



2011 STATE LEGISLATIVE PRIORITIES

Each year, the AAO-HNS reviews thousands of bills introduced in legislatures across the country to determine relevancy to the specialty. Of those bills, the AAO-HNS actively tracks hundreds of pieces of legislation at any given time. For a full listing of the bills being monitored by the AAO-HNS, visit the State Advocacy website (www.entnet.org/Practice/members/stateAdvocacy.cfm) and access our bill tracking center, which provides real-time access to active state legislation and relevant information. The following is a brief summary of some of the Academy's 2011 priority bills and other highlights from the year.

Scope of Practice

The AAO-HNS believes it is appropriate for non-physician providers to seek updates to statutes and regulations relating to their defined scope of practice to reflect advances in education and training. However, the AAO-HNS strongly opposes state legislation that would inappropriately expand the scope of practice of non-physician providers beyond their education and training. Enabling non-physician providers to independently diagnose, treat, or manage medical disorders could adversely affect the quality of patient care. This year, the AAO-HNS is advocating modifying and/or defeating several potentially harmful bills that would inappropriately expand the scope of practice of non-physician professionals.

- In **South Dakota**, the AAO-HNS successfully opposed a bill regulating the practice of speech-language pathology. The bill, as proposed, would have inappropriately expanded their scope of practice to allow speech-language pathologists to diagnose, manage, and treat. The bill had passed the House, but was tabled in a Senate committee.
- Similarly, the **West Virginia** legislature was considering a scope of practice expansion bill for speech-language pathologists and audiologists. The AAO-HNS worked closely with the state medical association to highlight concerns as the bill moved through the legislative process. The bill had passed the House, but the Senate committee declined to move it forward prior to the end of their legislative session.
- Companion bills in **New York** seek to permit non-physician oral and maxillofacial surgeons to perform elective surgeries in the oral and maxillofacial regions if granted hospital privileges. The AAO-HNS is working as a coalition with other national organizations to defeat this legislation.

Taxes on Medical Procedures

Each year, there is a re-emergence of proposals to tax medical procedures, and in light of extensive state budget shortfalls, this year has been no exception. The Stop Medical Taxes Coalition, of which the AAO-HNS is a member, asserts that the taxation of medical procedures is unfair for patients and is a "slippery slope" towards the taxation of other medical services.

- In **Connecticut**, a 6.25% cosmetic medical procedures tax was included in the Governor's budget proposal. The AAO-HNS and other Coalition members submitted written testimony to the Connecticut legislature in opposition to the proposed tax.
- The **Washington** House was considering a sales and use tax on cosmetic procedures to fund the maintenance of basic health program enrollment. The bill failed to clear the House by the "cross-over" date, so the legislation is dead for 2011.
- **New Jersey** has reintroduced a bill to repeal the 6% tax currently imposed on cosmetic procedures. The tax would be reduced by 2% each year, for 3 years, ending with a 0% tax rate.

Hearing Aid Services

The coverage of, sale, and dispensing of hearing aids is an issue considered by several states in various forms each year.

- In **New York**, the AAO-HNS is working with the Patient Access to Hearing Aids (PAHA) Coalition to pass a bill that would expand patients' access to hearing aid services by striking an archaic law prohibiting physicians from deriving a profit on hearing aid sales. This year, the PAHA Coalition attained introduction of both a Senate and an Assembly bill.
- Several states are considering bills to require insurers to cover the cost of or expand benefits for hearing aids and/or cochlear implants, including **California, Hawaii, Illinois, Kansas, Maryland, Massachusetts, Minnesota, New Hampshire, New York, Tennessee, and Vermont**. Several states are also considering bills that would provide a tax credit and/or exemption for hearing aids, including **Arizona, Arkansas, Florida, Michigan, and Oklahoma**.

Truth in Advertising

With the emergence of clinical doctorate programs for non-physician providers, which has led to many degree holders referring to themselves as "doctors," there is growing confusion within the patient population about the level of training and education of their healthcare providers. In 2011, truth-in-advertising bills were introduced in **California, Colorado, Idaho, Massachusetts, New York, and Wyoming**.

- In **Colorado**, there was a proposed bill that failed to progress beyond committee. The bill would have required practitioners to wear photo ID badges that stated their type of license. Practitioners would have also been responsible for communicating to their patients if care was being provided by someone other than a medical doctor or doctor of osteopathic medicine.
- The **Massachusetts** legislature is currently considering a bill that would add the term "oral physician" for dentists' scope of practice and for compliance with the current truth-in-advertising language.

Tobacco Use and Smoking Cessation

The AAO-HNS supports legislation and regulations that will help to reduce the use of tobacco products and exposure to secondhand smoke in order to promote healthy environments and lifestyles for the public. This year thus far, bills have been introduced in 14 states that sought to strengthen existing smoking ban laws, including **Alabama, California, Connecticut, Indiana, Iowa, Maryland, Massachusetts, Michigan, Mississippi, New Jersey, Oklahoma, South Carolina, West Virginia, and Wyoming**. A number of states are considering proposals to mandate insurance coverage and/or benefits for tobacco cessation, including **California, Connecticut, Hawaii, Massachusetts, Mississippi, New York, and Washington**. There are a couple of states, **Hawaii and Illinois**, that have proposed legislation to exempt certain establishments from a smoking ban if they were to become licensed as exempt.

Medical Liability Reform

Thus far in 2011, there are 22 states considering various tort reform measures, including those related to affidavits of merit, alternative reforms, caps on non-economic damages, defensive medicine issues, expert witnesses, health courts, or pre-trial screening panels. Those that considered enacting or modifying caps on non-economic damage awards in medical liability cases include **Connecticut, Hawaii, New Jersey, Virginia, Wisconsin, and Wyoming**.

For more information on state legislative issues or specific measures, contact legstate@entnet.org or 1-703-535-3794.