

MSMS Monitored Legislative Activity Summary – 05/13/08

Bill	Bill Summary	MSMS Board Position	Bill Status
Senate Bill 5 Bill Hardiman (R - Kentwood)	Would increase scope of practice of marriage counselors to include the term “psychotherapy” within the definition of the practice of marriage therapy.	Oppose	Referred to Senate Health Policy Committee. No action pending.
Senate Bill 23 Buzz Thomas (D – Detroit)	Would create a tax credit for physicians that locate in medically underserved communities.	Support	Referred to Senate Finance Committee. No action scheduled at this time.
Senate Bill 41 Martha Scott (D – Highland Park)	Would create contraceptive equity i.e. insures that provide pharmaceutical coverage for their insured would have to cover contraceptive costs at comparable levels.	Support	Referred to Senate Health Policy. No action pending.
Senate Bill 245 Buzz Thomas (D – Detroit)	This legislation would mandate that Nurse Practitioners located in underserved areas be reimbursed by Medicaid at the same level as physicians.	Oppose	Referred to Senate Health Policy. No action pending.
Senate Bills 329&330 Bruce Patterson (R – Canton)	This legislation would create mental health parity within health insurance by ending the discriminatory practice of charging higher co-pays and more restrictive lifetime maximums that exist within the current insurance market.	Support	Referred to Senate Health Policy. MSMS is continuing to work with advocates in the mental health community including psychiatrists to make this issue a priority for legislators. While this bill has been the subject of a fair amount of favorable press coverage, it is not scheduled for any legislative action at this time.
House Bill 4044 Mike Simpson (D – Jackson)	This legislation would eliminate the provision in the law that provides legal immunity to the manufacturer or seller of a drug if the drug has received approval from the Food and Drug Administration. If repealed, physicians could be subject to lawsuits currently not actionable under the existing law. This legislation has passed out of the House by a vote of 70-39.	Oppose	The bill has been sent to the Senate where it was referred to the Senate Judiciary Committee. Currently, no action has been scheduled in the Senate.

House Bill 4163 Brenda Clack (D – Flint)	This legislation would prohibit smoking in all indoor workplaces including bars and restaurants. MSMS is an active participant in the Campaign for Smoke-free Air (CSA), which is working to have this issue addressed by the legislature as quickly as possible.	Support	Passed in Senate with a vote of 25 to 12, with 1 excused, on 05-08/08.
House Bill 4146 Frank Accavitti (D-East Pointe)	This legislation seeks to license tanning facilities as well as establish parental consent requirements for use by minors.	Support	Passed with a vote of 83-55 on 05/08/08. Referred to Senate Committee on Economic Development and Regulation Reform.
Senate Bills 125 & 508 Deborah Cherry (D-Burton)	Would require minimum standards for physical education for school-aged children.	Support	Referred to Senate Education Committee. No action pending
House Bill 4036 Frank Accavitti (D-East Pointe)	Establishes minimal nutrition standards for foods offered to children in schools.	Support	Referred to House Health Policy Committee. No action pending
House Bills 4702 & 4792 Joe Hune (R-Fowlerville)	Seeks to reduce the obligation of insurers to pay for benefits to patients injured in auto accidents.	Oppose	Referred to House Insurance Committee. No action pending
House Bill 5077 John Espinoza (D-Croswell)	Restricts ability of an insurer to require a patient to switch to a different anti-convulsion drug if patient is stable on current drug regimen.	Support	Referred to House Health Policy Committee. No action pending
House Bills 4971 & 4972 Steven Bieda (D-Warren)	Creates regulatory process whereby bars and restaurants could obtain a permit to allow smoking in their establishment.	Oppose	Referred to House Tax Policy Committee. No action pending
House Bill 4038 LaMar Lemmons (D-Detroit)	Permits the use of marijuana for medicinal purposes.	Oppose	Referred to House Judiciary Committee. No action pending
House Bill 4810 Marie Donigan (D-Royal Oak)	Creates a class of licensure for Speech Language Pathologists (SLP)	Oppose	Referred to House Health Policy Committee. No action pending
House Bill 5098 Bettie Scott Cook (D-Detroit)	Seeks the forfeiture of personal injury benefits covered under current auto no-fault laws for motorcycle operators who do not wear helmets.	Oppose	Referred to House Health Policy Committee. No action pending

