

January 16, 2015

# InSession

SOUTH DAKOTA  
STATE MEDICAL ASSOCIATION  
*Values. Ethics. Advocacy.*

*Advocating for the Highest Standards in Patient Care,  
Practice Management and Professionalism in the State's Capital*

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## Welcome to *InSession*

As a way to ensure that SDSMA members have access to the most current information on the 2015 South Dakota State Legislature, *InSession* will be sent each week to your preferred e-mail account. The news bulletin will cover what occurred in Pierre during the week as it relates to your profession, as well as a look ahead (“On Deck”) to important issues and legislation expected to be introduced or considered in committee and on the floor. Each edition of *InSession* will also be posted in the member-secure area of the SDSMA’s website, [www.sdsma.org](http://www.sdsma.org).

It is our hope that *InSession* will provide you with timely, accurate information in a manner that is easy to use, easy to understand, and valuable in your efforts as an advocate for your profession. Please send any thoughts or suggestions via the Contact Us link on the SDSMA website, [www.sdsma.org](http://www.sdsma.org).

## SDSMA Leadership Meet with Gov. Daugaard

As the legislative session opened this week, SDSMA President Mary Milroy, MD, and CEO Barb Smith met with Gov. Dennis Daugaard to discuss issues of concern to the SDSMA. Dr. Milroy expressed appreciation for the governor’s proposed two percent increase in Medicaid reimbursement however, expressed concern that rates are not keeping up with inflation and utilization of services. The SDSMA is also concerned about the loss of the federally funded Primary Care Provider Enhanced Payment Program (PCP EPP). The PCP EPP was initiated by the Patient Protection and Affordable Care Act (ACA) and had increased Medicaid reimbursement rates for certain primary care providers to Medicare rates for the last two years. The PCP EPP program came to an end December 31, 2104 and we are concerned about the impact that the loss of this program will have on access to health care services for Medicaid beneficiaries. It is estimated that primary care providers will lose \$0.31/dollar in reimbursement because of the loss of the PCP EPP. The SDSMA has called on the administration to add 2013-14 reimbursement levels for primary care services to the state budget for FY2016 and beyond.

The SDSMA is also concerned about the governor's failure to include Medicaid expansion in his budget. Medicaid is an integral part of South Dakota's health care system and is used by thousands of South Dakotans who need it most – the disabled, the poor elderly, and children. Because South Dakota has not expanded Medicaid, we have the unfortunate situation in which those with incomes below 100 percent of the poverty level are left with no coverage. We believe expanding Medicaid eligibility will provide much needed coverage for those who need it most while ensuring access to care and improving the health and well-being of the newly insured.

When meeting with the governor, SDSMA also spoke on behalf of the a bill to allow for the creation of an Interstate Licensure Compact and concerns regarding the use of tanning beds by teens.

The South Dakota Board of Medicine and Osteopathic Examiners will be bringing forth a bill to allow the creation of an Interstate Medical Licensure Compact for the purpose of states working together to expedite the licensure process for physicians who seek licensure in multiple states. The SDSMA believes the Federation of State Medical Boards' Interstate Medical Licensure Compact represents an effort to develop a dynamic, self-regulatory system of expedited licensure in which member states can maintain control of their respective licensure requirements while providing the opportunity for a substantial reduction in the time and energy it takes for physicians to be issued a license in participating states.

The SDSMA will also advocate for the passing of restrictions on indoor tanning. According to the Centers for Disease Control and Prevention, frequent exposure to ultraviolet (UV) rays for individuals under the age of 35 increases the risk of developing melanoma – the most aggressive and deadliest form of skin cancer – by 75 percent. And in 2012 alone, the American Cancer Society estimates that there were 76,000 new cases of melanoma and nearly 9,200 deaths.

In May, the U.S. Food and Drug Administration issued a final order reclassifying sunlamp products and ultraviolet lamps from low-risk (Class I) to moderate-risk devices (Class II). The order also requires that UV products carry a visible black-box warning on the device that explicitly states that the product should not be used on persons under the age of 18 years. The SDSMA hopes that South Dakota will join the 41 other states that regulate indoor tanning for minors.

## Weekly Recap

The South Dakota State Legislature began its 2015 session on Jan. 13 with Gov. Dennis Daugaard's State of the State address in which he outlined his top priorities.

At the top of Gov. Daugaard's list were road and bridge improvements, juvenile justice reforms, and workforce development.

