

2022 Legislative Advocacy Summary



Bill	Bill Summary	Position	Action / Status
HB149 / Expanding Access to Healthcare	Bill included: Medicaid Expansion APRN Independent Practice CON Reform Telehealth Surprise Billing	Opposed	Passed Senate. Died in House Rules Cmte.
SB408 / Rural Healthcare Access & Savings Plan Act	Medicaid Expansion bill	Support	Passed House. Died in Senate Rules Cmte.
SB345 - PA Team-based Practice	Amends regulation of PA practice in N.C. Eliminates required physician supervision in a team-based setting. Maintains supervision requirement in non-team-based settings.	Support	Passed Senate. Amended and Passed by House. Died in Senate Rules Cmte.
HB277/SB249 – SAVE Act	Would allow APRN independent practice	Opposed	HB277 died in House Rules Cmte. SB249 died in Senate Rules Cmte
HB93 - Req. Opioid Antagonist Education	This bill would mandate patient education with each opioid prescription.	Opposed	Passed House. Died in Senate Rules
HB538/SB475 – Transparency in Evidence Stds.	This bill states that the term “insurance” as used in NC Rules of Evidence prohibits parties from introducing evidence of any payments made by insurance under the collateral source rule.	Opposed	HB538 died in House Judiciary Cmte. SB475 died in House Rules Cmte.
HB539 / Protecting Properly Insured Individual	This bill would modify the evidence that may be used to establish the amount of recoverable medical expenses for a personal injury claim. This bill specifically: <ul style="list-style-type: none"> Limits the evidence offered to prove past medical expenses. Requires providers to timely submit a claim to an injured party’s health insurer or health plan. States that calculating an injured party’s provider/medical charges by using any method other than described by statute amounts to an unfair claim settlement practice.	Opposed	Died in House Health Cmte,

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HB72 - Audiology Modifications	This bill modifies the audiology practice act in the NC General Statutes. Negotiations have been ongoing with the audiologists. Final amendments were submitted to the audiologists for modification of the pending bill. Those changes are still pending.	Opposed	Died in House Health Cmte.
SB711 - NC Compassionate Care Act	Defines cannabis-related terms. Requires DHHS to issue registry identification cards to qualified patients/caregivers. Establishes processes for the application for, and issuance of, registry identification cards. Provides protections for the medical use of cannabis for registry identification cardholders. Establishes the Medical Cannabis Production Commission and requires the Commission, in consultation with the NC Medical Care Commission, to adopt rules establishing qualifications and requirements for licensure of medical cannabis suppliers, for the production of medical cannabis by a medical cannabis supplier, and for the proper regulation of medical cannabis centers and cannabis products facilities operated by medical cannabis suppliers. Requires the Medical Cannabis Production Commission to establish a medical cannabis supply system. Establishes requirements for a Medical Cannabis Supplier License.	Opposed	Died in House Rules Cmte.
HB703 - Breast Cancer Diag Imaging Parity	This bill would eliminate out-of-pocket costs for medically-necessary diagnostic breast imaging following an abnormal mammogram result or other medically-necessary purpose.	Support	Died in Senate Rules Cmte.
HB1039 - Medical Debt De-Weaponized Act	Requires all large health care facilities to develop a written medical debt mitigation policy Requires large health care facilities to take actions before seeking payment for any emergency or medically necessary care. Specifies when patients must qualify for financial assistance under the mitigation policy and sets maximum charges depending on the patient's household income. Establishes acceptable methods for determining eligibility for financial assistance. Requires large health care facilities to publicize the mitigation policy. Prohibits medical creditors and/or medical debt collectors from taking certain specified collection actions to collect debts owed for health care services. Requires large health care facilities to post price information of their websites, including a list of gross charges for all health care services and a list of the amount that Medicare would reimburse for the health care service. Prevents a spouse from having to assume liability for the medical debt or nursing home debt of his or her spouse or any other person age 18 or older. Requires a medical creditor or medical debt collector to provide an itemized bill to the patient within 60 days of the request. Limits maximum interest rate on medical debt. Specifies requirements for medical debt payment plans. Creates a private right of action against any medical creditor or medical debt collector who violates the bill's requirements. Authorizes the Attorney General enforce the bill's requirements and requires the Attorney General to establish a complaint process for aggrieved patients.	Support	Died in House Banking, Cmte.
HB868 - Telehealth Licensure Reciprocity	This bill would permit the NC Medical Board to issue a license to practice medicine through telehealth services for licensees that meet certain requirements: (1) holds a full and unrestricted license ne in another state; (2) registers with the Board; (3) does not have any current or pending disciplinary actions; (4) has not been the subject of disciplinary action for the past five years; (5) designates a duly appointed registered agent for service of process in NC; (6) has med mal coverage which includes coverage for telehealth services to patients not located in the provider's home state; and (7) does not have an office in NC and does not currently provide in-person health care services to patients located in NC. (8) practices medicine in a manner consistent with the applicant's scope of practice and the prevailing professional standard of care.	Support	Died in House Health Cmte.

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SB380 - Interstate Medical Licensure Compact	<p>Establishes the purpose of the Compact, including a streamlined process licensure in multiple states.</p> <p>Establishes eligibility requirements for licensure through the Compact.</p> <p>Establishes application and renewal procedures.</p> <p>Establishes the Interstate Medical Licensure Compact Commission.</p> <p>Provides for rulemaking procedures.</p> <p>Provides dispute resolution procedures.</p> <p>Requires the Commission to establish a coordinated database and reporting system.</p> <p>Establishes procedures for disciplinary actions.</p> <p>Requires licensure reinstatement procedures following disciplinary.</p>	Support	Died in Senate Rules Cmte.
SB666 – Update Reqs./Advance Health Directives	<p>This bill:</p> <ul style="list-style-type: none"> • Allows for a health care power of attorney to be valid if it is signed in the presence of two qualified witnesses <u>or</u> acknowledged before a notary public. • Makes conforming changes to the statutory health care power of attorney form. • Allows an advance health directive to be valid if it has been signed in the presence of a notary public <u>or</u> two witnesses. • Makes conforming changes to the statutory Advance Directive form. <p>Allows health care powers of attorney and advance health directives to be electronically filed with the NC Secretary of State.</p>	Support	Died in House Rules Cmte.