

2008 Legislative Services Update

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
Indiana	Scope of Practice	Failed	HB	1317	Provides that a health practitioner may not perform spinal manipulation or spinal adjustment unless the practitioner has statutory authority to differentially diagnose and meets certain educational requirements. Excludes physicians or osteopaths from the requirements.
Indiana	Miscellaneous	Passed	SB	157	Changes the term methadone treatment to opioid treatment concerning certification of opiate addiction treatment facilities. Establishes requirements for operation of an opioid treatment program.
Indiana	Miscellaneous	Passed	HB	1144	States that certain persons who discover or have custody of the body of a deceased person under certain circumstances and who knowingly or intentionally fail to report the body of the deceased person to a public safety officer, coroner, physician, or 911 telephone call center within three hours after finding the body have committed failure to report a dead body, which is a Class A misdemeanor.
Indiana	Miscellaneous	Failed	SB	146	Requires a physician who is set to perform an abortion to inform the pregnant woman in writing that adoption alternatives are available, that there are physical risks to the woman in having an abortion, and that an embryo formed by the fertilization of a human ovum by a human sperm immediately begins to divide and grow as human physical life. A physician may not perform an abortion unless the physician has privileges at a hospital located in the county or adjacent county in which the abortion is performed. The physician who performs an abortion shall notify the patient of the location of the hospital at which the physician has privileges and where the patient may receive follow-up care by the physician if complications arise.
Indiana	Scope of Practice	Failed	SB	150	Allows a physical therapist to provide treatment to a patient who was previously referred to the physical therapist for the same condition if the referral was given not more than six months before the request for the later treatment and the physical therapist contacts the referring provider within three days. Also allows a physical therapist to evaluate a patient without a referral, but requires the physical therapist to contact the patient's appropriate provider and obtain a referral before providing treatment.
Indiana	Emergency Preparedness	Failed	SB	363	Enacts the Uniform Emergency Health Practitioners Act. Provides for the creation of a registration system that out-of-state practitioners may use before or during a disaster, that may coincide with existing state or federal registration systems, and allows, upon registration, a health practitioner to contribute professional skills to existing organized disaster efforts.

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Indiana	Medical Board Organization & Authority	Passed	SB	302	States that a member of a board, committee, or commission may participate in an emergency meeting of the board, committee, or commission to consider disciplinary sanctions using a means of communication that permits all other members participating in the meeting and all members of the public physically present at the place where the meeting is conducted to simultaneously communicate with each other during the meeting. A member who participates in a meeting is considered to be present at the meeting, shall be counted for purposes of establishing a quorum, and may vote at the meeting. Makes changes to initial and renewal certificates issued by the Medical Licensing Board. Before a board makes a determination regarding the refusal to issue a license, issue an unlimited license, or issue a probationary license to an applicant for licensure by examination or endorsement, the board may require the applicant to engage in full-scale assessments, formal training programs, supervised practice arrangements, formal testing, or other proof of competence. Establishes requirements for the board to issue a provisional license. States that licenses expire biennially on the date established by the Medical Licensing Board instead of on June 30 of each odd numbered year.
Indiana	Physician Practice	Failed	HB	1342	Requires health providers to, not later than January 1, 2010, use an electronic health records system that meets stipulated requirements for purposes of billing and receipt of claim payment for services rendered by the health provider.
Michigan	Managed Care	Pending	SB	1072	Requires all health insurers, health care corporations, health maintenance organizations, and credentialing intermediaries to use the uniform, standard, electronic health care professional credentialing application developed pursuant to the public health code when credentialing or recredentialing a health care professional.
Michigan	Pain Management/Prescription Monitoring	Pending	I	1	Provides legislative intent to allow under state law the medical use of marihuana and to provide protections for such use.
Michigan	Scope of Practice	Pending	SB	921	Provides for licensure of occupational therapists and occupational therapy assistants and defines occupational therapy services.
Michigan	Scope of Practice	Pending	SB	908	Revises scope of practice for chiropractors.
Michigan	Scope of Practice	Pending	SB	1167	Amends the definition of the practice of physical therapy and establishes parameters for practice as a physical therapist assistant.
Michigan	Managed Care	Pending	HB	5743	Requires all health insurers, health care corporations, health maintenance organizations, and credentialing intermediaries to use the uniform, standard, electronic health care professional credentialing application developed pursuant to the public health code when credentialing or recredentialing a health care professional.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
Michigan	Medical Malpractice	Pending	HB	4708	States that a writing, statement or action expressing sympathy, compassion, commiseration or a general sense of benevolence relating to the pain, suffering or death of an individual made to the individual or to the individuals' family is inadmissible in an action for medical malpractice.
Michigan	Extending Health Care Services to Underserved Patient Populations	Pending	HB	5498	Allows for chiropractors to donate his or her expertise to treat indigent and needy individuals by expanding the special volunteer license for retired physicians to include chiropractors. Also provides that anyone who provides medical, chiropractic or dental care under a special volunteer license is not liable in a civil action for personal injury or death caused by the professional negligence or malpractice of the volunteer licensee.
Michigan	Medical Malpractice	Pending	HB	4724	Establishes a limited license that allows a person to testify as an expert witness in an action alleging medical malpractice if an applicant meets certain criteria. The holder of a limited license is not authorized to engage in the practice of a health profession and is only authorized to provide expert witness testimony. The limited license is not valid for not more than one year and is renewable. The definition of unprofessional conduct is amended to include providing false or misleading testimony as an expert witness in an action alleging medical malpractice. Further, the definitions of the practice of medicine and the definition of the practice of osteopathic medicine and surgery are amended to include providing expert witness testimony on the appropriate standard of practice or care in an action alleging medical malpractice.
Michigan	Scope of Practice	Pending	HB	5759	Amends the practice of chiropractic.
Michigan	Managed Care	Pending	SB	1071	Requires the Department to develop a uniform, standard, electronic health care professional credentialing application not later than 9 months after the effective date of this section.
Michigan	Electronic & Internet Prescribing	Pending	HB	5474	Amends the Public Health Code by removing the prohibition in provisions regarding dispensing a prescription for a controlled substance received via electronic means from a physician prescriber in another state.
Michigan	Electronic & Internet Prescribing	Pending	SB	956	Removes provisions regarding the transmission of controlled substance prescriptions by out-of-state physician prescribers. Modifies provisions regarding individuals authorized to dispense a prescription for a controlled substance received via electronic means.
Michigan	Managed Care	Pending	HB	5742	Requires the Department to develop a uniform, standard, electronic health care professional credentialing application not later than 9 months after the effective date of this section.
Michigan	Medical Malpractice	Pending	HB	4723	Establishes a limited license that allows a person to testify as an expert witness in an action alleging medical malpractice if an applicant meets certain criteria.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
Missouri	Medical Errors/Patient Safety	Pending	SB	1264	Establishes the Patient Safety Authority to, among other duties, contract with an entity or entities to collect, analyze and evaluate data regarding reports of serious events and incidents regarding patient care, to transmit to the authority recommendations for changes in health care practices and procedures that may be instituted for the purpose of reducing the number and severity of serious events and incidents, and to directly advise reporting medical facilities of immediate changes that can be instituted to reduce serious events and incidents.
Missouri	Medical Errors/Patient Safety	Pending	SB	1216	Requires the Department of Health and Senior Services to implement a health care quality program for the purpose of making available a health care quality report card to allow consumers to compare and assess the quality of health care services.
Missouri	Miscellaneous	Pending	HB	2243	Convenes the Fibromyalgia Panel to promote fibromyalgia education and training programs for physicians and other health professionals.
Missouri	Pain Management/Prescription Monitoring	Pending	HB	2033	Establishes the Drug Monitoring Act to require each dispenser of schedule II, III, IV, or V controlled substances by electronic means to submit information regarding each dispensing of a schedule II-V drug. Dispensers are defined as persons who deliver a schedule II-V controlled substance to the ultimate user, but does not include a hospital that distributes such substances for the purpose of inpatient hospital care or dispenses prescriptions for controlled substances at the time of discharge from such facility, a practitioner or other authorized person who administers such a substance, a wholesale distributor, or an ambulatory surgical center. The Department of Health and Senior Services shall review this information, and if there is a reasonable cause to believe a violation of law or breach of professional standards may have occurred, shall notify the appropriate law enforcement or regulatory agency and provide dispensing information required for an investigation. The Department may also provide data in the drug monitoring program to persons authorized to prescribe or dispense controlled substances for the purpose of providing medical or pharmaceutical care for their patients and to any state board charged with regulating a professional that has the authority to prescribe controlled substances.
Missouri	Physician Practice	Pending	HB	2130	States that any health care provider who discovers or otherwise learns that confidential medical information regarding a patient has been improperly shared with a third party shall, within five business days of such discovery, notify the patient in writing that an unauthorized disclosure of the patient's confidential medical information to a third party has occurred.
Missouri	Pain Management/Prescription Monitoring	Pending	HB	2244	Removes references to intractable pain from the Intractable Pain Treatment Act and instead refers to pain treatment.
Missouri	Scope of Practice	Pending	HB	2116	States that no health carrier shall designate chiropractic care as specialty care or a chiropractic physician as a specialist unless the chiropractic physician is certified as a specialist by the Board of Chiropractic Examiners.

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Missouri	Scope of Practice	Pending	HB	1325	Authorizes a physician assistant or an advanced practice nurse to prescribe a schedule V controlled substance under a collaborative practice agreement.
Missouri	Extending Health Care Services to Underserved Patient Populations	Pending	HB	2413	Establishes the Insure Missouri Program to provide health care coverage through the private insurance market to low-income working adults.
Missouri	Miscellaneous	Pending	HB	2540	Amends requirements for patient surrogates and states that if an adult patient is unable to make or communicate health care treatment decisions, a health care provider shall make a reasonable effort to consult with a surrogate. Outlines procedures for providing a surrogate in cases where a patient did not designate a surrogate.
Missouri	Scope of Practice	Pending	HB	2068	Modifies scope of practice for a physical therapist.
Missouri	Scope of Practice	Pending	HB	1739	Allows a prescribing psychologist to prescribe psychotropic drugs only in good faith and in the course of professional practice.
Missouri	Medical Errors/Patient Safety	Pending	HB	1816	States that no supervisor or individual with authority to hire, fire, or discipline in a hospital or ambulatory surgical center shall retaliate or otherwise take any adverse action against an employee based on his or her protected activity, or in any manner attempt to dissuade, prevent, or interfere with an employee who wishes to engage in protected activity. Protected activities include the reporting or disclosure of any information related to alleged facility mismanagement, fraudulent activity, or billing errors, or unethical, immoral, or illegal business practices; alleged violations of federal or state laws or regulations regarding patient care, patient safety, or facility safety; or alleged violations of professional standards of conduct or accepted standards of quality patient care; or the ability of employees to perform their assigned duties consistent with professional standards of conduct or accepted standards of quality patient care.
Missouri	Scope of Practice	Pending	HB	1879	States that a pharmacist shall not interchange an antiepileptic drug without prior notification and the signed, informed consent of the prescribing practitioner and the patient.
Missouri	Scope of Practice	Pending	HB	2561	States that no person shall hold himself or herself out as a radiologist assistant or radiology practitioner assistant unless such person has been licensed by the State Board of Registration for the Healing Arts.
Missouri	Scope of Practice	Pending	HB	1600	Removes midwives as a profession regulated by the State Board of Registration for the Healing Arts. States that a midwife practicing nothing other than a service of midwifery shall not be deemed to be engaged in the practice of medicine, osteopathy, nursing, nurse-midwifery, or any other medical or healing practice.
Missouri	Scope of Practice	Pending	HB	1620	Allows advanced practice registered nurses to prescribe controlled substances in Schedules II-V if prescriptive authority is delegated by a physician under a controlled substance collaborative practice agreement.