In addition, Gov. Daugaard provided an update on the state's continued efforts to reduce infant mortality. The rate has decreased from 8.6 deaths per 1,000 live births in 2012 to 6.5 in 2013. Safe sleep kits have been distributed to more than 4,000 parents and other caregivers in low income families without a safe sleep option. The media campaign "For Baby's Sake" remains active, focusing on safe sleep, early signs of pregnancy, and the importance of prenatal care and immunizations.

The SDSMA was disappointed the governor did not weigh in on Medicaid expansion in his speech. The association supports Medicaid expansion for those making less than 100 percent of poverty, and SDSMA's 2015 Advocacy Agenda calls for reforming Medicaid to ensure that physician payment keeps pace with rising costs and is based on outcomes and value, support for Medicaid health homes to coordinate care for individuals with chronic conditions, and opposition to further exemptions from certain childhood immunizations. Making sure patients have the opportunity to make well-informed decisions when it comes to a provider's training, certification and field of expertise is also a priority for the SDSMA.

In addition, the SDSMA has long been an advocate for increased funding for medical education as the state's need for physicians will only increase as our population ages. Last year, the legislature approved Gov. Daugaard's proposal to

expand medical school slots by 44 students over the next four years at the University of South Dakota Sanford School of Medicine. The SDSMA looks forward to continuing to work with Gov. Daugaard and the legislature to address the state's shortage of physicians to ensure access to high-quality care for South Dakota patients.

A transcript of the State of the State address can be found online at <http://sd.gov/governor/speeches.aspx>.

## SDSMA Bill Tracker

[HB1015: An Act to repeal certain provisions regarding the South Dakota Risk Pool.](#)

Read; referred to House Health & Human Services committee; scheduled for hearing Jan. 20.

SDSMA Position - monitor

[HB1045: An act to revise certain provisions regarding licensure of dentists, and dental hygienists and registration of dental auxiliaries.](#)

Read; referred to House Health & Human Services committee; scheduled for hearing Jan. 20.

SDSMA Position - monitor

[HB1052: An act to revise certain provisions regarding the regulation of insurance holding companies.](#)

Read; referred to House Commerce & Energy committee.

SDSMA Position - monitor

[HB1057: An act to make an appropriation to reimburse certain eligible health care professionals.](#)

Read; referred to House Appropriations committee.

SDSMA Position - monitor

[HB1058: An act to revise certain provisions regarding contagious disease control quarantine measures.](#)

Read; referred to House Health & Human Services committee; scheduled for hearing Jan. 20.

SDSMA Position - support

[HB1059: An act to allow authorized entities to access immunization information in certain circumstances.](#)

Read; referred to House Health & Human Services committee; scheduled for hearing Jan. 20.

SDSMA Position - support

[HB1060: An act to make an appropriation to reimburse certain family physicians, physician assistants and nurse practitioners.](#)

Read; referred to House Appropriations committee.

SDSMA Position - support

[SB14: An Act to provide for the possession and administration of opioid antagonists by first responders for the treatment of drug overdoses.](#)

Read; referred to Senate Health & Human Services committee.

SDSMA Position - monitor

[SB30: An Act to revise the review process for rate and policy form filing denials for insurers.](#)

Read; referred to Senate Commerce & Energy committee; scheduled for hearing Jan. 20.

SDSMA Position - monitor

[SB31: An Act to revise certain provisions regarding coordination of benefits between health plans.](#)

Read; referred to Senate Commerce & Energy committee; scheduled for hearing Jan. 20.

SDSMA Position - monitor

[SB45: An act to revise certain provisions relating to the sale of unpasteurized raw milk.](#)

Read; referred to Senate Agriculture & Natural Resources committee.

SDSMA position - monitor

[SB51: An act to repeal the contingency funds available for unanticipated costs related to medical services and to declare an emergency.](#)

Read; referred to Senate Appropriations committee.

SDSMA position - monitor

SB59: An act to establish a state debt collection office.

Read; referred to Senate Commerce & Energy committee.

SDSMA position - monitor

[SB60: An act to provide newborn screening of inherited and genetic disorders.](#)

Read; referred to Senate Health & Human Services committee.

**SDSMA position - support**

[SB61: An Act to place certain substances on the controlled substances schedule.](#)

Read; referred to Senate Health & Human Services committee.

SDSMA position - monitor

[SB63: An act to adopt the Interstate Medical Licensure Compact.](#)

Read; referred to Senate Health & Human Services committee.