House Bills 5282 & 5283 Virgil Smith (D-Detroit) Ed Gaffney (R- Grosse Pointe Farms)	Seeks to amend PA 350 and the Insurance Code to change the underwriting requirements within the individual group market.	Oppose as written	Passed in the Senate with a vote of 23 to 13, with 1 excused and 1 not voting, on 05-01-08
House Bills 4940-4945 Paul Condino (D-Burton) Kathy Angerer (D-Dundee) Brenda Clack (D-Flint) Andy Coulouris (D-Saginaw) Ed Gaffney (R-Grosse Pointe Farms) Brian Calley (R-Portland)	Designed to incorporate the Uniform Anatomical Gift Act (UAGA) into Michigan Statute.	Support	Signed into law by Governor on 03-13-08. PA 39 of 08.
Senate Bill 717 Gilda Jacobs (D-Huntington Woods)	Would pharm the lic prescr physic author functio	<h1>Draft copy</h1>	ferred to the Senate Health Policy committee. No action pending.
House Bill 4828 Rick Jones (R-Grand Ledge)	Seeks a Sche		ferred to the House Health Policy committee. No action pending.
Senate Bill 716 Tom George, MD (R-Portage)	Would Access which individuals are allowed to obtain access to autopsy reports.		igned into law by Governor on 05/08/08. 124 of 08
House Bill 5110 Michael Sak (D-Grand Rapids)	Requires standards for cigarettes sold in the state of Michigan		Support
Senate Bill 908 Wayne Kuipers (R-Holland)	This bill seeks to change the existing language in the public health code to expand chiropractic scope of practice	Oppose	Referred to Senate Health Policy Committee. No action pending.

	from the “spinal column” to the “musculoskeletal system.”		
Senate Bill 1071 Cameron Brown (R-Sturgis).	This bill seeks the creation of a uniform credentialing system for Michigan’s health care industry.	Oppose	Referred to Senate Health Policy Committee. No action pending.
House Bills 5578 & 5579 Ted Hammond (D-Burton)	These bills intend to ensure that coverage for prostate cancer screening is included for those who are 50 years of age or older and are at high risk for prostate cancer.	Oppose	Referred to Senate Health Policy Committee. No action pending.
House Bill 5474 Bruce Caswell (R-Hillsdale)	This bill seeks to remove the prohibition of dispensing a controlled substance prescribed by a physician located in a state other than Michigan.	Support	Referred to Senate Health Policy Committee. No action pending
House Bills 5596 & 5599 Michael Sak (D-Grand Rapids)	These bills seek to mandate hearing screenings for infants prior to leaving the hospital and adults prior to a diagnosis of dementia.	Oppose	Referred to Senate Health Policy Committee. No action pending
Individual Market Reform	The version of the reform bills passed by the House of Representatives was decidedly in favor of BCBSM and contained provisions that included rate bands, high-risk pools, and the elimination of oversight responsibilities by the Attorney General and the Insurance Commissioner. MSMS responded by drafting a series of principles that raised concerns over certain elements of the proposed reforms. The Senate Health Policy Committee undertook an extensive review of the existing individual market and arrived at a much different conclusion than the House. The Senate through a series of negotiations over legislative language have passed bills that address many of the concerns raised by MSMS. The Senate substitute version (S-5) includes some elements to level the playing field by minimizing the ability of insurers to drop bad risk, retains regulatory oversight, requires a study on competitiveness, provides greater oversight of the charitable mission of BCBSM, streamlines time frames for BCBSM rate filings, and allows BCBSM to consider smoking and wellness in their underwriting. Because this version is much closer to the intent of MSMS, the Committee recommends supporting the version passed by the Senate. The Committee was informed that the Senate version is largely the result of the considerable efforts of Senator Tom George, MD, to undertake an extensive review of the individual market and address the legitimate concerns of the market without creating an undue advantage for any single company.		

Pending Liability Legislation Mark Meadows (D-East Lansing)	Proposed legislation would make changes to expert witness qualifications, notice of intent, and affidavit of merit that would be at the expense of physicians. MSMS opposes this legislation
Single Business Tax (SBT) Replacement	The legislature and the governor have agreed on the proposal to implement the Michigan Business Tax (MBT). The new tax is slated to bring into state coffers the same \$1.9 billion the soon-to-be retired Single Business Tax (SBT) generated, out-of-state businesses will pay around \$100 million more while manufacturers see property tax relief as high as 67 percent. The MBT includes credits for companies that invest in Michigan while increasing the state's insurance tax 17 percent from 1.07 percent to 1.25 percent. As part of the agreement for the repeal of the state tax on services, there will be an additional surcharge of 22% of the MBT calculation for businesses.
Tax on Services	Part of the reconciliation for the 2008 budget included a proposal to tax many services at a rate of 6%. While health care was not included, there were several services used by physician practices that would be subject to taxation. There was a tremendous backlash by the business community to this tax structure. Consequently, this tax was repealed. The revenue generated by the tax on services was replaced by the adoption of a 22% surcharge to the Michigan Business Tax.
2008 Budget	The terms of the fiscal year 2008 budget have finally been resolved prior to the October 31 deadline set by the legislature and the governor. No cuts to physician reimbursement or GME, and preservation of essential programs in the Healthy Michigan Fund were key elements of the agreement. Cuts to these programs were avoided through an increase of the hospital Quality Assurance Assessment Program (hospital provider tax) that was able to further leverage federal dollars to help pay for the remaining shortfall in the MDCH budget. Intent language was also added to signal the desire of the legislature to increase fees paid to physicians in future budgets.

***Items in boldface type have been updated since the last published grid.*