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Missouri	Scope of Practice	Pending	SB	1043	Creates mandatory health insurance coverage for certain out-of-network chiropractic services.
Missouri	Extending Health Care Services to Underserved Patient Populations	Pending	SB	1283	Establishes the Health Cabinet to ensure that the public policy of this state relating to health is developed to promote interdepartmental collaboration and program implementation in order that services designed for health are planned, managed, and delivered in a holistic and integrated manner to improve the health of Missourians. States that every student shall participate in daily physical education for the entire school year. Creates the healthy workplace recognition program for the purpose of granting official state recognition to employers with more than fifty employees for excellence in promoting health, wellness, and prevention. Recognizes and encourages the delivery of health care via telehealth as a safe, practical and necessary practice and states that no health care provider or operator of an originating site shall be disciplined for or discouraged from using telehealth. Requires a telehealth practitioner to create and maintain an electronic medical record on each patient that the practitioner treats using telehealth.
Missouri	Medical Errors/Patient Safety	Pending	HB	2450	Requires as a part of each hospital's quality assurance and quality improvement program, every hospital shall create a nursing advisory board to establish a standardized acuity-based patient classification system for each individual direct-care unit in the hospital.
Missouri	Scope of Practice	Perfected	SB	724	Grants advanced practice registered nurses who hold a certificate of controlled substance prescriptive authority the ability to prescribe controlled substances listed in schedules II, III, IV and V under a collaborative practice agreement with a physician.
Missouri	Physician Practice	Pending	HB	1504	States that any licensed physician may utilize, but shall not be required to utilize, expedited partner therapy for the management of the partners of persons with Chlamydia or gonorrhea. A licensed physician utilizing such therapy may prescribe and dispense medications for the treatment of Chlamydia or gonorrhea for an individual who is the partner of a person with Chlamydia or gonorrhea and who does not have an established physician/patient relationship with such physician.
Missouri	Medical Errors/Patient Safety	Pending	HB	2394	States that no patient or consumer of health care services who requests an estimate of the cost of such services prior to the provision of such services shall be required to pay for such health care services unless the consumer has in fact been provided with such estimate of costs.

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Missouri	Pain Management/Prescription Monitoring Programs	Perfected	SB	732	Establishes the Drug Monitoring Act to require each dispenser of schedule II, III, IV, or V controlled substances by electronic means to submit information regarding each dispensing of a schedule II-V drug. Dispensers are defined as persons who deliver a schedule II-V controlled substance to the ultimate user, but does not include a hospital that distributes such substances for the purpose of inpatient hospital care or dispenses prescriptions for controlled substances at the time of discharge from such facility, a practitioner or other authorized person who administers such a substance, a wholesale distributor, or an ambulatory surgical center. The Department of Health and Senior Services shall review this information, and if there is a reasonable cause to believe a violation of law or breach of professional standards may have occurred, shall notify the appropriate law enforcement or regulatory agency and provide dispensing information required for an investigation. The Department may also provide data in the drug monitoring program to persons authorized to prescribe or dispense controlled substances for the purpose of providing medical or pharmaceutical care for their patients and to any state board charged with regulating a professional that has the authority to prescribe controlled substances.
Missouri	Scope of Practice	Pending	SB	1021	Creates the Board of Direct-Entry Midwives to license such practitioners and defines the practice of direct-entry midwifery.
Missouri	Scope of Practice	Pending	HB	1634	Creates the Registered Surgical Technologist Title Protection Act to regulate the practice of registered surgical technologist under the State Board of Registration for the Healing Arts.
New York	Miscellaneous	Pending	AB	8980	Requires pediatricians, physicians employed in an emergency room, registered nurses, and registered physician assistants employed by a pediatrician or in an emergency room to report suspected child abuse and maltreatment to complete two and one-half hours of coursework or training regarding the identification and reporting of child abuse.
New York	Miscellaneous	Pending	AB	7222	Provides that physicians who agree to practice in the specialty of geriatric medicine may be awarded a physician loan forgiveness award up to \$15,000 per year for a maximum of five years.
New York	Physician Practice	Pending	AB	8730	Relates to expedited partner therapy for person infected with chlamydia trachomatis. The bill allows for a health care practitioner who diagnoses a sexually transmitted chlamydia trachomatis infection in an individual patient to prescribe, dispense and furnish prescription antibiotics to that patient's sexual partner or partners without examination of that partner(s).
New York	Miscellaneous	Pending	SB	4705	Cited as the Patient Disclosure for Eye Surgery Act. The bill requires patient disclosure of and consent to co-management agreements for postoperative eye surgery care and provides that an operating physician be physically available to a patient for postoperative care for at least 120 hours after the surgery is completed.

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New York	Miscellaneous	Pending	AB	8717	Cited as the Patient Disclosure for Eye Surgery Act. The bill requires patient disclosure of and consent to co-management agreements for postoperative eye surgery care and provides that an operating physician be physically available to a patient for postoperative care for at least 120 hours after the surgery is completed.
New York	Miscellaneous	Pending	SB	569	Establishes safeguards to maintain the integrity of medical records and information and prevents or deters unauthorized access to this information.
New York	Physician Practice	Pending	SB	6210	Relates to expedited partner therapy for person infected with chlamydia trachomatis. The bill allows for a health care practitioner who diagnoses a sexually transmitted chlamydia trachomatis infection in an individual patient to prescribe, dispense and furnish prescription antibiotics to that patient's sexual partner or partners without examination of that partner(s).
New York	Physician Practice	Pending	SB	1509	Establishes factors to be considered when a health care practitioner, upon examination, has a different opinion from an applicant for social services treating health care practitioner's opinion as to an applicant's disability.
New York	Miscellaneous	Pending	AB	4734	Allows prescriptions to be written for a three-month supply of medication, including controlled substances, used to treat or alleviate any chronic illness or condition. Requires insurers to provide coverage for such three-month supplies in the same manner coverage is provided for other prescriptions.
New York	Miscellaneous	Pending	SB	5294	Allows prescriptions to be written for a three-month supply of medication, including controlled substances, used to treat or alleviate any chronic illness or condition. Requires insurers to provide coverage for such three-month supplies in the same manner coverage is provided for other prescriptions.
New York	Physician Practice	Pending	AB	7946	Establishes factors to be considered when a health care practitioner, upon examination, has a different opinion from an applicant for social services treating health care practitioner's opinion as to an applicant's disability.
New York	Miscellaneous	Pending	AB	7721	Requires consent for visual observation of patients with disabilities.
New York	Miscellaneous	Amended	AB	5486	Requires every physician, registered nurse, licensed practical nurse, clinical laboratory technologist, and pharmacist to complete coursework or training regarding infection control and barrier precautions for the purposes of diagnosing and treating Lyme disease. Initial training or coursework must be undertaken by July 1, 2008, and additional training or coursework completed every four years thereafter.

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New York	Miscellaneous	Amended	AB	7468	Requires any pharmaceutical drug manufacturer or pharmaceutical drug wholesaler, including any employee or agent of such manufacturer or wholesaler, that makes any gift, whether in the form of money, service, loan, travel, entertainment, hospitality, thing or promise, or in any other form, to a health care provider to report the gift to the Commissioner of Health.
New York	Miscellaneous	Pending	SB	765	Requires each college of medicine in the state to include one or more cultural competency courses and would require the completion of those courses as a condition of receiving a diploma from the institution. If a person applying for licensure in the state completed their medical education prior to this requirement, they must submit documentation to the Board that they have completed a minimum of 16 hours of cultural competency training. If a physician is already licensed to practice medicine in the state, they must send to the Board documentation of completion of 16 hours of cultural competency training as a condition of relicensure.
New York	Miscellaneous	Pending	AB	6388	Requires each college of medicine in the state to include one or more cultural competency courses and would require the completion of those courses as a condition of receiving a diploma from the institution. If a person applying for licensure in the state completed their medical education prior to this requirement, they must submit documentation to the Board that they have completed a minimum of 16 hours of cultural competency training. If a physician is already licensed to practice medicine in the state, they must send to the Board documentation of completion of 16 hours of cultural competency training as a condition of relicensure.
New York	Miscellaneous	Pending	SB	928	Requires pediatricians, physicians employed in an emergency room, registered nurses, and registered physician assistants employed by a pediatrician or in an emergency room to report suspected child abuse and maltreatment to complete two and one-half hours of coursework or training regarding the identification and reporting of child abuse.
New York	Physician Practice	Pending	AB	5200	Relates to access to patient information, medical records and clinical records. Stipulates that practitioners may charge for inspections or copies of medical and clinical records, and establishes fees for patients and other qualified persons.
New York	Miscellaneous	Amended	SB	2971	Requires any pharmaceutical drug manufacturer or pharmaceutical drug wholesaler, including any employee or agent of such manufacturer or wholesaler, that makes any gift, whether in the form of money, service, loan, travel, entertainment, hospitality, thing or promise, or in any other form, to a health care provider to report the gift to the Commissioner of Health.

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New York	Physician Profiling/Credentialing	Pending	SB	1407	Establishes the Board for Recredentialing of Selected Physician Specialties to recredential and develop mechanisms to recredential all licensed physicians who practice obstetrics, gynecology, anesthesiology or pediatrics starting June 1, 2007. The Board shall also require physicians who are deemed to not qualify for recredentialing to be complete a remedial training program. Further, every licensed physician shall obtain and maintain medical malpractice insurance.
New York	Scope of Practice	Amended	AB	5847	Amends the Worker Compensation law to allow nurse practitioners to provide treatment to injured employees.
New York	Scope of Practice	Pending	SB	2467	Amends the definition of the practice of registered professional nursing by a registered nurse anesthetist.
New York	Scope of Practice	Pending	AB	5201	Amends the definition of the practice of registered professional nursing by a registered nurse anesthetist.
New York	Scope of Practice	Amended	SB	2426	Amends the definition of the practice of pharmacy and allows a licensed pharmacist to enter into a collaborative drug therapy management protocol with a physician or nurse practitioner.
New York	Scope of Practice	Amended	AB	3933	Amends the definition of the practice of pharmacy and allows a licensed pharmacist to enter into a collaborative drug therapy management protocol with a physician or nurse practitioner.
New York	Scope of Practice	Pending	AB	2924	States that only a person licensed or otherwise authorized to practice medicine or registered to perform medical services or certified to practice as a nurse practitioner, or licensed to practice as a midwife, may issue an order or a referral for the administration of ultrasound upon a pregnant woman.
New York	Scope of Practice	Pending	SB	4456	Amends the definition of the practice of professional nursing by a registered nurse anesthetist and states that the practice of professional nursing by a registered nurse anesthetist shall include the administration of anesthesia to a patient but only under the supervision of an anesthesiologist who is immediately available.
New York	Scope of Practice	Amended	AB	2744	Amends the definition of the practice of professional nursing by a registered nurse anesthetist and states that the practice of professional nursing by a registered nurse anesthetist shall include the administration of anesthesia to a patient but only under the supervision of an anesthesiologist who is immediately available.
New York	Scope of Practice	Pending	SB	1312	Amends the definition of the practice of pharmacy and allows a pharmacist to execute a non-patient specific regimen prescribed or ordered by a licensed physician or certified nurse practitioner.
New York	Scope of Practice	Pending	AB	4935	Amends the definition of the practice of pharmacy and allows a pharmacist to execute a non-patient specific regimen prescribed or ordered by a licensed physician or certified nurse practitioner.

