in emergency situations under certain circumstances. These circumstances include good standing with the applicable medical board and at least one year of post-licensure clinical experience. The patient receiving the prescription must be at least 18 years old unless the medication is used to treat attention deficit hyperactivity disorder (ADHD) and the supervising physician is a pediatrician, family practice physician, internal medicine physician, or psychiatrist. The bill only allows for an initial prescription that does not exceed a five-day supply. Authorization must be included in the provider’s nurse protocol agreement and physician assistant’s job description.

Status: PASSED HOUSE. Recommended Do Pass by the Senate Regulated Industries and Utilities Committee. The bill is scheduled for a vote on the Senate floor for either today (MONDAY) or this WEDNESDAY.

SB 20 (Kirkpatrick-32nd) Bill Link
"Surprise Billing Consumer Protection Act" - Requires insurers to contract with and maintain a sufficient and appropriate number of participating network providers. Additionally, insurers are prohibited from denying preauthorization of services that were rendered by an in-network provider because the referring provider is out-of-network. The bill gives the insurance commissioner authority to review network adequacy.

Status: PASSED SENATE. Recommended Do Pass by the House Insurance Committee. The bill was POSTPONED ON THE HOUSE FLOOR.

SB 76 (Merritt-9th) Bill Link
Requires state health benefit plans to cover insulin medication at an amount not to exceed $35.00 per 30-day supply or $105.00 per 90-day supply.

Status: PASSED SENATE. Assigned to House Health Committee.

SB 99 (Dolezal-27th) Bill Link
Provides an exemption from certificate of need for acute care hospitals established in rural counties that meet certain criteria.

Status: PASSED SENATE. Assigned to House Health Committee.

SB 109 (Echols-49th) Bill Link
Prohibits insurers from denying coverage of an in-network provider for provider administered medication or the administration of such medication under certain circumstances. The bill requires the Department of Community Health to cover continuous glucose monitors through Medicaid as a pharmacy benefit. Eligibility for coverage includes a diagnosis of diabetes mellitus and patient or caregiver training. Additionally, a patient must have use of daily insulin or a history of problematic hypoglycemia to receive the benefit. An in-person or telehealth visit is required within six months prior to and every six months after initial prescription.

Status: PASSED SENATE. Recommended Do Pass by the House Public Health Committee. The bill is expected to be on the House Floor for a vote today (MONDAY).

SB 157 (Strickland-17th) Bill Link
Provides for changes to existing licensing requirements for applicants, specifically pertaining to use of criminal history records, and also with records restrictions and petitions for the sealing of records. Section 1-1 of SB 157 adds a definition of "covered misdemeanor" as a misdemeanor conviction in the last five years prior to the application and an offense listed in O.C.G.A. 35-3-37(j)(4)(B), which provides for family violence offenses, offenses against children, sexual offenses, and serious traffic offenses. The section also defines "conviction" and "felony". Section 1-2 replaces the "crime of moral turpitude" standard and requires the professional licensing board to bear the burden of denying an applicant for a license due to their criminal record by the standard of clear and convincing evidence. An applicant is also entitled to a hearing before the professional licensing board per the 'Georgia Administrative Procedure Act'. Section 1-3 makes a denial of a request for reinstatement of a revoked license and the refusal to issue a previously denied license a contested case under the 'Georgia Administrative Procedure Act'. Section 1-4 permits license denial only if a direct relationship is found between a criminal record and the licensed occupation, and the applicant's licensure would pose a direct and substantial risk to public safety because they have not been rehabilitated to safely perform the licensed duties and responsibilities. This section clarifies what rehabilitation evidence will be considered and the disclosure of criminal records to those that are serious, recent, and relevant convictions that have not been