



Tennessee Occupational Therapy Association

The 2023 legislative session began January 10th and adjourned April 21st. This year, Capitol & 5th tracked 58 bills on behalf of TNOTA. We saw a significant decrease in COVID-19 related legislation- a drastic change from last year's session. Licensing rules, prior authorization, and women's health were among the large topics in healthcare this year. There were two bills passed that restrict barriers and streamline the process for occupational therapy licenses:

****TNOTA PRIORITY****

SB458/HB496: Senator Bo Watson, Representative Brock Martin

Directs health related boards to promulgate rules that expedite the application process for occupational licenses by requiring the boards to make a determination on applications within 60 days of the date they are submitted. This bill passed both chambers and awaits the Governor's signature.

SB296/HB779: Senator Todd Gardenhire, Representative Esther Helton-Haynes

Directs the board of medical examiners, board of osteopathic examination, board of nursing, or board of physician assistants to render a decision on completed applications from a licensed out-of-state applicant, and inform the applicant of need to appear before the board, within 60 days of receipt of the application. The House and Senate passed this bill, and it awaits signatures from each speaker.

Additional legislation of interest that passed this year:

SB1345/HB1503: Senator Bo Watson, Representative Kevin Vaughan

Enacts the "Surprise Billing Consumer Protection Act", which makes changes to the law regarding network adequacy of managed health insurance issuers including all emergency procedures, nonemergency procedures, and previously documented procedures that may result from an occurrence in which charges arise from a covered person receiving healthcare services from an out-of-network provider at an in-network facility. Signed by Governor Bill Lee- awaiting public chapter assignment.

SB666/HB885: Senator Shane Reeves, Representative David Hawk

Amendment 1 rewrote the bill to enact the "Prior Authorization Fairness Act". The bill in its final form, among other things, requires that utilization review organizations perform: 1) A non-urgent prior authorization review within seven calendar days; and (2) An urgent prior authorization review within 72 hours, plus, if applicable, one additional business day. The Act does not apply to healthcare plans under TennCare, ERISA, or CoverKids. It has been sent to the Governor's desk.

SB1392/HB1213: Lt. Governor Randy McNally, Speaker Cameron Sexton

This bill authorizes an enrollee in a healthcare plan to choose to pay for healthcare services out-of-pocket from an out-of-network provider. Enrollee's must submit certain documentation to the carriers if the enrollee negotiates for a lower cost for healthcare services and pays out-of-pocket. It further requires that carriers count out-of-pocket payments by the enrollee toward the enrollee's deductible, coinsurance, copayment, or other cost-sharing amount if the service is included in the healthcare plan. This legislation has been enacted as Public Chapter 244, effective July 1, 2023.