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New York	Scope of Practice	Pending	AB	2140	Amends the definition of the practice of pharmacy and allows a pharmacist to execute a non-patient specific regimen prescribed or ordered by a licensed physician or certified nurse practitioner.
New York	Continuing Medical Education (CME)	Pending	AB	10537	Requires every physician and other designated health care providers who provide direct frontline medical services to patients to, on or before July 1, 2009 and every two years thereafter, complete course work or training regarding cultural awareness and competence in the nondiscriminatory provision of medical services. The Department shall provide an exemption from this requirement to anyone who requests such an exemption and who meets other stipulations.
New York	Miscellaneous	Pending	SB	5522	Establishes procedures for making medical treatment decisions on behalf of persons who lack the capacity to decide about treatment for themselves including the requirement that health care providers make reasonable efforts to determine whether the patient has appointed a health care agent.
New York	Resident Licensure/Minimum Standards for Postgraduate Training	Pending	AB	2266	Requires that any hospital that receives any reimbursement from this article and which offers allopathic or osteopathic medical resident training in obstetrics, gynecology, internal medicine or women's health to provide training that follows the Accreditation Council on Graduate Medical Education or the American Osteopathic Association special requirements for obstetrics-gynecology. Part of this residency training shall include experience with induced abortions.
New York	Physician Practice	Pending	AB	9195	Requires health care practitioners to offer of testing for HIV to all patients without regard to perceived individual risk to help simplify, destigmatize, and universalize the offer of HIV testing.
New York	Outpatient/Office-Based Surgery	Pending	AB	6827	Requires physicians to provide certain disclosures prior to office-based surgery.
New York	Medical Malpractice	Amended	SB	5256	Amends the civil practice law and rules in relation to ex parte interviews stating that no party or anyone acting on behalf of a party may either directly or indirectly conduct ex parte interviews with the treating physicians or other health care providers of any other party.
New York	Miscellaneous	Pending	AB	4452	Establishes safeguards to maintain the integrity of medical records and information and prevents or deters unauthorized access to this information.
New York	Miscellaneous	Pending	SB	4997	Enacts the New York Birth-Related Neurological Injury Compensation Act and states the determination of whether a substantial handicap exists shall be made by the State Board of Professional Medical Conduct.

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New York	Miscellaneous	Pending	SB	4179	Amends the public health law, in relation to penalties for failure to screen lead exposure levels in children and pregnant women. Any physician required by subdivision 2 of section 1370-c who willfully fails to screen pregnant women and children for exposure to lead levels shall be guilty of a class A misdemeanor, and who knowingly and willfully fails to shall be civilly liable for the damages caused by such failure.
New York	Miscellaneous	Pending	SB	4154	Provides that certain information concerning standardized test scores shall be provided to all test subjects who do not sign a waiver.
New York	Miscellaneous	Pending	SB	3451	Prohibits a medical doctor from stating that he or she is board certified or eligible for certification by a private or public board or parent association unless the board or association is an American Board of Medical Specialities member board, or a member board of the American Osteopathic Association, or is a board or association with equivalent requirements approved by that physician and surgeon's licensing board.
New York	Miscellaneous	Pending	SB	2601	Provides that any question appearing on an examination prepared or administered by the Education Department for the purpose of licensing professionals under their jurisdiction, on the test for licensing of real estate professionals, and on tests for the licensing by the Insurance and other State departments shall be made available for review pursuant to the State's Truth in Testing Law.
New York	Miscellaneous	Pending	SB	1423	Further clarifies who may use the term doctor in advertisements.
New York	Miscellaneous	Pending	SB	1257	Prohibits human reproductive cloning and seeks to facilitate stem cell research.
New York	Physician Practice	Pending	SB	1027	States that a physician shall not charge for any service rendered during a period of seventy-two hours from the time such service was rendered if it was rendered as free or as a medical emergency.
New York	Physician Practice	Pending	SB	6326	Requires health care practitioners to offer of testing for HIV to all patients without regard to perceived individual risk to help simplify, destigmatize, and universalize the offer of HIV testing.
New York	Scope of Practice	Amended	AB	282	Provides for perfusionist licensing, qualifications, practice of perfusion and limited permits.
New York	Emergency Preparedness	Pending	AB	7684	Requires the development of a comprehensive plan to provide a coordinated response in the event of a public health emergency, including giving the Public Health Authority the emergency power to license and appointment health personnel during a health care emergency. During a health emergency, in-state health care providers will be required to assist in the performance of vaccination, treatment and examination, out-of-state providers may be appointed for a limited or unlimited amount of time, and the Public Health Authority may waive any or all licensing requirements, permits and fees.

