

# SOUTH DAKOTA STATE MEDICAL ASSOCIATION

*Values. Ethics. Advocacy.*

## 2010 Legislative Accomplishments

There were 474 bills introduced during South Dakota's 2010 Legislative Session. Throughout the course of the Session, the South Dakota State Medical Association (SDSMA) tracked 44 bills dealing with health care that would have had an impact on the practice of medicine in South Dakota. Of these 44 bills, the SDSMA supported seven, opposed 11 and monitored 26.

Bills signed by the Governor become effective July 1, 2010, unless they contain an emergency clause that provides for immediate enactment.

### Expanding Access to Care

HB 1043 addressed three areas of concern regarding the state's risk pool: adjusting how premiums are calculated, creating more plan options for risk pool beneficiaries and making the current eligibility standards for medically uninsurable children more reasonable. The SDSMA monitored this bill, which was signed by the Governor.

HB 1044 was a Department of Health (DOH) bill authorizing an appropriation to reimburse certain family physicians and dentists who have complied with tuition reimbursement programs. The program acts as a recruitment tool and promotes access to quality care. The SDSMA supported this bill, which was also signed by the Governor.

HB 1235 proposed to increase funding for certain providers of medical services, including Medicaid. The SDSMA supported HB 1235, which was tabled by a 6-3 vote in the House Appropriations Committee.

SB 193 was introduced to increase Medicaid eligibility for certain pregnant women. The SDSMA monitored this bill, which failed in the Senate Appropriations Committee.

### Improving Public Health

HB 1064 proposed to establish a process for persons rendering emergency aid to request testing for blood-borne pathogens and to provide for the confidentiality of the source individual. The initial legislation contained no protection for the source individual, so the SDSMA supported

an amendment to include that protection which was passed in the House Health and Human Services Committee. The SDSMA supported the amended version of the bill, which was signed by the Governor.

Two bills were introduced to restrict the use of certain electronic devices while driving. The SDSMA monitored HB 1133, which sought to prevent minors from using anything other than a GPS while driving. HB 1133 was deferred to the 41st legislative day by the House Health and Human Services Committee, 9-4. The SDSMA supported HB 1178, which proposed to prohibit the use of electronic devices to text or e-mail while driving. HB 1178 failed reconsideration on the House floor by one vote, 33-34.

HB 1163 proposed to transfer funds from the tobacco prevention and reduction trust fund, the fund used to operate the QuitLine and other valuable tobacco-cessation programs in the state, to the general fund in order to help balance the budget. The SDSMA opposed the bill, which was tabled by the House Appropriations Committee, 9-0.

HB 1231 was introduced to provide for the monitoring of the prescribing and dispensing of controlled substances. While the SDSMA has supported the creation of a prescription drug monitoring program (PDMP) in concept, the SDSMA actively lobbied to have the bill amended to include SDSMA representation relating to program oversight and to ensure the confidentiality of patient-level data. The bill has passed both houses and was signed by the Governor.

HB 1253 was an effort to add an exemption to the smoking ban measure that will be on the 2010 election ballot. The exemption would have authorized smoking in establishments only open to ages 21 and over. The SDSMA opposed HB 1253, which was deferred to the 41st legislative day by the House Health and Human Services Committee, 11-0.

HB 1256 proposed to allow the primary enforcement of seat-belt use for front-seat passengers in motor vehicles. The SDSMA supported the bill, which was deferred to the 41st legislative day by the House Judiciary Committee, 7-6.

SB 74 was introduced to clarify the use of treatments involving human embryonic stem cells. The SDSMA monitored the bill, which failed on the Senate floor, 12-21.

SB 154 and SB 158 both sought to regulate the use of tanning facilities in South Dakota. SB 154 would have prohibited the use of tanning devices by anyone under the age of 18, while SB 158 stated a customer under 18 years old may not be permitted to use the tanning facility until the customer provided the facility with written consent of a parent or legal guardian. SB 158 also contained language that would have required tanning facilities to give each customer written notification of the danger of tanning and post the same information inside their place of business. The SDSMA supported both bills, and although both passed out of the Senate Health and Human Services Committee, both failed on the Senate floor.

### Promoting Quality Through Scope of Practice

HB 1183 was an act to allow birth centers to operate in the state. The SDSMA opposed this bill, which passed through the House but was deferred to the 41st legislative day by the Senate Health and Human Services Committee, 4-3.

HB 1203 would have provided for the regulation of acupuncturists. The SDSMA opposed HB 1203, which was deferred to the 41st legislative day by the House Health and Human Services Committee, 9-2.

HB 1230 would have permitted certain persons to assist women during pregnancy and childbirth under certain conditions, thus decriminalizing midwifery. The SDSMA opposed HB 1230, which was deferred to the 41st legislative day by House Health and Human Services Committee, 10-2.

SB 96 was initially a bill pertaining to the licensure of lay midwives, but the bill was houghoused to remove the sunset clause on the current law passed in 2008 that allows certified nurse midwives to obtain a waiver to attend births outside of a hospital setting; the bill from 2008 would have expired in June 2013. The SDSMA opposed SB 96, which has passed both houses and was signed by the Governor.

SB 107 would have allowed lay midwives to perform out-of-hospital births. The SDSMA opposed this bill, which was deferred to the 41st legislative day by the Senate Health and Human Services Committee, 7-0.

### Other Legislative Issues

HB 1068 would have revised the limitation on damages for medical malpractice actions. The SDSMA actively opposed this legislation, which was deferred to the 41st legislative day by the House Judiciary Committee, 13-0.

HB 1116 would have limited certain outside employment and compensation by presidents and CEOs of state institutions of higher education. The SDSMA opposed this legislation due to the potential impact it would have had on faculty of the Sanford School of Medicine of The University of South Dakota. HB 1116 was tabled by the House State Affairs Committee, 12-1.

HB 1204 would have authorized reasonable suspicion testing and prohibit the use of controlled substances by welfare recipients. The SDSMA monitored this bill, which was tabled by the House Health and Human Services Committee, 11-0.

SB 84 would have revised certain provisions relating to comparative negligence, meaning a plaintiff who was found to be up to 49 percent negligent could still recover damages. The SDSMA actively opposed SB 84; the bill failed reconsideration on the Senate floor, 16-18.

SB 132 would permit the use of certain DNA samples to determine parentage under certain conditions. The SDSMA monitored this bill, which has passed both houses and was signed by the Governor.

SB 137 was an act to nullify certain federal health care laws within the state of South Dakota. The SDSMA monitored this bill, which failed on the Senate floor, 11-23.

SB 142 would have prohibited certain businesses and affiliated persons from making political campaign contributions to state officeholders or candidates if the business entity does contractual business with certain state agencies. The SDSMA monitored this bill, which was deferred to the 41st legislative day by the Senate State Affairs Committee, 6-2.

SB 169 would limit the subrogation of certain insurers until the insured is made whole. The SDSMA strongly opposed the bill due to its potential to increase medical liability insurance premiums. The bill passed both houses, but was vetoed by the Governor. The bill then failed to gain the necessary votes to override the veto in the Senate.

*The SDSMA's Legislative Accomplishments is the Association's annual report on legislation the SDSMA monitored during the state legislative session. For more information, log on to [www.sdsma.org](http://www.sdsma.org) or contact the SDSMA at 605.336.1965.*