

*PA Academy of Family Physicians  
2019-20 State Legislative Agenda  
(As of 6/17/19)*

**Prior Authorization Reform**

Prior authorizations have become significantly burdensome to family physicians, and more importantly result in delays and jeopardized quality care to patients. The PAFP supports reforms that would maximize electronic communications for authorizations as well as adverse determinations, and define consistent response times for authorizations, rejections, appeals, and external utilization review. PAFP is working with Pennsylvania Medical Society and many stakeholders preparing for introduction of legislation, which will be carrying the designation of [House Bill 1194](#) and sponsored by Rep. Mentzer. A cosponsorship memo ([HCO 1917](#)) is being circulated.

**Nurse Practitioner Independence**

Nurse practitioners (NPs) are integral, valuable members of the health care team, held in the highest regard by family physicians. However, patients are best served when a physician-led, highly coordinated health care team provides care. Therefore, the PAFP opposes legislation that would expand their scope of practice and eliminate collaborative agreements. The Senate passed Sen. Bartolotta's [Senate Bill 25](#) on June 12. Rep. Topper has introduced [House Bill 100](#). Both bills now rest in the House Professional Licensure Committee.

**Health Insurer Credentialing Reform**

Delays in credentialing of new physicians or existing physicians changing practices create undo hardships most notably on the communities they serve. The PAFP supports legislation that would standardize the credentialing form and set processing standards. Rep. Owlett has introduced [House Bill 533](#) seeking to codify significant reforms. The bill is in the House Health Committee.

**Buprenorphine Medically Assisted Treatment Act**

Access to care for patients suffering from substance abuse disorder is critical, and state regulation could significantly jeopardize access to office based opioid treatment (OBOT). The PAFP opposes legislation that would require prescribers of Buprenorphine to be licensed by the state and pay any state licensing fee. Sen. Brooks has introduced [Senate Bill 675](#) which is moving toward passage in the Senate.

**Direct Primary Care (DPC) Authorizing Legislation**

DPC is a model of care outside the bounds of health insurance and an emerging option for patients and physicians. The PAFP supports legislation that specifies direct primary care agreements are not insurance and therefore not subject to insurance laws or regulations. Sen. Browne is circulating [SCO 877](#) seeking cosponsors for the impending bill.

**Restrictive Covenants**

In this age of health system consolidations, PAFP supports legislation limiting restrictive covenants in health care practitioner employment agreements. Rep. Deluca has introduced [House Bill 601](#) that rests in the House Health Committee.

**POLST Legislation**

Working with the Pennsylvania Medical Society, the PAFP supports updating and revising Pennsylvania law to include codification of Pennsylvania Orders for Life Sustaining Treatment (POLST) to be used by medical professionals across all health care settings for patients who voluntarily wish to execute a POLST order. Sen. Yaw has introduced [SB 142](#) that has been assigned to the Senate Health and Human Services Committee.

### **Workplace Accommodations for Nursing Mothers**

The PAFP supports legislation that requires employers to provide employees time to express breast milk in a sanitary environment for her nursing child. Rep. Mary Jo Daley has introduced [House Bill 1177](#) that rests in the House Labor and Industry Committee.

### **Expanded Pharmacy Vaccinations to Minors**

The PAFP opposes legislation that would amend the Pharmacy Practice Act and allow pharmacists to administer all CDC recommended vaccinations to patients 9 years of age or older. As part of a compromise several years ago, pharmacist obtained the ability to provide influenza vaccine to those 9 and older. Sen. Judy Ward has introduced [SB 274](#) that rests in the Senate Consumer Protection and Professional Licensure Committee, while Rep. Grove has introduced [House Bill 91](#) that rests in the House Health Committee.

PAFP's State Legislative Agenda is developed through the Government and Practice Advocacy Committee with position decisions made by the Board of Directors. Questions/Comments? Please contact Brent Ennis, PAFP Deputy EVP/COO and State-Registered Lobbyist at [bennis@pafp.com](mailto:bennis@pafp.com)