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New York	Medical Errors/Patient Safety	Pending	SB	2810	Requires the Commissioner of Health to develop and implement a system for color-coding standardization of patient wristbands of medical safety conditions for use in all health care facilities.
New York	Medical Errors/Patient Safety	Pending	AB	4963	Requires the Commissioner of Health to develop and implement a system for color-coding standardization of patient wristbands of medical safety conditions for use in all health care facilities.
New York	Medical Errors/Patient Safety	Pending	AB	3790	Requires a health care provider to disclose to his or her patient or patient's representative any error in diagnosis, treatment, or other service by the health care provider that the provider knows has caused substantial harm or significant risk of substantial harm to the patient. A health care provider shall not be liable for failure to disclose an error, harm or risk of harm if the provider reasonably believes that another health care provider has already made such disclosure.
New York	Medical Board Organization & Authority	Pending	SB	4761	Provides changes related to expert witness disclosure and timelines in the proceedings and administrative review by the State Board for Professional Medical Conduct.
New York	Medical Board Organization & Authority	Pending	SB	3901	Requires each board for the professions to include three public representatives.
New York	Medical Board Organization & Authority	Pending	SB	1011	Requires the Commissioner of Health to immediately refer a report identifying claims of medical malpractice to the Board for Professional Medical Conduct for an expedited review to determine whether the claims involve professional misconduct.
New York	Medical Board Organization & Authority	Amended	AB	7959	States that no otherwise qualified applicant shall be denied a license, certificate, limited permit or registration by reason of his or her lack of citizenship or immigration status, and no person holding a license, certificate, limited permit or registration shall be required to surrender or otherwise relinquish it, or have it revoked or suspended by reason of his or her lack of citizenship or immigration status.
New York	Medical Board Organization & Authority	Amended	AB	7899	Establishes the Consumer Assistance Unit on Professional Medical Conduct to act as a liaison for consumers to assist them in dealing with the Office of Professional Medical Conduct. Requires the Office of Professional Medical Conduct to conduct a professional misconduct investigation of a provider upon receipt of a certain number of reports of incidents within specified time limits. Further, medical experts in cases referred to an investigation committee involving issues of clinical practice must be qualified by sufficient training or experience to render an opinion on the matter at issue. Further, a health care provider is required to disclose to a patient any error in diagnosis, treatment or other service by the provider that the provider knows has caused substantial harm or significant risk of substantial harm to the patient.
New York	Medical Board Organization & Authority	Pending	AB	7840	Includes the failure to fully cooperate and participate in the quality assurance and peer review programs activities, requirements and procedures as grounds for unprofessional conduct.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
New York	Emergency Preparedness	Pending	AB	9203	States that moneys annually deposited in the state emergency medical services training account can be fully and verifiably used to assure timely and effective responses to state and regional emergency medical services systems and agencies, emergency departments and services, and trauma systems, centers and stations to medical, traumatic and pediatric emergencies, especially in natural and human-made disasters.
New York	Pain Management/Prescription Monitoring	Pending	AB	2974	Establishes a grant program for palliative care certified medical schools to enhance the study of palliative care, increase the opportunities for undergraduate medical education in palliative care, and encourage the education of physicians in palliative care. A grant program is also established for graduate medical education to establish or expand education in palliative care and to increase the opportunity for education in palliative care in hospital-based palliative care programs or non-hospital-based care sites. The Palliative Care Education and Training Council would also be established.
New York	Emergency Preparedness	Pending	SB	3805	Requires the development of a comprehensive plan to provide a coordinated response in the event of a public health emergency, including giving the Public Health Authority the emergency power to license and appointment health personnel during a health care emergency. During a health emergency, in-state health care providers will be required to assist in the performance of vaccination, treatment and examination, out-of-state providers may be appointed for a limited or unlimited amount of time, and the Public Health Authority may waive any or all licensing requirements, permits and fees.
New York	Medical Errors/Patient Safety	Pending	AB	5525	Requires the Commissioner of Health to make regulations to establish and ensure safe staffing standards for all health care facilities that apply only to registered professional nurses, licensed practical nurses and assistive nursing personnel.
New York	Complementary and Alternative Medicine	Pending	SB	4666	Creates the Office of Complementary and Alternative Medicine to engage in coordinated research concerning CAM, including what products and services are available to patients, how to determine the quality of such products and services, and how such products and services may be effectively integrated with more mainstream health care; provide health care professionals and patients with reliable and useful information about CAM; develop recommendations concerning the education and training of licensed health care practitioners in CAM; work with the Cam Council as a liaison and advocate on CAM matters; host public hearings and roundtable discussions as necessary; and apply for grants.
New York	Complementary and Alternative Medicine	Pending	AB	8733	Cited as the Complementary and Alternative Health Freedom of Access Act. The bill is designed to protect individual's freedom of access to complementary and alternative health care information and treatments, and access to non-licensed complementary and alternative health care practitioners of their choice. The bill provides for the definition of complementary and alternative health care practices.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
New York	Complementary and Alternative Medicine	Pending	AB	5176	Establishes the Board for Naturopathic Medicine to license naturopathic physicians. Defines naturopathic medicine or naturopathy and naturopathic physical medicine.
New York	Complementary and Alternative Medicine	Pending	SB	2790	Establishes the Board for Naturopathy to license naturopathic physicians. Defines the practice of naturopathy.
New York	Complementary and Alternative Medicine	Pending	AB	4966	Establishes the Board for Naturopathy to license naturopathic physicians. Defines the practice of naturopathy.
New York	Scope of Practice	Passed	SB	6641	Requires that nebulizers shall be administered by a school nurse or physician pursuant to the student's patient specific order.
New York	Medical Board Organization & Authority	Pending	AB	9631	Requires the Director of the Office of Professional Medical Conduct to prepare a written finding for every complaint received by the Office and send a copy to the licensee and the complainant. Requires an investigation committee to be formed within thirty days of the interview of the licensee, instead of the current ninety day requirement. The files of the Office relating to the investigation of possible instances of professional misconduct shall not be confidential and shall be subject to disclosure at the request of any person. Requires the findings, conclusions, determination and the reasons for the determination of the committee to be served on the licensee, the department, and any hospitals, primary practice settings or health care plans within ten days of the last day of hearing, instead of the previous sixty day allowance. Further requires violation committee proceedings to be commenced within one year, instead of the previous three year stipulation, and increases the fine amount allowable from a maximum of five-hundred dollars to five-thousand dollars. A licensee who is subject to monitoring shall be required to notify all patients in writing of this condition, including any findings of misconduct and any other penalties imposed. The OPMC shall maintain an official website which shall provide clear and up to date information regarding any cases where a complaint against a licensee where the director of such office has determined that an investigation is warranted.
New York	Physician Practice	Pending	AB	9630	States that a health care practitioner may administer immunization against human papillomavirus to a person under the age of eighteen years without the consent or knowledge of the parents or guardian of such person, if such person has capacity to consent and consents to such immunization.
New York	Miscellaneous	Pending	AB	9608	Creates the crime of reckless infection of a patient with a communicable disease by a health care provider as a Class E felony and requires the Department of Health to notify the patient or patients of a health care provider if such provider is determined to have exposed the patient or patients to a communicable disease.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
New York	Medical Board Organization & Authority	Pending	AB	9602	Requires the Director of the Office of Professional Medical Conduct to meet with the complainant, when requested, to review materials to be considered by the board in its review of suspected professional medical misconduct. Further requires at least twenty-five percent of a committee on professional misconduct to be non-medical personnel.
New York	Extending Health Care Services to Underserved Patient Populations	Amended	AB	9586	Amends provisions of the health care practitioner volunteer program to state that a health care practitioner volunteer shall be deemed to be an employee with respect to any acts and omissions that occurred or allegedly occurred within the scope of his or her participation in such program.
New York	Emergency Preparedness	Pending	AB	8729	Enacts the State Emergency Health Powers Act. It provides for the Public Health Authority to exercise certain emergency powers regarding the licensing and appointment of in-state and out-of-state health personnel, and it further establishes procedures for dissemination of information to the public including the means of the dissemination, the languages of the information and the accessibility of information for individuals with disabilities.
New York	Scope of Practice	Amended	SB	37	Provides for perfusionist licensing, qualifications, practice of perfusion and limited permits.
New York	Miscellaneous	Pending	SB	3896	Requires the Board of Medicine to work with the Board of Nursing and the Commissioner of Health to develop policies and procedures to achieve certain requirements concerning postpartum depression.
New York	Miscellaneous	Pending	AB	3726	Requires the Board of Medicine to work with the Board of Nursing and the Commissioner of Health to develop policies and procedures to achieve certain requirements concerning postpartum depression.
New York	Miscellaneous	Pending	AB	3337	Requires a governing body of a hospital to adopt uniform accreditation requirements regarding the extension of professional privileges to physicians, podiatrists, optometrists or dentists licensed in good standing.
New York	Miscellaneous	Pending	SB	229	Requires the Commissioner of Health to notify the patients of record of a licensee upon the revocation, annulment, suspension or surrender of that licensee's medical license for professional misconduct that is not of a minor or technical nature.
New York	Miscellaneous	Pending	AB	2602	Requires the Commissioner of Health to notify the patients of record of a licensee upon the revocation, annulment, suspension or surrender of that licensee's medical license for professional misconduct that is not of a minor or technical nature.
New York	Miscellaneous	Pending	AB	738	Establishes a Task Force on Medical Record Confidentiality by the Commissioner of Health; requires such task force to review issues related to the disposition or transference of medical records when a health care practitioner closes, sells or otherwise disposes of his or her practice or when a health care practitioner dies or abandons his or her practice.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
New York	Pain Management/Prescription Monitoring	Amended	AB	6811	States that a health care practitioner shall not be subject to professional discipline or criminal liability for ordering, prescribing, or administering pain-relieving medications for the purpose of alleviating or controlling pain when practicing within the practitioner's scope of practice and in accordance with the reasonable standard of care of the practitioner's profession, including an accepted guideline, even if the quantity or frequency of administration exceeds the standard dosage of the medication. Nothing within this article shall prohibit professional discipline or criminal prosecution of a practitioner for failure to comply with applicable federal or state law.
New York	Pain Management/Prescription Monitoring	Pending	SB	5187	Establishes a grant program for palliative care certified medical schools to enhance the study of palliative care, increase the opportunities for undergraduate medical education in palliative care, and encourage the education of physicians in palliative care. A grant program is also established for graduate medical education to establish or expand education in palliative care and to increase the opportunity for education in palliative care in hospital-based palliative care programs or non-hospital-based care sites. The Palliative Care Education and Training Council would also be established.
New York	Pain Management/Prescription Monitoring	Pending	SB	597	Establishes a grant program for palliative care certified medical schools to enhance the study of palliative care, increase the opportunities for undergraduate medical education in palliative care, and encourage the education of physicians in palliative care. A grant program is also established for graduate medical education to establish or expand education in palliative care and to increase the opportunity for education in palliative care in hospital-based palliative care programs or non-hospital-based care sites. The Palliative Care Education and Training Council would also be established.
New York	Pain Management/Prescription Monitoring	Pending	SB	581	Establishes a grant program for palliative care certified medical schools to enhance the study of palliative care, increase the opportunities for undergraduate medical education in palliative care, and encourage the education of physicians in palliative care. A grant program is also established for graduate medical education to establish or expand education in palliative care and to increase the opportunity for education in palliative care in hospital-based palliative care programs or non-hospital-based care sites. The Palliative Care Education and Training Council would also be established.
New York	Pain Management/Prescription Monitoring	Pending	AB	3016	Establishes a grant program for palliative care certified medical schools to enhance the study of palliative care, increase the opportunities for undergraduate medical education in palliative care, and encourage the education of physicians in palliative care. A grant program is also established for graduate medical education to establish or expand education in palliative care and to increase the opportunity for education in palliative care in hospital-based palliative care programs or non-hospital-based care sites. The Palliative Care Education and Training Council would also be established.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
New York	Medical Errors/Patient Safety	Pending	AB	5196	Requires certain health facilities to disclose to the public information regarding nurse staffing and patient outcomes.
New York	Outpatient/Office-Based Surgery	Amended	AB	7948	Defines office-based surgery and requires licensee practices in which office-based surgery is performed to obtain and maintain full accredited status. Licensees shall report adverse events within one business day of the occurrence. The Commissioner of Health shall enter into agreements with accrediting agencies to report, at a minimum, aggregate data on adverse events for all office-based surgical practices accredited by the agencies to the department.
New York	Medical Errors/Patient Safety	Pending	SB	1267	Requires certain health facilities to disclose to the public information regarding nurse staffing and patient outcomes.
New York	Medical Malpractice	Amended	AB	8691	Amends the civil practice law and rules in relation to ex parte interviews stating that no party or anyone acting on behalf of a party may either directly or indirectly conduct ex parte interviews with the treating physicians or other health care providers of any other party.
New York	Medical Malpractice	Amended	SB	4149	Relates to expert witness testimony in a medical malpractice case. Requires each party to identify each person expected to be called as an expert witness and to disclose in reasonable detail the subject matter on which each expert is expected to testify, the substance of the facts and opinions, the qualifications of each expert witness and a summary of the grounds for each expert's opinions. Additionally, each court appointed medical expert must meet the following requirements: (1) is licensed to practice in at least one state in the same profession as the defendant; (2) is trained and experienced in the same discipline or school of practice as the defendant; (3) if the defendant is certified, the expert must be certified in the same specialty; and (4) within five years of the date of the alleged occurrence giving rise to the claim, was in active medical practice in the same discipline or school of practice as the defendant.
New York	Medical Malpractice	Pending	SB	2144	Relates to expert witness testimony in a medical malpractice case. Requires each party to disclose to the other parties the identities of each expert witness and for the expert witness to file a report of all opinions to be expressed and the basis and reasons therefore.
New York	Medical Malpractice	Pending	AB	3139	Relates to expert witness testimony in a medical malpractice case. Requires each party to disclose to the other parties the identities of each expert witness and for the expert witness to file a report of all opinions to be expressed and the basis and reasons therefore.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
New York	Medical Malpractice	Amended	AB	8066	Relates to expert witness testimony in medical malpractice cases. Requires each party to identify each person expected to be called as an expert witness and shall disclose in reasonable detail the subject matter on which each expert is expected to testify, the substance of the facts and opinions, the qualifications of each expert witness and a summary of the grounds for each expert's opinions. Additionally, each court appointed medical expert must meet the following requirements: (1) is licensed to practice in at least one state in the same profession as the defendant; (2) is trained and experienced in the same discipline or school of practice as the defendant and can demonstrate by competent evidence that, as a result of training, education, knowledge, and experience in the evaluation, diagnosis, and treatment of the disease or injury which is the subject of the lawsuit; (3) if the defendant is certified, the expert must be certified in the same specialty; and (4) within five years of the date of the alleged occurrence giving rise to the claim, was in active medical practice in the same discipline or school of practice as the defendant.
New York	Medical Malpractice	Pending	AB	6977	Requires licensed health care professionals and hospitals to make available to patients and prospective patients a printed copy of any medical malpractice convictions or information.
New York	Medical Malpractice	Amended	AB	5995	Provides for the reporting of medical malpractice to the office of professional medical conduct; requires the court to notify the office of professional misconduct and a physician's place or places of employment upon the filing of a felony complaint against a physician filed in this state; and requires the court to notify the office of professional misconduct upon the filing of a misdemeanor complaint against a physician filed in this state.
New York	Medical Malpractice	Pending	SB	6534	Requires the reporting of medical malpractice to the Office of Professional Medical Conduct (OPMC). The bill states that at any time, if the OPMC has accrued a total of 3 reports relating to separate incidents concerning one licensee in any five consecutive years, the OPMC shall commence a professional misconduct investigation. Also states the if the OPMC accrues a total of 5 reports relating to separate incidents concerning one licensee in any two consecutive years, the OPMC shall commence a professional misconduct investigation. Further, requires every medical malpractice insurance company engaged in the state to report any disposition, whether by judgment or settlement, to report to the OPMC within 30 days of such disposition.
New York	Medical Errors/Patient Safety	Pending	SB	5648	Encourages cooperative, collaborative and integrative arrangements among general hospitals, among physicians, and among general hospitals and physicians involving clinical integration in order to seek improvements and efficiencies in health care and reduce medical errors.
New York	Medical Errors/Patient Safety	Pending	AB	8106	Encourages cooperative, collaborative and integrative arrangements among general hospitals, among physicians, and among general hospitals and physicians involving clinical integration in order to seek improvements and efficiencies in health care and reduce medical errors.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
New York	Miscellaneous	Pending	AB	4043	Requires a physician or surgeon to inform a surgery patient, prior to performing a surgical procedure, of the positive and negative aspects of the options of receiving autologous blood transfusions, designated blood transfusions, or homologous blood transfusions.
New York	Scope of Practice	Pending	AB	7907	Requires the Commissioner of Education, in conjunction with the Commissioner of Health, to study and evaluate the use of therapeutic pharmaceutical agents in optometric practice as currently authorized.
New York	Extending Health Care Services to Underserved Patient Populations	Amended	AB	9586	Amends provisions of the health care practitioner volunteer program to state that a health care practitioner volunteer shall be deemed to be an employee with respects to any acts and omissions that occurred or allegedly occurred within the scope of his or her participation in such program.
New York	Physician Practice	Pending	AB	9929	States that no physician shall charge a patient a fee or other charge for failing to appear at the appointed time of a scheduled appointment where the physician's office has received notice of a cancellation or a change of the appointment at least one hour in advance of the scheduled appointment.
New York	Medical Board Organization & Authority	Passed	AB	10052	Extends the sunset date for the public health law relating to professional misconduct proceedings and relating to regulating activities of physicians.
New York	Extending Health Care Services to Underserved Patient Populations	Pending	SB	4459	Amends the Health Care Practitioner Volunteer Pilot Programs in which health care volunteers may provide free basic primary health care services to uninsured low income individuals as long as he or she is eligible to participate.
New York	Extending Health Care Services to Underserved Patient Populations	Pending	AB	7677	Amends the Health Care Practitioner Volunteer Pilot Programs in which health care volunteers may provide free basic primary health care services to uninsured low income individuals as long as he or she is eligible to participate.
New York	Extending Health Care Services to Underserved Patient Populations	Pending	AB	4654	Allows the Board of Regents to waive citizenship or immigration status requirements for professional licenses of physicians and midwives who practice in medically underserved areas.
New York	Extending Health Care Services to Underserved Patient Populations	Pending	SB	475	Creates the Physicians Returning to Shortage Areas Loan Forgiveness Program to provide an educational loan forgiveness program to physicians who return to a physician shortage area of origin.
New York	Extending Health Care Services to Underserved Patient Populations	Pending	AB	3410	Creates the Physicians Returning to Shortage Areas Loan Forgiveness Program to provide an educational loan forgiveness program to physicians who return to a physician shortage area of origin.
New York	Extending Health Care Services to Underserved Patient Populations	Pending	SB	476	Establishes the Designated Physician Shortage Program to provide a tax credit to certified physicians who provide specialty medical services in designated specialty shortage areas.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
New York	Continuing Medical Education (CME)	Amended	AB	6388	Requires every physician and other listed health care professionals to complete course work or training regarding cultural awareness and competence in the non-discriminatory provision of medical services every two years.
New York	Extending Health Care Services to Underserved Patient Populations	Pending	SB	1562	Amends provisions of the health care practitioner volunteer program to state that a health care practitioner volunteer shall be deemed to be an employee with respects to any acts and omissions that occurred or allegedly occurred within the scope of his or her participation in such program.
New York	Scope of Practice	Amended	AB	688	Removes the requirement that a physician supervise a medical laboratory technician, medical technologist, phlebotomist, advanced emergency medical technician, or other qualified persons when a police officer requests the withdrawal of blood for the purposes of determining the alcoholic or drug content of someone stopped for a traffic violation.
New York	Extending Health Care Services to Underserved Patient Populations	Amended	AB	3146	Amends provisions of the health care practitioner volunteer program to state that a health care practitioner volunteer shall be deemed to be an employee with respects to any acts and omissions that occurred or allegedly occurred within the scope of his or her participation in such program.
New York	Scope of Practice	Amended	SB	1631	Amends the Worker Compensation law to allow nurse practitioners to provide treatment to injured employees.
New York	Continuing Medical Education (CME)	Pending	SB	3500	Requires registered nurses, licensed practical nurses, physicians, physician assistants and specialist assistants to complete approved domestic violence training or course work.
New York	Medical Board Organization & Authority	Pending	SB	6999	Extends the sunset date for the public health law relating to professional misconduct proceedings and relating to regulating activities of physicians.
New York	Continuing Medical Education (CME)	Pending	AB	7279	Requires every physician, physician assistant and specialist assistant to complete coursework or training regarding geriatric medicine every three years. Also requires all students who are enrolled in a course of study to receive training as a physician, physician assistant, or specialist assistant to receive training in geriatric medicine.
New York	Continuing Medical Education (CME)	Pending	SB	2267	Requires physicians, chiropractors, dentists, registered nurses, podiatrists, optometrists, psychiatrists, psychologists, and dental hygienists to have completed two hours of coursework or training regarding the identification and reporting of elderly abuse and maltreatment when applying for or renewing a license.
New York	Continuing Medical Education (CME)	Pending	AB	6671	Requires physicians, chiropractors, dentists, registered nurses, podiatrists, optometrists, psychiatrists, psychologists, and dental hygienists to have completed two hours of coursework or training regarding the identification and reporting of elderly abuse and maltreatment when applying for or renewing a license.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
New York	Continuing Medical Education (CME)	Pending	SB	765	Requires every physician and other listed health care professionals to complete course work or training regarding cultural awareness and competence in the non-discriminatory provision of medical services every two years.
New York	Extending Health Care Services to Underserved Patient Populations	Pending	AB	3389	Establishes the Designated Physician Shortage Program to provide a tax credit to certified physicians who provide specialty medical services in designated specialty shortage areas.
New York	Continuing Medical Education (CME)	Pending	SB	928	Requires pediatricians, physicians employed in an emergency room, registered nurses, and registered physician assistants employed by a pediatrician or in an emergency room to report suspected child abuse and maltreatment to complete two and one-half hours of coursework or training regarding the identification and reporting of child abuse.
New York	Scope of Practice	Pending	AB	10395	Adds physician assistants to the list of authorized sexual assault forensic examiners.
New York	Emergency Preparedness	Pending	AB	9910	States that a health care practitioner volunteer shall be deemed to be an employee with respect to any acts and omissions that occurred or allegedly occurred within the scope of his or her participation in such program.
New York	Continuing Medical Education (CME)	Pending	SB	7270	Requires every physician and other designated health care providers who provide direct frontline medical services to patients to, on or before July 1, 2009 and every two years thereafter, complete course work or training regarding cultural awareness and competence in the nondiscriminatory provision of medical services. The Department shall provide an exemption from this requirement to anyone who requests such an exemption and who meets other stipulations.
New York	Extending Health Care Services to Underserved Patient Populations	Pending	SB	7293	Establishes grants for graduate medical education in child abuse pediatrics to include child abuse pediatrics certified fellowship education programs to expand or establish education in child abuse pediatrics and to increase the opportunities for trainee education in child advocacy centers, hospitals or multidisciplinary teams. Establishes the State Child Abuse Pediatrics Education and Training Council as an expert panel in child abuse pediatrics education and training.
New York	Complementary and Alternative Medicine	Pending	SB	7333	Amends the definition of the profession of acupuncture.
New York	Scope of Practice	Pending	SB	5505	Requires the Commissioner of Education, in conjunction with the Commissioner of Health, to study and evaluate the use of therapeutic pharmaceutical agents in optometric practice as currently authorized.
New York	Extending Health Care Services to Underserved Patient Populations	Pending	SB	7232	Provides that reimbursements provided to rural health care facilities shall be equal to rates provided to other health care facilities in the state.
New York	Miscellaneous	Pending	SB	7253	Adds medical and health insurance information within the definitions of identity theft.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
New York	Miscellaneous	Pending	AB	9891	States that no health care professional shall engage, directly or indirectly, in any act which constitutes participation in, complicity in, incitement to, assistance in, planning or design of, or attempt or conspiracy to commit torture or improper treatment of a prisoner.
New York	Medical Errors/Patient Safety	Pending	SB	1267	Requires certain health facilities to disclose to the public information regarding nurse staffing and patient outcomes.
New York	Scope of Practice	Pending	AB	9904	Provides coverage under insurance policies, medical expense indemnity corporations or health service corporations, for outpatient care provided by a nurse practitioner consistent with his or her scope of practice.
New York	Miscellaneous	Pending	SB	6820	Creates the crime of reckless infection of a patient with a communicable disease by a health care provider as a Class E felony and requires the Department of Health to notify the patient or patients of a health care provider if such provider is determined to have exposed the patient or patients to a communicable disease.
New York	Scope of Practice	Passed	SB	6422	Defines mental health clinician as a psychiatrist, psychologist, social worker or nurse practitioner and states that inmates with serious mental illness shall only be removed in consultation with such practitioners.
New York	Extending Health Care Services to Underserved Patient Populations	Amended	SB	4795	Establishes the New York State Community Health Care Investment Fund to provide funds to the Department of Health for purposes of distributing such moneys to qualified entities for one or more of the following: projects that address the six clinical indicators as established by the Federal Center for Disease Control's goal to eliminate health disparities; projects that improve the cultural competence of the health care workforce; projects that collect data regarding ethnic and minority representation in the health care workforce; projects that conduct surveys on racial and ethnic health disparities; scholarships to recruit and train racial and ethnic minorities in the health care professions; and projects that address unmet health care needs in rural areas.
New York	Scope of Practice	Amended	SB	3579	Allows a registered professional nurse to prescribe and order a non-patient specific regimen for emergency contraception.
New York	Scope of Practice	Amended	SB	908	Establishes license requirements and scope of practice for the practice of school psychology.
New York	Physician Profiling/Credentialing	Pending	AB	9728	Adds to the requirements for physician profiles a list of licensees subject to the authority of the Office of Professional Medical Conduct who have five or more medical malpractice judgments, awards and/or settlements within the most recent ten years in which payment was awarded to a complaining party.
New York	Miscellaneous	Amended	AB	1336	Requires any physician, physician assistant, surgeon, or osteopath to report cases of suspected child abuse to appropriate law enforcement agencies. Any person who knowingly and willfully fails to report a case of suspected child abuse as required is guilty of a class A misdemeanor.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
New York	Physician Practice	Pending	AB	10359	States that a cosmetic surgery procedure shall not be performed on a patient unless, prior to such surgery, a licensed physician and a licensed surgeon have completed a physical examination on such patient and have submitted written clearances for such procedure.
New York	Continuing Medical Education (CME)	Pending	AB	7517	Requires registered nurses, licensed practical nurses, physicians, physician assistants and specialist assistants to complete approved domestic violence training or course work.
New York	Miscellaneous	Pending	AB	10357	Authorizes collective action by competing physicians. Competing physicians may meet and communicate in order to collectively negotiate with a health benefit plan concerning certain contract terms and conditions.
New York	Scope of Practice	Pending	SB	4217	Amends the Workers' Compensation Law in relation to chiropractic care. Provides that if the nature of an employee's injury falls outside the limits for chiropractic care, a chiropractor must advise the patient and instruct him or her to consult a physician for appropriate care and treatment. This physician will have supervision of the treatment including any future treatment to be administered to the patient by the chiropractor.
New York	Telemedicine	Pending	AB	4619	Requires the Commissioner of Health and the Commissioner of Education to establish a program to study telemedicine. The program shall identify issues relating to the development of effective telemedicine services, study the apparent barriers to the development of effective telemedicine services, survey other government entities and the private sector to improve the delivery of telemedicine services, study efforts of other states and the federal government, engage interested parties to encourage the development of contracts and other agreements whereby entities needing telemedicine services can obtain them pursuant to reasonable terms and conditions, solicit input from interested parties, stimulate statewide discussion on the issue of telemedicine, advise the governor and legislature regarding improvement of public policy relating to telemedicine, make recommendations on integration of new and emerging technologies through telecommunications into the telehealth system, and make recommendations on methods of ensuring that the telehealth system utilizes federal funds to the maximum extent possible.
New York	Telemedicine	Amended	SB	4327	Establishes a statewide Telemedicine/Telehealth Task Force to make recommendations to the governor and the legislature on issues related to telemedicine/telehealth.
New York	Continuing Medical Education (CME)	Pending	AB	4744	States that physician education includes education and training in pain management and end-of-life care, including, but not limited to: palliative medicine, pain, neuropsychologic and other symptoms, ethics and the law, patient and family perspectives on end-of-life care, acupuncture treatment, and clinical communication skills.
New York	Physician Practice	Pending	SB	7107	States that a mental health professional is prohibited from treating a violent patient in an office located in a residential building.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
New York	Continuing Medical Education (CME)	Pending	SB	1207	Requires every physician to successfully complete, within the three-year period immediately preceding the physician's license renewal, a course or courses of continuing education in professional medical competency. The Commissioner of Health, with the cooperation of the Board for Medicine, shall develop a course of instruction in medical risk management to be provided to students in medical school and to physicians as part of licensing requirements.
New York	Miscellaneous	Pending	AB	10336	Authorizes one or more individuals licensed to practice medicine, optometry or ophthalmic dispensing to organize, or cause to be organized, a professional service corporation for pecuniary profit for the purpose of rendering professional services as such individuals are authorized to practice.
New York	Scope of Practice	Pending	SB	5221	The bill clarifies the definition of Chinese Medicine, Acupuncture and the Profession of Chinese Medicine, and it repeals provisions of the law by adding the Department may establish rules and regulations providing for the certification of physicians and dentists as acupuncturists, provided that such certified acupuncturists do not represent themselves as licensed acupuncturists. Certification in the practice of acupuncture shall be limited to qualified physicians and dentists only.
New York	Medical Board Organization & Authority	Pending	SB	7114	States that no otherwise qualified applicant shall be denied a license, certificate, limited permit or registration by reason of his or her lack of citizenship or immigration status, and no person holding a license, certificate, limited permit or registration shall be required to surrender or otherwise relinquish it, or have it revoked or suspended by reason of his or her lack of citizenship or immigration status.
New York	Scope of Practice	Pending	AB	9303	Amends the public health law by requiring notification of and the informed consent of the prescribing physician and the patient prior to the substitution of a prescribed anti-epileptic drug.
New York	Telemedicine	Amended	AB	422	Establishes a statewide Telemedicine/Telehealth Task Force to make recommendations to the governor and the legislature on issues related to telemedicine/telehealth.
New York	Scope of Practice	Pending	AB	2130	Amends the Workers' Compensation Law in relation to chiropractic care. Provides that if the nature of an employee's injury falls outside the limits for chiropractic care, a chiropractor must advise the patient and instruct him or her to consult a physician for appropriate care and treatment. This physician will have supervision of the treatment including any future treatment to be administered to the patient by the chiropractor.
New York	Scope of Practice	Pending	SB	1608	Requires that a circulating nurse in any and each separate operating room where surgery is being performed for the duration of the operative procedure.
New York	Scope of Practice	Amended	AB	1206	Requires that a circulating nurse in any and each separate operating room where surgery is being performed for the duration of the operative procedure.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
New York	Scope of Practice	Pending	SB	4647	Allows a nurse practitioner to certify that an immunization may be detrimental to a child's health.
New York	Scope of Practice	Pending	AB	8392	Allows a nurse practitioner to certify that an immunization may be detrimental to a child's health.
New York	Scope of Practice	Pending	SB	4173	Amends the current law in relation to the regulation of the use of laser, intense pulsed light, radiofrequency and medical microwave devices. States only authorized persons can use any laser classified as Class IIIB or Class IV, intense pulsed light, radiofrequency and medical microwave devices on human beings, and that their use on human beings is deemed to be the practice of medicine.
New York	Scope of Practice	Pending	AB	8142	Amends the current law in relation to the regulation of the use of laser, intense pulsed light, radiofrequency and medical microwave devices. States only authorized persons can use any laser classified as Class IIIB or Class IV, intense pulsed light, radiofrequency and medical microwave devices on human beings, and that their use on human beings is deemed to be the practice of medicine.
New York	Scope of Practice	Pending	SB	5016	Amends the public health law by requiring notification of and the informed consent of the prescribing physician and the patient prior to the substitution of a prescribed anti-epileptic drug.
New York	Miscellaneous	Pending	AB	10535	Requires the Commissioner of Health to ensure that all hospitals designated as children's hospitals and operated for the express purpose of providing pediatric services and pediatric care to children, arrange for the regular and on-call services of a physician, who is a board-eligible pediatrician or family physician, at all times for which out-patient emergency medical care and treatment is provided by such hospital.
New York	Miscellaneous	Pending	SB	7269	Authorizes one or more individuals licensed to practice medicine, optometry or ophthalmic dispensing to organize, or cause to be organized, a professional service corporation for pecuniary profit for the purpose of rendering professional services as such individuals are authorized to practice.
New York	Telemedicine	Pending	SB	4677	Requires a provider to obtain the written and informed consent of a patient prior to providing treatment through telemedicine. Establishes a license to practice telemedicine and defines such practice.
New York	Medical Malpractice	Pending	AB	10109	Establishes a limitation on noneconomic damages in personal injury actions for medical, dental or podiatric malpractice.
New York	Telemedicine	Pending	SB	4674	Allows the provision of home health services by licensed providers through electronic, remote means.
New York	Medical Board Organization & Authority	Pending	AB	10221	States that all information, findings, conclusions and determinations of the Board of Professional Medical Conduct which are authorized or required to be disclosed to the public shall be published in both written and electronic form in the eight languages that are most spoken in the state.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
New York	Telemedicine	Pending	SB	4669	Establishes a statewide Telemedicine/Telehealth Task Force to make recommendations to the governor and the legislature on issues related to telemedicine/telehealth. Also establishes a telemedicine and telehealth demonstration program.
New York	Scope of Practice	Pending	SB	7489	Authorizes a physician, surgeon, nurse practitioner, certified nurse midwife or physician assistant to certify that a temporary special vehicle identification parking permit should be issued to a woman who is pregnant.
New York	Miscellaneous	Pending	SB	7347	States that any person who is licensed to practice as a physician, physician's assistant, massage therapist, physical therapist, chiropractor, dentist, optometrist, nurse, nurse practitioner or podiatrist in another state or territory, who is in good standing in such state or territory and who has been appointed by the North America Sports, Inc., to provide professional services at an event in the state, to provide such professional services to athletes and team personnel registered to train at a location in the state or registered to compete in an event in the state without first being licensed in the state.
New York	Miscellaneous	Pending	AB	10423	States that any person who is licensed to practice as a physician, physician's assistant, massage therapist, physical therapist, chiropractor, dentist, optometrist, nurse, nurse practitioner or podiatrist in another state or territory, who is in good standing in such state or territory and who has been appointed by the North America Sports, Inc., to provide professional services at an event in the state, to provide such professional services to athletes and team personnel registered to train at a location in the state or registered to compete in an event in the state without first being licensed in the state.
New York	Medical Malpractice	Pending	SB	7038	Relates to malpractice and professional medical conduct in relation to terms of insurance coverage.
New York	Continuing Medical Education (CME)	Amended	AB	4743	Requires that every physician, physician assistant, and special assistant to complete course work or training regarding pain management every four years. An Advisory Committee on Pain Management Education is created to advise the Commissioner of Health and the Commissioner of Education in the development and implementation of educational standards for this section.
New York	Scope of Practice	Pending	AB	10143	Amends the definition of the profession of acupuncture.
Ohio	Scope of Practice	Substituted	HB	253	Modifies the authority of certain advanced practice nurses, such as clinical nurse specialists, certified nurse-midwives and certified nurse practitioners, to prescribe schedule II controlled substances.
Ohio	Scope of Practice	Pending	HB	413	Authorizes registered nurses to determine and pronounce death where previously a physician was authorized to do so. A registered nurse is not authorized to complete any portion of the individual's death certificate.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
Ohio	Continuing Medical Education (CME)	Pending	SB	68	Requires the Medical Board to adopt rules to establish the number of hours of instruction in cultural competency an applicant must complete to be eligible for licensure, the number of hours of continuing medical education in cultural competency required for renewal of a license, and the criteria by which the board can waive completion of these hours.
Ohio	Medical Board Organization & Authority	Pending	SB	279	States that the Medical Practice Act shall not be construed to affect or interfere with the performance of duties of any medical personnel who are employed by the Veterans Administration of the United States while so employed. A physician assistant is also authorized to apply or remove a cast or splint under a physician supervisory plan.
Ohio	Medical Board Organization & Authority	Pending	HB	171	Allows the State Medical Board to limit, revoke, or suspend a physician's license for a plea of guilty to, a judicial finding of guilt of, or a judicial finding of eligibility for intervention in lieu of conviction for a criminal offense that is substantially related to the practice of medicine. Previously, this section only applied to a felony conviction.
Ohio	Extending Health Care Services to Underserved Patient Populations	Pending	HB	186	Establishes and operates the Ohio Health Care Plan to provide universal health care coverage to all Ohio residents which shall be administered under the direction of the Ohio health care board.
Ohio	Managed Care	Passed	HB	125	Establishes certain uniform contract provisions between health care providers and contracting entities and establishes standardized credentialing forms for providers and contracting managed care entities. Increases the amount a health care provider or medical records company may charge for providing a copy of a patient's medical record.
Ohio	Scope of Practice	Amended	SB	245	Modifies the laws regarding the practice of acupuncturists.
Ohio	Miscellaneous	Pending	HB	284	Prohibits abortions in this state; establishes criminal and civil liability for the offenses of unlawful abortion, unlawful distribution of an abortion-inducing drug, and abortion trafficking. Makes conforming changes to related provisions.
Pennsylvania	Medical Board Organization & Authority	Pending	HB	596	Allows the board to waive the fee for biennial registration in cases where an individual presents evidence that payment of the fee will cause undue economic hardship. The request for waiver shall be made in writing. The board shall respond to the request for waiver via registered mail and shall set forth its reasons for acceptance or denial of the request.
Pennsylvania	Complementary and Alternative Medicine	Pending	HB	1662	Amends the Acupuncture Registration Act to the Acupuncture Licensure Act. Defines acupuncture and acupuncturist, provides for the regulation of the practice of acupuncture, and creates penalties for the unlawful practice of acupuncture.
Pennsylvania	Emergency Preparedness	Amended	SB	1060	Establishes a Uniform Emergency Volunteer Health Practitioners registration system for the use of volunteer health practitioners during emergency. The bill provides reasonable safeguards to assure that health practitioners are appropriately licensed and regulated, and provides for applicable worker's compensation coverage to volunteers as well as limitations on civil liability.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
Pennsylvania	Scope	Amended	HB	1999	Amends the scope of practice for physician assistants. Also provides that a respiratory care practitioner may begin treatment upon referral by a physician, certified registered nurse practitioner or physician assistant.
Pennsylvania	Miscellaneous	Pending	SB	1255	Establishes the Conscientious Objection Act to prohibit all forms of discrimination, disqualification, coercion, disability or liability upon such health care providers and institutions that decline to perform any health care service that violates their conscience.
Pennsylvania	Medical Board Organization & Authority	Pending	SB	14	Requires health care facilities to provide easy and timely access to an e-prescribing system for all staff, employees or contractors who have prescriptive authority and write prescriptions for patients of the facility. Within 60 days following the effective date of this section, the State Board of Medicine shall determine the date after which it will require physicians, as a condition of licensure, to use an e-prescribing system to write prescriptions electronically and check for potentially harmful drug interactions. Additionally, the State Board of Medicine shall require a physician to certify on the physician's application that the physician has access to and uses an e-prescribing system. Any false or misleading statement on a physician's certification shall be subject to a civil penalty of \$5,000 per instance.
Pennsylvania	Medical Board Organization & Authority	Pending	SB	12	States the State Board of Medicine shall not approve for accreditation any graduate medical education program that does not require a minimum of six hours of patient safety training. Also states Board of Medicine may utilize a program similar to the impaired professional program through which a licensee may be referred for a clinical skills assessment to improve clinical skills or address any clinical skills deficiencies.
Pennsylvania	Complementary and Alternative Medicine	Pending	SB	1023	Amends the Acupuncture Registration Act by redesignating registration as licensure. The bill also regulates the practice of acupuncture including supplemental techniques, which is defined as the use of traditional and modern oriental therapeutics, heat therapy, moxibustion, electrical and low-level laser stimulation, acupressure and other forms of massage, herbal therapy, and counseling that shall include the therapeutic use of foods and supplements and lifestyle modifications and any other techniques approved by the board. Additionally, the bill makes it unlawful for an individual to practice acupuncture unless the individual is licensed as an acupuncturist by one of the boards.
Pennsylvania	Medical Board Organization & Authority	Pending	HB	597	Allows the board to waive the fee for biennial registration in cases where an individual presents evidence that payment of the fee will cause undue economic hardship. The request for waiver shall be made in writing. The board shall respond to the request for waiver via registered mail and shall set forth its reasons for acceptance or denial of the request.
Pennsylvania	Extending Health Care Services to Underserved Patient Populations	Pending	HB	2348	Establishes the Pennsylvania Access to Basic Care Program Fund. Further limits caps on medical malpractice torts.

