

REPORT ON 2009 LEGISLATIVE SESSION

- **Cigarette Tax Increase (Res. 15, 2008)**

MSMA has long supported any increased tax on tobacco products as a proven deterrent to tobacco use. The Mississippi Tax Study Commission met several times during 2008 to devise a plan for restructuring the Mississippi State Tax Code. The Commission's final recommendations included an increase in the tax collected on cigarettes of \$0.32. This increase would take Mississippi's cigarette tax from \$0.18 to \$0.50 per pack. **Status** – HB 364 is currently alive and legislators will revisit this issue when they return to Jackson in May. Currently the House has proposed a total tax of 75-cents and the Senate has proposed a total tax of 64-cents.

- **Regulation of Pools and Spas (Res. 4, 2006)**

The State of Mississippi does not regulate public and semi-public swimming pools, wading pools and hot tubs although unclean water and/or unsafe structures pose a health hazard. Improper chlorination of water and inadequate air flow to remove chlorine by-products also pose dangers to swimmers and pool staff. **Status** – HB 77 died in committee with no action. Costs to administer the program and opposition from the Hotel industry continues to be the major obstacles for this legislation, but the Department of Health has agreed to work with MSMA to handle the concerns of this item by administration and will likely not require legislation.

- **Tort Claims Act Protection While Treating Medicaid Patients**

MSMA continued to support legislation requiring liability claims involving Medicaid patients to be adjudicated under the Mississippi Tort Claims Act. The legislation was introduced for the eighth consecutive year in 2009. **Status** – SB 2390 was amended in committee and after review was found to be in a form that had no chance of passing either chamber. The bill was recommitted, which was a procedural move that killed the measure.

- **Ban Smoking at Public Venues for Youth Sports Events (Res. 12, 2005)**

Although the negative effects of second hand smoke are well known, the lawmakers have not been quick to restrict sports venues. **Status** – HB 855 was added to the statewide smoking ban which passed the house and was killed in committee by the Senate. Lawmakers again were not overly interested in banning smoking in public places. The resistance from the hotel and casino industry as well as the restaurant association led to the failure of this bill.

- **UMC Funding (Res. 4, 2007)**

MSMA has long supported and worked toward appropriate levels of funding for UMC programs including an increase of the number of students in the medical school classes to 150 by 2014. MSMA continued to press for funding of the Rural Health Scholarship Program. **Status** – Currently all appropriation bills have been held by the legislature pending decisions regarding the use and requirements of federal stimulus funding which will be decided before lawmakers return in May. Although the measure has not yet been approved there is no indication that the additional funding added to the program in SB 3219 will be removed.

- **Department of Health (Res. 12, 2007)**

MSMA continued to encourage legislative funding of the Mississippi State Department of Health. MSMA also supported the Department of Health in efforts to stop legislation that would weaken vaccination requirements. **Status** – Funding has been held by the budget process. However, HB 455 which would have weakened vaccination requirements for children entering public schools was defeated in the Senate after it passed the House by a narrow margin.

- **Civil Commitment (Res. 6, 2007)**

MSMA continued to oppose holding civilly committed mental health patients in correctional facilities and supported appropriate inpatient psychiatric services and facilities for civilly committed patients. **Status** – Although there was no legislation passed changing this current practice, there will be a study committee formed by legislation to completely review the mental health system in Mississippi and make recommendations on how to better the system.

- **Coordinated School Health Programs (Res. 10, 2007)**

The Mississippi Healthy Students Act requires 150 minutes per week of physical exercise, 45 minutes of health education for grades K-8 and funds health education coordinators to implement these programs. MSMA supports additional funding for the remaining components of the plan. **Status** – Budget shortfalls prevented serious consideration of program expansions.

- **Medical Board Subpoena Power (Res. 18, 2007)**

The Board of Medical Licensure may now issue subpoenas on its own behalf to investigate complaints. The SBML considers issuing subpoenas during its regular meetings which take place every other month, which significantly slows the investigative process. **Status** – HB 78 was signed by the Governor and will allow the Executive Director of the SBML to issue subpoenas for medical records on behalf of the Board.

