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# ADVOCACY

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Advocating for Wyoming Doctors and their Patients Since 1903

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## January 27-February 5, 2021 ~ Virtual Session Update

### What's already happened and what comes next?

We all anticipated this year's legislative session looking a little different given the world in which we're living. The word 'different' barely begins to describe the legislative process thus far. More than just the schedule, rules, leadership, and format are different this year with 21 new legislative faces in the House and Senate chambers.

In accordance with Wyoming's State Constitution, the 66th gavelled in on Tuesday, January 12, for the purposes of electing new leadership and adopting rules which provide the opportunity for virtual work. January 19-21 were filled with virtual standing committee meetings to consider and take public testimony on assigned bills in anticipation of the eight-day virtual session that started on January 27th.

The past eight days have been a whirlwind of activity in both the House and Senate. WMS is tracking at least 33 of the more than 210 legislative proposals posted to date. Of those 33 bills on the WMS radar, the legislature debated 13 of them rendering final decisions for this year on seven. Get the details on each of the 33 bills and their status on the [WMS Legislative Bill Tracker](#).

The legislature gavelled out today and won't gavel in again as a full body until March 1st when they plan to resume a hybrid in-person/virtual session. Legislative Standing Committees will convene to debate assigned bills for up to three days the week of February 22nd. The full [legislative schedule](#) can be viewed on the Legislative website.

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# Wyoming Medical Society

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Many of the bills being monitored by WMS this year can be loosely categorized into a few broad areas that include **public health and safety, the state's authority in times of public health emergencies, liability and immunity, scope of practice, and the cost of healthcare.** The comprehensive listing of all bills can be found in the WMS Legislative Bill Tracker, linked below. This update will narrowly focus on what was debated during the previous eight-day session. Legislative leadership intentionally avoided the more controversial of the bills for this initial session in order to conduct those potentially contentious debates in the hybrid session in March.

WMS Legislative Bill Tracker

## WMS Doc and PA of the Day

We apologize for not sending out more information about the Doc and PA of the Day program for March. We are in communication with legislative leadership as to how they think the Doc and PA of the Day program might work with the anticipated hybrid model for this year's session. As soon as we know more, we will get information out so those of you who so generously give of your time and energy each year can consider it again for 2021. Thank you for your patience while we work through this interesting year together!



## Bills That Received Final Action

Seven of the bills being monitored by WMS reached the end of their journey in the process in this past eight-day session. Those bills and their fate are as follows:

1. [Suicide Prevention](#) - A bill to require school districts to implement suicide education and training in the schools **FAILED** in the House.
2. [Traumatic brain injury and post traumatic stress treatments](#) - A Joint Resolution

encouraging Congress and the VA to work to expand and improve efforts about TBI and PTSD **PASSED** both the House and Senate.

3. [Universal Occupational Licensure](#) - A bill requiring licensing boards to provide expedited temporary professional licenses to individuals already licensed in good standing in another state **PASSED** both chambers. This act does not apply to any professional license with prescriptive authority or attorneys.
4. [Essential Health Product Dignity Act](#) - An act to repeal the tax placed on feminine hygiene products and diapers **FAILED** to pass out of Committee.
5. [Community Health Center & Rural Health Clinic Assistance](#) - A bill authorizing community health centers and rural health clinics to receive other grants in addition to those already authorized under WDH. This bill **FAILED** to gain a majority of favorable votes from the Senate Labor, Health and Social Services Committee.
6. [Ground Ambulance Service Provider Assessment Act](#) - A bill to create a mechanism by which ground ambulance service providers can be assessed a fee that can be invested and then credited back with earnings to help support ground ambulance service providers **PASSED** both chambers.
7. [Statewide Health Information Exchange-Codification](#) - A bill that codifies the existing statewide HIE in statute and authorizes the state department of health to assess fees to providers **PASSED** both chambers.



## Liability

Two proposals aiming to enhance healthcare provider liability protections and expand those protections to Wyoming businesses were debated in committee prior to the virtual session. [House Bill 59](#) and [Senate File 19](#), work products of the WY Business Alliance and WY Hospital Association, sought to change the legal standard required for a plaintiff to bring suit and remove the requirement that a defendant prove they were acting in good faith. WMS partnered with WBA and WHA to correct language in both proposed bills that would have served to roll-back current statutorily-provided protections to healthcare providers. The bills were both amended and passed out of committee



## Public Health

WMS supports and advocates for all policy initiatives that seek to improve the health of the public. This year, the legislature has a handful of bills all aimed at prevention and reduction of harm. Two of those bills were considered in committee prior to the eight-day session but were not debated by the Committee of the Whole in their house of origin. Any bill not heard during this previous eight-day session is eligible to be debated during the March session at leadership's discretion.