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Pennsylvania	Medical Board Organization & Authority	Pending	SB	1185	Amends the Medical Practice Act of 1985 by providing the board reason for refusal, revocation, suspension or other corrective action against a licensee, including a licensee having disciplinary action taken by a proper licensing authority of another state, territory, possession or country, or a branch of the Federal Government.
Pennsylvania	Electronic & Internet Prescribing	Pending	HB	1683	Requires health care facilities to develop implementation plan for e-prescribing system, system to be in place by September 1st 2008, and for State Board of Medicine to promulgate regulations establishing guidelines for the use of e-prescribing by physicians that choose to write prescriptions electronically, and establishes penalties for physicians who provide false or misleading statements regarding a certification.
Pennsylvania	Extending Health Care Services to Underserved Patient Populations	Pending	SB	1242	Establishes the Medical Care Availability for Pennsylvanians Reserve Fund to provide both assistance to certain small business employers in covering their low wage uninsured and access to affordable health insurance coverage for uninsured low-income adults.
Pennsylvania	Electronic & Internet Prescribing	Pending	SB	1094	Requires health care facilities to provide easy and timely access to an e-prescribing system for use by all medical staff who have prescriptive authority, that the e-prescribing system shall be able to monitor and notify the medical staff of potentially harmful drug interactions and for the State Board of Medicine to promulgate regulations establishing guidelines for the use of e-prescribing by every physician that chooses to write prescriptions electronically.
Pennsylvania	Physician Practice	Pending	HB	2350	Requires a treating health care practitioner who treats a minor with respect to prenatal care, the delivery of a baby, the termination of a pregnancy or a sexually transmitted disease, to obtain credible written evidence such as a school record, health care record or health insurance record that the minor is 13 years of age or older. If the written evidence indicates the minor is a child, the treating health care practitioner shall report this information to the child predator unit.
Pennsylvania	Physician Practice	Pending	SB	1313	Requires a treating health care practitioner who treats a minor with respect to prenatal care, the delivery of a baby, the termination of a pregnancy or a sexually transmitted disease, to obtain credible written evidence such as a school record, health care record or health insurance record that the minor is 13 years of age or older. If the written evidence indicates the minor is a child, the treating health care practitioner shall report this information to the child predator unit.
Pennsylvania	Medical Board Organization & Authority	Amended	HB	1188	Provides the Commissioner of Professional and Occupational Affairs the power to adopt a schedule of civil penalties for operating without a current, registered, unsuspended and unrevoked license. Penalties shall not exceed the sum of \$1,000 per violation. Additionally, boards and commissions operating within the Bureau of Professional and Occupational Affairs shall have the power to impose discipline, including, but not limited to a civil penalty on any person who violates a lawful disciplinary order of the board.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
Pennsylvania	Scope of Practice	Pending	SB	430	Provides for perfusionist licensing, qualifications, supervision and scope of practice, regulations and exemptions.
Pennsylvania	Continuing Medical Education (CME)	Pending	SB	448	Requires physicians to complete one-hour of CME pertaining to domestic violence as part of the biennial licensure period.
Pennsylvania	Scope of Practice	Pending	HB	2137	Regulates the practice of genetic counselors and requires genetic counselors to be licensed by the State Board of Osteopathic Medicine. Establishes the scope of practice for genetic counselors.
Pennsylvania	Telemedicine	Pending	SB	828	Establishes the Gaining Access to Physicians (GAP) program, to promote access to quality health care and reduce future Medicaid costs by providing reimbursement for services delivered via telemedicine for Medicaid recipients if the services provided are a covered benefit when provided in person.
Pennsylvania	Telemedicine	Pending	SB	819	Known as the Telemedicine Act. The bill provides definitions for telemedicine and teleradiology, medical licensure requirements, exceptions from licensure requirements and sanctions.
Pennsylvania	Telemedicine	Pending	HB	1849	Requires an insurer that issues, delivers, executes or renews health care insurance in the state to provide coverage for telehealth services if a health care professional certifies the use of telehealth is appropriate for the patient, maintains proper direct examination of the patient and that the use of telehealth will result in lower health care costs that if it were not used.
Pennsylvania	Extending Health Care Services to Underserved Patient Populations	Amended	HB	489	Provides for biennial renewal of certain licenses for volunteer health services. Holders of volunteer licenses shall be exempt from renewal fees. Volunteer physician licensees shall comply with any continuing education requirements imposed by board rulemaking as a general condition of biennial renewal. In the enforcement of disciplinary matters, holders of volunteer licenses shall be subject to those standards of conduct applicable to all licensees licensed by the appropriate board.
Pennsylvania	Miscellaneous	Pending	HB	1435	Provides for procedures regarding the request and dispensation of lethal medication to patients seeking to die in a dignified and humane manner and outlines the responsibilities of both attending and consulting physicians.
Pennsylvania	Medical Errors/Patient Safety	Pending	HB	353	Enacts the Adverse Health Care Events Reporting Act to require health facilities to report adverse health care events to the Department of Health as soon as is reasonably and practically possible but no later than fifteen working days after discovery of the event.
Pennsylvania	Scope of Practice	Pending	SB	429	Provides for perfusionist licensing, qualifications, supervision and scope of practice, regulations and exemptions.