- **Reciprocal Time Limits for Claims Payments and Claims Audits (Res. 3, 2007)**

Most health insurance policies require physicians to file claims for reimbursement for services provided to beneficiaries of the policy within twelve (12) months of the date of service or forfeit the claim. There is no similar time limitation for health insurance issuers to seek reimbursement or offset of a previously paid claim and MSMA sought legislation to set a twelve month reciprocal limitation on health claim filing and health claim audits and reimbursements or offsets from the date of service. **Status** – SB 2844 was passed the Senate by a unanimous vote only to die in the House Insurance Committee chaired by Walter Robinson (D-Bolton).

- **Medicaid Funding (Res. 2, 2008)**

Status – Both the Medicaid appropriation bill (HB 1682) and the Medicaid technical amendments bill (HB105) are alive and will be finalized in May when the legislature reconvenes. At the end of this portion of the session it seems that the hospital assessment is the most contentious issue in the Medicaid technical amendments bill. Without the hospital assessment Medicaid will not be able to make other adjustments to the program such as increasing reimbursement to physicians.

- **Medicaid and SCHIP Enrollment (Res. 20 & 21, 2008)**

Status – The Medicaid technical amendments bill currently includes language to allow all Medicaid recipients to annually redetermine eligibility by mail instead of traveling to the local Medicaid office. Originally the bill allowed all children under the age of sixteen to be automatically reauthorized without a face-to-face interview.

- **Tax Incentives for New Subdivisions that Incorporate Exercise Opportunities (Res. 3, 2008)**

MSMA supported efforts of the Department of Health to giving tax incentives to a developer who incorporated exercise opportunities into subdivisions. **Status** – No action was taken by the legislature on this issue.

- **Compulsory Automobile Insurance (Res. 17, 2008)**

With new technology available to create a database to cross match insurance policies with vehicle identification numbers police officers can access immediate and accurate information about which vehicles are currently insured. MSMA supported legislation to require adequate automobile insurance amounts, penalties sufficient to insure compliance with the laws and the creation of a database to cross match insurance policies with vehicle identification numbers to assist police officers with enforcement. **Status** – HB 1315 requiring the fines collected for failure to prove liability insurance was introduced in both the House and Senate. The Senate bill was passed by an overwhelming majority on the floor and killed by the House Insurance Committee.

- **Tort Legislation** – MSMA was successful in killing legislation that would have expanded the statute of limitation on Tort Claims Act cases (HB 356) and legislation that would have deleted the requirement to notify a physician when an individual has sought legal counsel and is planning to file suit against a doctor (HB 352).

Scope of Practice Issues:

- **Nurse Practitioners.** MSMA fought legislation that would have allowed nurse practitioners to have autonomy and independent practice. **Status** – MSMA worked with the SBML and the Board of Nursing to reach a compromise on legislation that originally would have allowed nurse practitioners to practice independently. HB 1260 strictly defines a nurse practitioner in the law and requires a collaborative agreement with a physician. This measure also deletes the requirement that the SBML and the State Board of Nursing jointly promulgate certain rules. This bill has been signed by the Governor.
- **Optometrists.** MSMA worked collaboratively with the Mississippi Eye, Ear, Nose and Throat Association to defeat legislation to expand the scope of practice for optometrists. **Status** – In 2009 the optometrists introduced SB 2326 that would allow an optometrist's scope of practice to be expanded to include prescriptive authority of medications in schedule III as well as allow them to prescribe and dispense ophthalmic devices. MSMA was successful in killing this bill in committee.
- **Acupuncture.** MSMA compromised on HB 458 which will allow non-physician acupuncturists to obtain licensure in Mississippi. An acupuncturist may only treat a patient by referral from a physician and must report back to that physician on the patient's condition. This bill also creates an advisory council to the SBML which ultimately allows the physicians of Mississippi to govern the practice of acupuncture.