**SDSMA position - support**

[SB70: An act to require that a mandatory child abuse reporter be present and available to answer questions.](#)

Read; referred to Senate Judiciary committee.

SDSMA position - monitor

## On Deck

As week 1 of the 88<sup>th</sup> legislative session draws to a close, 60 bills have been introduced in the House, and 71 bills in the Senate. The SDSMA is currently monitoring 12 bills and supporting five . Links to the bills are available in the SDSMA Bill Tracker, located above.

As issues unfold, the SDSMA will evaluate the merits of each bill and draw upon SDSMA and AMA policy, and our mission in order to make decisions to support or oppose bills. Find out more about [SDSMA's advocacy agenda](#) by going online.

## Know Your Legislators

As we move into the 2015 legislative session, it is imperative to familiarize yourself with your local legislators and the roles they serve within the legislative process. Below is a listing of Health & Human Services committee members for both the House of Representatives and Senate.

### Health & Human Services – House of Representatives

- Scott Munsterman, Chair;
- Steve Hickey, Vice Chair;
- Blaine “Chip” Campbell;
- Kristin Conzet;
- Lynne DiSanto;
- Lana Greenfield;
- Steven Haugaard;
- Leslie Heinemann;
- Thomas Holmes;
- Steven McCleerey;
- Jacqueline Sly;
- Karen Soli; and
- Mathew Wollmann.

### Health & Human Services – Senate

- Bruce Rampelberg, Chair;
- Craig Tieszen, Vice Chair;
- Jim Bradford;
- R. Blake Curd, MD;
- Troy Heinert;
- Phil Jensen; and
- Arthur Rusch.

## SDSMA PAC – Get Involved

With the mission of promoting public policy that's friendly to health care, the South Dakota State Medical Association Political Action Committee (SDSMA PAC) acts as the political arm of the SDSMA. Joining the SDSMA PAC is important to the medical profession, as the monies raised enable the SDSMA PAC to provide support and help elect pro-medicine candidates at the state level.

The SDSMA PAC has been one of the most influential PACs in the state; however, the SDSMA PAC's continued success depends upon your financial support and personal involvement. [Join SDSMA PAC](#) today to ensure the physician voice continues to be heard as decisions are made in Pierre both now and in the future that will impact how medicine is practiced.

## SDSMA Doctor of the Day

The SDSMA Doctor of the Day (DOD) program is responsible for providing a service to legislators and their assistants, and attending any medical emergency situations that may occur at the Capitol in Pierre. The SDSMA DOD program not only provides needed medical services for our legislators, but it also provides for a positive image of physicians and organized medicine. Five dates are still available. Please contact the SDSMA office if you are interested in serving as Doctor of the Day.

A special thank you to the following members for volunteering their services to the SDSMA DOD program.

### January

- 13: Mary Milroy, MD
- 14: Stephan Schroeder, MD
- 15: Stephan Schroeder, MD
- 16: David Kleinberg, MD
- 20: Robert Allison, MD
- 21: Thomas Huber, MD
- 22: Robert Sage, MD
- 23: Mary Milroy, MD
- 26: David W. Bean, MD
- 27: Matthew McDougall, MD
- 28: Tom Dean, MD
- 29: Tony Berg, MD
- 30: Daniel Heinemann, MD

### February

- 3: Annette Bosworth, MD
- 4: open
- 5: Stephen Schroeder, MD
- 6: Benjamin Aaker, MD
- 9: Tad Jacobs, DO
- 10: Robert Nuss, MD and Shawn VanGerpen, MD
- 11: open

### February (continued)

- 12: Patricia Peters, MD
- 17: Nicole Poppinga, MD
- 18: Matthew Owens, MD
- 19: Anora Henderson, MD
- 20: Tim Ridgway, MD
- 24: open
- 25: Lucio Margallo, MD
- 26: E. Paul Amundson, MD
- 27: Martin Christensen, MD

### March

- 3: David Sandvik, MD, Fatima Kidwai, MD, Kwabena Kwakye, MD and Kerry Blackham, MD
- 4: Mary Jo Olson, MD
- 5: H. Thomas Hermann, MD
- 6: open
- 9: John Jones, MD
- 10: open
- 11: Kerri Orstad, MD
- 12: Susan Anderson, MD
- 13: Amy Hogue, MD
- 25: Greg Wiedel, MD