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Pennsylvania	Extending Health Care Services to Underserved Patient Populations	Amended	HR	334	Requires the General Assembly to establish a task force to study affordable health care insurance, health care access and quality health care services as they relate to providing health care to uninsured citizens of the state. The task force will also explore all potential funding sources so that the state can guarantee health insurance coverage for all of its residents.
Pennsylvania	Scope of Practice	Amended	HB	1804	Requires the Board of Medicine and the Board of Osteopathic Medicine to jointly promulgate regulations relating to the licensure and practice of respiratory therapists.
Pennsylvania	Scope of Practice	Amended	HB	1199	Amends the definition of the practice of physical therapy.
Pennsylvania	Scope of Practice	Pending	HB	1998	Provides for the licensing and regulation of naturopathic medicine, including provisions on the qualifications for licensure and scope of practice. This bill also establishes the State Board of Naturopathic Medicine.
Pennsylvania	Scope of Practice	Pending	HB	549	Enacts the Nurse Licensure Compact.
Pennsylvania	Scope of Practice	Pending	HB	2015	Regulates the right to practice prosthetics, orthotics and pedorthics, and requires the licensure of prosthetists, orthotists, orthotic fitters and pedorthists.
Pennsylvania	Scope of Practice	Pending	HB	343	Defines the practice of clinical nurse specialist and establishes certification requirements for such practitioners.
Pennsylvania	Scope of Practice	Pending	HB	341	Establishes scope of practice and qualifications for certified registered nurse anesthetists.
Pennsylvania	Miscellaneous	Pending	SB	416	States that any retired physician who is a member of a Medical Reserve Corps unit and who renders care during an emergency shall not be liable for any civil damages as a result of any acts or omissions by the physician in rendering the care.
Pennsylvania	Medical Board Organization & Authority	Pending	SB	1346	Appropriates \$8,409,000 to the Board of Medicine for its operation for fiscal year July 1, 2008, to June 30, 2009. Appropriates \$1,349,000 to the Board of Osteopathic Medicine for its operation for fiscal year July 1, 2008, to June 30, 2009.
Pennsylvania	Medical Errors/Patient Safety	Pending	HB	742	Enhances patient safety by establishing meaningful whistleblower protection and a reporting system for medical errors which is responsive to legitimate concerns.
Pennsylvania	Medical Errors/Patient Safety	Pending	SB	217	Enhances patient safety by establishing meaningful whistleblower protection and a reporting system for medical errors which is responsive to legitimate concerns.