[House Bill 55 - Tobacco Tax](#) was supported by WMS and passed out of committee on a 6-3 vote. Although the bill doesn't go as far as many would like,

but due to timing restraints were not heard in Committee of the Whole in either the House or Senate. Some work remains to be done to ensure the bills don't do unintended harm, but WMS is supportive of the initiatives and happy to partner with our hospital colleagues and the Wyoming Business Alliance as the initiatives navigate the process.

WMS supports it as a positive step forward.

[Senate File 11 - Highway safety-seat belts](#) passed out of committee on a 3-1 vote. This bill changes Wyoming's seat belt law to a primary law wherein law enforcement can pull a vehicle over for failing to be buckled.

## Scope of Practice - Changing Tides

As of writing this update, WMS is aware of at least eight legislative proposals to expand the scope of an existing profession or license a new provider type in Wyoming. Not all eight will see debate this year, but that doesn't mean they aren't coming back in the future. A bill to grant Ph.D. **psychologists prescription authority** was drafted and later withdrawn by the sponsor but not because the sponsor doesn't remain passionate about pushing the issue. Initiatives to license new provider types like **anesthesiology assistants** and **denturists** as well as separate proposals to amend certification requirements for **certified addictions practitioners** and **mental health professionals** only represent the tip of the iceberg. This year will see the return of a bill authorizing **optometrists access to laser and scalpel** procedures, **optimal team practice models for PAs**, and an expansion of scope for **athletic trainers**.

WMS is proud of our history in protecting patient safety inside of these battles for scope expansion. Whether it's arguing that surgeons are the only healthcare providers uniquely qualified to perform surgery or that only a few specially qualified physicians hold the necessary training to safely perform nerve conduction studies, we've drawn a bright line of what is safe and appropriate inside patient care and what is not.

These historic battles have all been fought based on the underlying premise that the state legislature accepts its role in maintaining patient safety by carefully vetting the specifics of professional licensure which serves as the primary way of delineating the lanes of the multi-lane superhighway that is our current healthcare delivery system. However, tides seem to be shifting with legislators indicating they no longer believe it the role of government to make healthcare decisions for the public. Philosophically, an overwhelming majority seem to subscribe to the more libertarian principles of limited government when it comes to professional licensure issues. Many legislators believe that it's the government's role to take down barriers and open as many access points as possible leaving it to the patient to decide which member of the healthcare team is appropriately trained to safely deliver the care they need.

While WMS feels just as strongly this year as we have in years past about the critical role of government in protecting the public through vetting licensure, we recognize the political risks in doubling down on what seems to recently be a losing advocacy strategy. In an effort to protect our respected voice in a number of other important healthcare policy conversations, we must be

mindful of which fights we pick as well as the way in which those fights are picked. WMS will remain a resource for any legislator seeking a deeper understanding of the licensure issues, but will be making an important pivot in our future strategy.

WMS will be working to build a coalition of organizations to help us move policy that empowers patients and forces transparency for all members of the healthcare team. If it is the legislative will to remove all lanes on the highway of healthcare delivery, then patients will have to draw their own lines on the highway as they make decisions about their care. WMS believes patients deserve information about their provider's training, background and qualifications in order to do that.

The March hybrid session will be an important one as we anticipate the legislature making big decisions around professional licensure. We hope that we will find success in compelling our state's lawmakers to stress the importance of transparency by our healthcare providers if, in fact, we will be working to diminish the role of licensure in assuring patient safety in the healthcare delivery system. The language WMS will be working to integrate into any practice act that is opened can be viewed [HERE](#).

For the WMS position stances on the various scope of practice bills facing lawmakers this year, you can visit the tracking sheet. WMS has also published a [position paper on the PA Optimal Team Practice](#) proposal for your consideration and review.

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## How To Connect and Stay Engaged

Use [wyoleg.gov](http://wyoleg.gov) to learn more about this year's legislative process. Below are quick links to important information.

[Daily Calendars](#) including floor calendars, audio streams, and committee schedules

[Bill Listing](#) that includes all legislative proposals posted for the 2021 Session

As always, Executive Director Sheila Bush welcomes and invites any and all communication. If you have questions about the status of a bill, want to provide feedback or input on legislation, or want to share your thoughts on any other aspect of the WMS advocacy work, please email her at [sheila@wyomed.org](mailto:sheila@wyomed.org) or call her cell phone at 307-630-8602.



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