**State Legislative Update – June 21, 2024**

For more information regarding ACS State Affairs Policy Priorities in your state, please contact Catherine Hendricks, State Affairs Manager, at [chendricks@facs.org](mailto:chendricks@facs.org) or Cory Bloom, State Affairs Associate, at [cbloom@facs.org](mailto:cbloom@facs.org). To view a complete list of bills ACS State Affairs is tracking, visit our online [State Legislative Tracker.](https://www.quorum.us/spreadsheet/external/QGjJBFIfORzJNAtlNvfp/)

**STATE AFFAIRS WORKGROUP**

Arnold Baskies, MD, FACS (NJ); Ali Kasraeian, MD, FACS (FL); Kevin Koo, MD, FACS (MN); and Kelly Swords, MD, FACS (CA). The Workgroup will play a critical role in identifying state advocacy priorities, setting new policy objectives, and evaluating state advocacy grant applications among other duties.

**ACS STATE AFFAIRS PRIORITY ISSUES**

* Trauma System Funding and Development
* Cancer Screening, Testing, and Treatment
* Insurance and Administrative Burden
* Professional Liability
* Criminalization of Physician Care
* Access to Surgical Care
* Health Equity

**ACS GRANT PROGRAM**

State Chapters are eligible to apply for ACS State Advocacy Grants and may use funds towards their annual state advocacy day, to hire a lobbyist, or other relevant advocacy functions such as travel costs for members, catering, venue rentals, printing, and more. To learn more information regarding the ACS State Advocacy Grants, apply [here](https://www.facs.org/advocacy/state-legislation/chapter-state-advocacy-grant-program/).

**IN THE NEWS**

**Montana Create Emergency ‘Drive-Thru’ Blood Pickup Service for Rural Ambulances**

Trauma patients in Montana face treacherous, long-distance travel to receive trauma care in the state. For example, a woman with a ruptured ectopic pregnancy barely survived the 100-mile, 2.5-hour ambulance drive from her small town to Billings after her heart stopped and she lost almost all of her blood.

The Montana State Trauma Care Committee, which works to reduce trauma incidents and improve care, later realized the ambulance had passed by two hospitals with stocked blood. This inspired the Committee to create the Montana Interfacility Blood Network, which allows ambulance crews to pick up blood from hospitals and transfuse it to patients on the way to more advanced care.

ACS Fellow, Gordon Riha, a trauma surgeon at the Billings Clinic trauma center said timely blood transfusions can prevent death or permanent brain injury and is aimed at rural patients who face elevated rates of traumatic injuries and death. The program has helped at least three patients since it launched in 2022. Read more here.

The ACS State Affairs team is working with a small group of active surgeons in Montana to address trauma funding in the state.

**Advisory Commission on Alternate Licensing Models Hosts Symposium**

The Federation of State Medical Boards (FSMB) hosted more than 175 individuals representing state medical licensure boards on June 18 in Washington, D.C. The event was hosted by the Advisory Commission on Alternate Licensing Models (Commission), which is co-chaired by the FSMB, Intealth, and the Accreditation Council for Graduate Medical Education (ACGME), and formed earlier this year to provide guidance to state seeking to improve access to care by streamlining the licensure of international physicians who have trained and practiced outside the United States.

A number of states are interested in modifying traditional post-graduate training requirements for licensure or creating new licensure categories in an effort to address a nationwide physician shortage. New York, Maine, California, Tennessee, ACGME, the World Federation for Medical Education, and the Cicero Institute presented a sampling of programs discussing legislative pathways for internationally licensed physicians to practice in the U.S.

The Commission will use the provided information and feedback from the symposium to create its collaborative analysis and subsequent draft recommendations, which will include a period of time for public comment. The College continues to monitor the process and contribute where applicable.

**Cancer Equity Compass**

The Harvey L. Neiman Health Policy Institute launched a new online tool showing the overlap between cancer disparities and social determinants of health using advanced heat maps of U.S. counties. Read more [here](https://www.neimanhpi.org/cancer-equity-compass/).

**STATUS OF LEGISLATIVE SESSIONS**

The following state legislatures remain in session: California, Delaware, Massachusetts, Michigan, New Hampshire, New Jersey, North Carolina, Ohio, Pennsylvania, and Rhode Island.