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Pennsylvania	Medical Errors/Patient Safety	Pending	HB	1010	Amends the Medical Care Availability and Reduction of Error (Mcare) Act by adding a section on patients' visitation rights. It authorizes the right of a patient to designate individuals as visitors so that these designees may accompany the patient while the patient is receiving treatment from a health care provider.
Pennsylvania	Medical Errors/Patient Safety	Pending	HB	1043	Establishes minimum staffing standards for unlicensed and licensed nursing personnel at long-term care nursing facilities and requires such information be posted for the public.
Pennsylvania	Medical Errors/Patient Safety	Amended	HB	1552	Establishes the Infection Control Advisory Committee to encourage cooperation among federal, state and local agencies, academic institutions and the private sector to assist in improving best practices which include implementing nationally recognized standards that promote practices and programs to reduce or eliminate health care-associated infections; to serve as a forum for presenting information and studying programs being used within the state; to develop recommendations regarding best practices to effectuate screenings of high-risk patients; to identify financial and technological needs of health care facilities; to develop recommendations on how best to implement an outreach process that includes notifying a receiving health care facility of any patient known to be colonized prior to transfer to another facility; to develop recommendations regarding evidence-based screening protocols of patients and residents for MDROO; to recommend a methodology and a defined process using nationally recognized standards for determining and assessing the rate of health care-associated infections that occur in health care facilities in the state; to provide recommendations to the department on the distribution of any available funds to collaboratives; to issue reports on health care facility infection control and prevention; to develop annual infection control and prevention priorities; to recommend system requirements and elements for health care-associated infection electronic surveillance systems to be used by health care facilities; and to recommend uniform reporting requirements for health care facilities to report health care-associated infections to the department, the council and the authority.
Pennsylvania	Scope of Practice	Amended	HB	2051	Amends the Osteopathic Practice Act of 1985. Provides that a physician assistant shall have the authority to order durable equipment, issue certain oral orders, order certain referrals, perform disability assessments for TANF, issues homebound schooling certifications and perform methadone treatment evaluations. The bill also provides that a respiratory care practitioner may begin treatment upon referral by a physician, certified registered nurse practitioner or physician assistant, and requires the State Board of Osteopathic Medicine to promulgate regulations implementing these additions within 18 months.

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Pennsylvania	Miscellaneous	Pending	HB	1822	States that no person who furnishes information or professional counsel or services to any review organization, shall be held by reason of the performance by the person of any duty, function, or activity authorized or required of review organizations or by reason of having provided counsel or information to the review organization, to have violated any criminal law, or to be civilly liable under any law, provided the person has exercised due care. Further, no person who furnishes information, professional counsel or services to any review organization shall be subject to any retaliatory action for furnishing such information or for providing such counsel or services.
Pennsylvania	Resident Licensure/Minimum Standards for Postgraduate Training	Pending	SB	1224	Establishes limits on working hours for residents who have inpatient care responsibilities if the residents are in an accredited program of graduate medical education training. As stipulated: (1) The scheduled work week shall not exceed 80 hours per week; (2) On-call duty during night shift hours shall not be scheduled more often than every third night; (3) A resident shall not be scheduled for more than 24 consecutive hours in either patient care or educational sessions; (4) A resident shall have at least one 24-hour period of scheduled nonworking time per week; (5) A resident shall not be scheduled for more than 12 consecutive hours of patient care in an emergency department; and (6) A resident shall have at least eight hours of nonworking time between work shifts.
Pennsylvania	Medical Malpractice	Pending	SB	1196	Creates the Health Care Provider Rate Stabilization Fund for payment of any obligations as described in this chapter; effective January 1, 2012, payment of claims against any participating providers for losses or damages awarded in medical liability actions against them as stipulated in this act; for payment of premiums and assessments for insurance coverage as required in effect for calendar year 2008 and each year thereafter until all liabilities of the fund have been eliminated; and for payment of the patient safety discount.
Pennsylvania	Scope of Practice	Pending	HB	2138	Regulates the practice of genetic counselors and requires genetic counselors to be licensed by the State Board of Medicine. Establishes the scope of practice for genetic counselors.
Pennsylvania	Scope of Practice	Pending	HB	2088	Renames respiratory care practitioners as respiratory therapists, and modifies regulation of their practice under the State Board of Osteopathic Medicine. Requires such practitioners to be licensed instead of certified by the Board.
Pennsylvania	Pain Management/Prescription Monitoring	Pending	SB	302	Requires that Schedule II controlled substances be prescribed only on an official State prescription form.
Pennsylvania	Pain Management/Prescription Monitoring	Pending	SB	785	Enacts the Controlled Substance Electronic Monitoring Act. It provides for the electronic monitoring of controlled substances dispensed by a pharmacist.

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Pennsylvania	Medical Errors/Patient Safety	Pending	HB	2024	Establishes the medical safety automation program to provide grants to health care providers or to regional health information organizations to implement medical safety automation systems. The systems should address the following: purchase of health information or telecommunications technology necessary to create an interoperable and integrated medical safety automation system; payment of costs and expenses associated with preparation of plans, specifications, studies and surveys necessary to determine the scope of a medical safety automation system and the practicality and effectiveness of its use; and for the training of physicians and personnel in the use of a medical safety automation system.
West Virginia	Scope of Practice	Failed	HB	4261	Authorizes the Board of Medicine to promulgate a legislative rule relating to Collaborative Pharmacy Practice.
West Virginia	Medical Board Organization & Authority	Failed	HB	2996	Establishes the Doctor's Disciplinary Review Board to review the work and practices of medical and osteopathic physicians who have five or more malpractice suits filed against them. The Board shall make a recommendation to the applicable licensing authority whether a physician's license should be revoked or suspended or whether disciplinary action is appropriate. The Board is authorized to engage in background checks of any medical or osteopathic physician who applies for a license.
West Virginia	Physician Practice	Failed	SB	134	Requires all reporting sources, including hospitals, physicians, facilities, clinics or other similar units diagnosing or providing treatment or care for Alzheimer's disease and related disorders, to provide a report of each case to the Alzheimer's Disease Registry in the format specified in legislative rules authorized in this act. Failure to comply with the reporting provisions may result in penalties.
West Virginia	Miscellaneous	Failed	SB	140	Creates the Physician Lien Act, creating physician liens on claims and causes of action by injured parties. Requires the release of physician records in certain cases, and provides that failure of a physician to give or file a written statement in conformity with this act after being requested in writing will result in the lien of the physician becoming null and void.
West Virginia	Pain Management/Prescription Monitoring	Failed	SB	147	Amends the Management of Pain Act. Removes the term intractable pain and defines pain as being an unpleasant sensory and emotional experience associated with actual or potential tissue damage or described in terms of such damage. Further states that a physician may prescribe a dosage of pain medication that exceeds the usual dosage of a pain-relieving controlled substance in certain circumstances.

