# MSSNY Breakdown of the 2017-2018 State Budget Proposals

<table>
<thead>
<tr>
<th>Bill Info</th>
<th>Topic</th>
<th>Governor's Proposal</th>
<th>MSSNY Position</th>
<th>Senate One House</th>
<th>Assembly One house</th>
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<tr>
<td>Aid to Localities Appropriations</td>
<td>Excess Medical Malpractice Program</td>
<td>Funding for the Excess Medical Malpractice program would be continued at the historic level $127.4 million</td>
<td>MSSNY Supports and agrees with the Executive and the Legislature's position</td>
<td>Senate Accepts</td>
<td>Assembly Accepts</td>
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<tr>
<td>Revenue Article VII Part W</td>
<td>Excess Medical Malpractice Program Tax Clarence</td>
<td>Requires Physicians to receive a “tax clearance” as a pre-condition to receiving Excess Medical Malpractice Insurance coverage.</td>
<td>MSSNY Opposes and supports the Legislature’s position</td>
<td>Senate Rejects</td>
<td>Assembly Rejects</td>
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<tr>
<td>Revenue Article VII Part FF</td>
<td>E-Cigs</td>
<td>Regulates and taxes vapor products in the same manner as tobacco products under the Clean Indoor Air Act and extends regulations on tobacco products to vapor products such as coupon restrictions, prohibiting the use of vapor products on school grounds and by school bus drivers.</td>
<td>MSSNY Supports the Governor and and Assembly’s proposal</td>
<td>Senate included language supported by MSSNY to regulate vapor products, but did not include the taxing provisions.</td>
<td>Assembly Accepts</td>
</tr>
<tr>
<td>Health &amp; Mental Hygiene Article VII Part J</td>
<td>Pharmacy Benefit Manager Registration and Regulation</td>
<td>Requires the registration and regulation of Pharmaceutical Benefit Manager (PBMs) and disclosure of financial incentives</td>
<td>MSSNY Supports</td>
<td>Senate did not include this provision, instead requiring PBMs to disclose information to the health plans they contract with.</td>
<td>Assembly Accepts</td>
</tr>
<tr>
<td>Health &amp; Mental Hygiene Article VII Part D § 10-12</td>
<td>Repeals Prescriber Prevails</td>
<td>The executive budget proposed to repeal Prescriber Prevails for all drug classes in Fee for Service and Managed Care, except for atypical-antipsychotics and antidepressants</td>
<td>MSSNY Opposes and supports the Legislature’s position</td>
<td>Senate Rejects</td>
<td>Assembly Rejects and adds provisions to expand prescriptions to all of Medicaid Managed Care</td>
</tr>
<tr>
<td>Health &amp; Mental Hygiene Article VII Part D §13</td>
<td>Comprehensive Medication Management Protocols</td>
<td>Pharmacists would be permitted to enter into “comprehensive medication management protocols” with physicians or nurse practitioners to manage and adjust the medications of patients with a chronic disease or diseases who have not met clinical goals of therapy, are at risk for hospitalization. Allows a pharmacist to actually change a medication that was prescribed by a physician instead of simply changing the frequency or dosage.</td>
<td>MSSNY Opposes and supports the Legislature’s position</td>
<td>Senate Rejects</td>
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<td>Health &amp; Mental Hygiene Article VII Part L</td>
<td>Health Care Regulation Modernisation Team</td>
<td>The part creates the Health Care Regulation Modernisation Team to review ways to restructure health care statutes, policies, and regulations and make recommendations to the governor of its findings by December 31, 2017. One of the most troubling parts of the proposal is that it would allow the commissioner of health, commissioner of mental health and the commissioner of the office of alcoholism and substance abuse services to implement demonstration programs to deliver health care services while notwithstanding any other provisions of law.</td>
<td>MSSNY Opposes</td>
<td>Senate Rejects broad power to the Executive for demonstration programs. The Senate included language to establish a workgroup with a bigger role for the legislative but narrowed the scope, deleting the topic included in the Executive Budget proposal of revising &quot;scope of practice&quot; laws and deleting provisions that would give power to various agency commissioners to implement demonstration programs without the need for legislative approval.</td>
<td>Assembly Rejects</td>
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<td>Health &amp; Mental Hygiene Article VII Part D</td>
<td>Opioid Prescribing</td>
<td>These sections make the &quot;inappropriate prescribing of opioids&quot; an unacceptable provider practice in the Medicaid program, giving the state discretion to remove a physician or other prescriber from the program.</td>
<td>MSSNY supports the additional Senate Language and will work with all parties to include in the final budget.</td>
<td>At MSSNY's request, the Senate included language to assure that there first be a legal determination that the prescriber did in fact violate the opioid limit rather than giving Medicaid officials arbitrary authority to make this determination.</td>
<td>Assembly Accepts</td>
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<td>None</td>
<td>Health Republic</td>
<td>No funding allocation.</td>
<td>All proposals fail to include funding to address the hundreds of millions in claims payments due health care providers from Health Republic Insurance Company. With physicians likely eventually only to be paid pennies on the dollar, this special fund should receive an appropriation to pay for these claims</td>
<td>No funding allocation.</td>
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<td>Senate One House</td>
<td>Workers' Compensation Reform</td>
<td>None</td>
<td>MSSNY supports administrative simplification process and reducing carrier delays</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>Senate One House</td>
<td>Physician Profiles</td>
<td>None</td>
<td>MSSNY is querying whether DOH or the physician is responsible for the accuracy of the information</td>
<td>None</td>
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- **Workers' Compensation Reform**
  - The Senate is committed to achieving workers' compensation reforms. The Senate advances a variety of reforms, including updates to durational caps and schedule loss of use awards, ensuring prompt access to quality medical care and lost wage benefits, enhanced incentives for workplace safety programs, and implementation of an efficient hearing process.
  - Further, to improve the overall system, the Senate will advance reforms to reduce frictional costs, streamline forms, improve independent medical examinations (IMEs), and require implementation of a prescription drug formulary by December 31, 2017.

- **Physician Profiles**
  - The Senate advanced a new proposal to include information on physician profiles that detail each physician's health plan participation information that DOH currently collects. The information would be required to be included on the profile by DOH, not the physician, based on information maintained by DOH. The proposal would also enable a physician to designate staff to complete and update the physician's profile information.