Montana, Nevada, North Dakota, and Texas have no regular session in even-numbered years. Legislative session information can be found [here](https://www.multistate.us/resources/2024-legislative-session-dates).

**LEGISLATIVE TRACKING**

**COLORADO**

[SB 205](https://leg.colorado.gov/sites/default/files/documents/2024A/bills/sl/2024a_sl_198.pdf) – Artificial Intelligence ENACTED

Introduced by Senator Robert Rodriguez (D), SB 205 requires developers of high-risk AI systems to use reasonable care to avoid algorithmic discrimination; compliance provisions include disclosing specified information about the high-risk system to deployers, providing necessary documentation for impact assessments, publicly summarizing the types of systems developed, and reporting risks of algorithmic discrimination to the attorney general and deployers within 90 days of discovery. Governor Jared Polis (D) signed the bill into law May 17.

**LOUISIANA**

[HB 253](https://www.legis.la.gov/legis/ViewDocument.aspx?d=1382293) – Cancer ENACTED

Introduced by Representative Joseph Stagni (R), HB 253 requires firefighters be provided up to eleven different cancer screening examinations including breast, prostate and cervical. Governor Jeff Landry (R) signed the bill into law June 3.

[HB 508](https://www.legis.la.gov/legis/ViewDocument.aspx?d=1379579) – Cancer ENACTED

Introduced by Representative Lawrence Bagley (R), HB 508 provides decisions regarding treatment procedures performed following a diagnosis of cancer are to be made solely by the patient in consultation with attending physicians; clarifies all levels of medical and surgical treatment are medically necessary; prohibits exclusion from coverage. Governor Jeff Landry (R) signed the bill into law June 11.

[HB 592](https://www.legis.la.gov/legis/ViewDocument.aspx?d=1379242) – Workplace Violence ENACTED

Introduced by Representative Dustin Miller (D), HB 592 requires a health care office to implement programs to mitigate and raise awareness of workplace violence. Governor Jeff Landry (R) signed the bill into law June 11.

[HB 972](https://www.legis.la.gov/legis/ViewDocument.aspx?d=1380718) – Licensure ENACTED

Introduced by Representative Daryl Deshotel (R), HB 972 allows the medical board to issue temporary permits to International Medical Graduates (IMGs) who: hold a medical doctorate or equivalent degree from an international medical program substantially similar to the education and training required to practice in the state; has a license in good standing with the medical licensing body in their home country; has completed a residency in their licensing country, or has at least five years’ experience as a practicing physician; has citizenship or legal work status in the United States or Canada; English proficiency; and has an offer of employment at a facility owned or operated by state-licensed hospitals; after two years of practice in good standing, the board shall grant the permittee an unrestricted license to practice medicine. Governor Jeff Landry (R) signed the bill into law June 11.

**RHODE ISLAND**

[H 7625](https://webserver.rilegislature.gov/BillText/BillText24/HouseText24/H7625A.pdf) – Prior Authorization/Step-Therapy ENACTED

Introduced by Representative Rebecca Kislak (D), H 7625 requires a health care insurer to provide access to at least one pre-exposure drug in each method of administration and at least one of the CDC preferred post-exposure drug treatment regimen without any prior authorization or step-therapy requirement; treatments must be provided with no cost sharing. Governor Daniel McKee (D) signed the bill into law June 17.

[H 7696](https://webserver.rilegislature.gov/BillText/BillText24/HouseText24/H7696.pdf) – Restrictive Covenant ENACTED

Introduced by Representative June Speakman (D), H 7696 prohibits a restrictive covenant in any agreement with an advanced practice registered nurse. Governor Daniel McKee (D) signed the bill into law June 17.

**VERMONT**

[H 766](https://legislature.vermont.gov/Documents/2024/Docs/ACTS/ACT111/ACT111%20As%20Enacted.pdf) – Prior Authorization ENACTED

Introduced by Representative Alyssa Black (D), H 766 ensures patients do not have to fail the same medication more than once during step therapy; prohibits prior authorization for any admission, item, service, treatment, or procedure ordered by a primary care provider; requires health plans to publicly list services requiring prior authorization; sets a 24-hour timeline to approve, deny, or request additional information for an urgent prior authorization request and two business days for a non-urgent request; once granted prior authorization shall be valid for the duration of the treatment or one year whichever is longer. Governor Phil Scott (R) signed the bill into law May 20.