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West Virginia	Physician Practice	Failed	HB	2036	States that any person who knowingly performs partial birth infanticide and thereby kills a human infant is guilty of a felony and, upon conviction, shall be imprisoned in a state correctional facility not less than two years nor more than ten years and fined not more than one hundred thousand dollars. This section does not prohibit the use by a physician of any procedure that, in reasonable medical judgment, is necessary to prevent the death of the mother, so long as the physician takes every medically reasonable step to preserve the life and health of the infant. A procedure may not be deemed necessary to prevent the death of the mother if completing the delivery of the living infant would prevent the death of the mother.
West Virginia	Miscellaneous	Failed	HB	2458	Limits the liability of physicians who render services to youth camps and programs.
West Virginia	Extending Health Care Services to Underserved Patient Populations	Passed	HB	4433	States that at the end of each fiscal year, any individual who has received a medical student loan and who has rendered services as a medical doctor or a doctor of osteopathy in a medically underserved area or in a medical specialty in which there is a shortage of physicians, may submit to the Commission a statement indicating such service. Upon receipt of the statement, the Commission shall cancel ten thousand dollars of the outstanding loan or loans for every full twelve consecutive calendar months of such service.
West Virginia	Scope of Practice	Failed	HB	3160	Allows certain physician assistants to conduct involuntary custody examinations to determine if a person may be involuntarily hospitalized for mental illness or addiction.
West Virginia	Scope of Practice	Passed	HB	4474	Requires a registered nurse, qualified by education, licensed, and experienced in operating room nursing, to be present as a circulating nurse in each operating room during operative procedures.
West Virginia	Scope of Practice	Failed	HB	4262	Authorizes the Board of Medicine to promulgate a legislative rule relating to Certification, Disciplinary and Complaint Procedures, Continuing Education and Radiologist Assistants.
West Virginia	Scope of Practice	Failed	SB	430	Authorizes the Board of Medicine to promulgate a legislative rule relating to Collaborative Pharmacy Practice.
West Virginia	Scope of Practice	Passed	HB	4144	Amends supervising physician requirements to require such physicians to be fully licensed without restriction or limitation.
West Virginia	Pain Management/Prescription Monitoring	Failed	HB	4142	Amends the Management of Intractable Pain Act to include a practicing pain management physician definition, and includes Schedule III-IV controlled substances as pain relieving controlled substances. Requires practicing pain management physicians to conduct inquiries through the West Virginia Prescription Monitoring Database on all patients receiving Schedule II-IV controlled substances. All current patients of such practitioners shall have a patient profile created from the Database within six months, and all new patients will have profiles conducted within a period not to exceed thirty days.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
West Virginia	Miscellaneous	Failed	HB	4166	States that any person who practices or indicates or induces other to believe he or she is licensed to practice as a physician, podiatrist or physician assistant without an active, valid license to practice that profession is guilty of a felony. Any person who intentionally practices a health care profession with an expired license which has not been renewed for any period up to three months is guilty of a misdemeanor. Any person who intentionally practices a health care profession without an active, valid license when such practice results in serious bodily injury is guilty of a felony. Previously, any person who violated the provisions of the licensing law was guilty of a misdemeanor.
West Virginia	Scope of Practice	Passed	SB	481	Authorizes physician assistants to conduct examinations in the mental health hygiene process.
West Virginia	Scope of Practice	Failed	SB	598	Requires a registered nurse, qualified by education, licensed, and experienced in operating room nursing, to be present as a circulating nurse in each operating room during operative procedures.
West Virginia	Medical Malpractice	Failed	HB	4675	States that in any action for damages, recovery shall be predicated upon principles of comparative fault and the liability of each person, including plaintiffs, defendants and nonparties who caused the damages to be allocated to each applicable person in direct proportion to that person's percentage of fault.
West Virginia	Scope of Practice	Failed	HB	4052	Establishes an advisory council on maternal risk assessment to develop a uniform maternal risk screening tool, and requires all health care providers offering maternity services to use the tool in their examinations of any pregnant woman. Additionally, they shall notify the woman of any high-risk condition which they identify along with any necessary referral.
West Virginia	Continuing Medical Education (CME)	Failed	SB	429	Authorizes the Board of Medicine to promulgate a legislative rule relating to continuing education for physicians and podiatrists.
West Virginia	Continuing Medical Education (CME)	Failed	HB	4202	Authorizes the Board of Medicine to promulgate a legislative rule relating to continuing education for physicians and podiatrists.
West Virginia	Medical Board Organization & Authority	Passed	SB	317	Provides that applicants for medical licensure or podiatry must pass all steps of the USMLE within a period of ten consecutive years, instead of the current seven year requirement. Removes language allowing for a three year extension to the seven year requirement only for applicants enrolled in a dual M.D./PhD program or participating in an accredited fellowship training. Further, an applicant who has failed to successfully complete and pass any of the three steps of the USMLE is required to appear before the Board for a determination as to what, if any, further education, evaluation and training is required for further consideration of licensure. Amends the ability of the Board to issue a restricted license to an applicant in extraordinary circumstances under certain conditions, and states the Board shall propose rules that establish and regulate the restricted license issued to an applicant in extraordinary circumstances.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
West Virginia	Extending Health Care Services to Underserved Patient Populations	Failed	SB	278	Creates a special volunteer physician assistant license and a special volunteer osteopathic physician assistant certification for practitioners who wish to donate their expertise for the medical care and treatment of indigent and needy patients. Any physician assistant who renders any medical service to indigent and needy patients of a clinic organized, in whole or in part, for the delivery of health care services without charge under a special volunteer physician assistant license without payment or compensation or the expectation or promise of payment or compensation, is immune from liability for any civil action arising out of any act or omission resulting from the rendering of the medical service at the clinic unless the act or omission was the result of gross negligence or willful misconduct.
West Virginia	Extending Health Care Services to Underserved Patient Populations	Passed	HB	4129	Creates a special volunteer physician and a special volunteer physician assistant license and a special volunteer osteopathic physician assistant certification for practitioners who wish to donate their expertise for the medical care and treatment of indigent and needy patients. Any physician or physician assistant who renders any medical service to indigent and needy patients of a clinic organized, in whole or in part, for the delivery of health care services without charge under a special volunteer physician assistant license without payment or compensation or the expectation or promise of payment or compensation, is immune from liability for any civil action arising out of any act or omission resulting from the rendering of the medical service at the clinic unless the act or omission was the result of gross negligence or willful misconduct.
West Virginia	Medical Board Organization & Authority	Failed	HB	4530	Provides that applicants for medical licensure or podiatry must pass all steps of the USMLE within a period of ten consecutive years, instead of the current seven year requirement. Removes language allowing for a three year extension to the seven year requirement only for applicants enrolled in a dual M.D./PhD program or participating in an accredited fellowship training. Further, an applicant who has failed to successfully complete and pass any of the three steps of the USMLE is required to appear before the Board for a determination as to what, if any, further education, evaluation and training is required for further consideration of licensure. Removes the ability of the Board to grant licenses to applicants in extraordinary circumstances under certain conditions.
West Virginia	Scope of Practice	Failed	SB	586	Authorizes a pharmacist to remotely dispense and deliver prescription drugs to a patient's clinical medical home for dispensing to the patient, and to administer the influenza immunization to any person eighteen years of age or older under rules promulgated by the Board of Pharmacy, Board of Medicine, and the Osteopathy Board.
West Virginia	Scope of Practice	Passed	HB	3056	Authorizes pharmacists to administer immunizations for Hepatitis A, Hepatitis B, Influenza, Pneumonia and Tetanus, if they meet the requirements of this section.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
West Virginia	Scope of Practice	Failed	SB	59	Expands the prescriptive authority of advanced nurse practitioners. Removes the requirement for the advanced nurse practitioner to prescribe prescription drugs in a collaborative relationship with a physician.
West Virginia	Scope of Practice	Failed	SB	81	Prohibits insurers offering nursing services coverage from limiting the definition of scope of practice for purposes of benefit determination.
West Virginia	Scope of Practice	Failed	SB	82	Allows advanced nurse practitioners to sign do-not-resuscitate orders.
West Virginia	Scope of Practice	Failed	SB	83	Allows advanced nurse practitioners to sign death certificates.
West Virginia	Scope of Practice	Failed	SB	431	Authorizes the Board of Medicine to promulgate a legislative rule relating to Certification, Disciplinary and Complaint Procedures, Continuing Education and Radiologist Assistants.
West Virginia	Miscellaneous	Failed	HB	4437	Enhances criminal penalties for certain criminal acts against health care workers. People who commit malicious assault, unlawful assault, or battery against a health care worker are guilty of a felony. People who commit assault against a health care worker are guilty of a misdemeanor.
West Virginia	Scope of Practice	Failed	HCR	117	Requests the Joint Committee on Government and Finance to study inclusion of athletic trainer licensure and regulation under the laws governing the Board of Physical Therapists or other relevant licensing boards.
West Virginia	Scope of Practice	Failed	SB	521	Provides coverage for acupuncture treatment under accident and sickness insurance, group accident and sickness insurance, hospital service corporations, medical service corporations, dental service corporations, health service corporations, and health maintenance organizations.
West Virginia	Medical Errors/Patient Safety	Passed	HB	4404	Establishes standards for discount medical plan organizations and discount prescription drug plan organizations in order to better protect consumers from unfair or deceptive marketing, sales and enrollment practices and to facilitate consumer understanding of the role and function of the organizations in providing access to medical or ancillary services.
West Virginia	Medical Board Organization & Authority	Failed	SB	554	Revises licensing requirements for the Board of Osteopathy and establishes that the Board may grant licenses to an applicant in extraordinary circumstances as specified. Also establishes that the Board may either refuse to issue or may suspend any license for any incident, failure or disruption in the course of a physician's education, training or practice that indicates a lack of skill, competence, integrity or professional conduct or for other acts or failure that fails to conform to accepted standards of professional conduct.
West Virginia	Miscellaneous	Failed	HB	4596	Allows a caregiver of a minor who is not a parent, legal custodian or guardian to consent to health care for a minor through an affidavit.

<i>State</i>	<i>Issue</i>	<i>Status</i>	<i>LegType</i>	<i>Bill Number</i>	<i>Bill Summary</i>
West Virginia	Telemedicine	Failed	SB	733	Defines telemedicine and includes encouragement for telemedicine access within the proposed Electronic Telecommunications Open Infrastructure Act.
West Virginia	Scope of Practice	Failed	HB	4693	Defines the practice of athletic training and creates the Athletic Training Licensure Board to regulate such practice and license athletic trainers.
West Virginia	Scope of Practice	Failed	SB	202	Requires accident and sickness insurance, group accident and sickness insurance, hospital service corporations, medical service corporations, dental service corporations, health service corporations, health care corporations, and health maintenance organizations to provide coverage acupuncture treatment performed by a licensed acupuncturist.