelligence, and the internet.

Additional information or assistance with registration may be obtained by contacting Melissa Hoffman at mhoffman@mssny.org You can also email any questions that you wish to have discussed during this webinar to Melissa Hoffman at this email address.

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™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.*

(HOFFMAN)

Women Physicians Leadership Academy – Now Available on CME Website!

The Women Physicians Leadership Academy is now available on the [MSSNY CME website!](#) This series contains six virtual leadership webinars held for physicians, residents, and medical students. Dr. Patrice Harris facilitated the fall sessions which include topics on effective communication, advocacy and changemaking, and leadership. Dr. Julie Silver facilitated the spring sessions which include the importance of networking, enhancing physician wellness and belonging, and designing your medical career. Three CME credits can be earned from each session, and up to 18 can be earned by completing the entire academy. Participants who complete all sessions by September 30, 2024, will receive an additional certificate of completion for the online WPLA.

(RENTO)