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# 2021 LEGISLATIVE SESSION UPDATE

#### **Public Health**

Emergency Timeframe & Authority (SB97) limits the timeframe for which a state of emergency can be declared (by the State Health Officer or Governor) to only 14 days. The bill also gives the Legislature the sole authority to extend such declarations. SB97 was discussed in the Senate but ultimately did not receive a vote.

Abolishing MLC & Restructuring BME (SB239) is brought by Sen. Jim McClendon and would abolish the Medical Licensure Commission, have the Board of Medical Examiners take on the duties of the Commission, and forbid leaders of any physician specialty organization from serving on the new board. By consolidating the two separate agencies into a single regulatory body, this legislation overhauls the current congressional representation requirements, revokes the appointment powers of the Lt. Governor and Speaker of the House, and decreases the board composition by more than half.

Abolishing State Health Officer & Restructuring State Board of Health (SB240) is brought by Sen. Jim McClendon and would abolish the State Board of Health, the State Committee of Public Health, the County Boards of Health, and the position of the State Health Officer (among other things). With the two boards and physician oversight no longer existing, the bill creates a new State Health Advisory Board made up of a list of individuals who have some type of relationship to healthcare. County Boards of Health are instantly gone, too, turning such over to the determination of the County

# Medical Cannabis Legislation survey



UAB asks for your participation in a research survey of opinions regarding medical cannabis legislation and education needs among Alabama physicians. This online survey will take about 10 minutes to complete. Responses are strictly voluntary and anonymous. No personally identifying information will be collected for research purposes.

As a token of appreciation for your participation in this survey, the researchers will make monetary donations to participants' preferred charities (\$5 per completed survey, up to \$2,000).

If you have questions about the research, please contact the Principal Investigator, Dr. Magdalena Szaflarski at (205) 934-0825 or szaflam@uab.edu. Access the survey at: https://uab.co1.qualtrics.com/jfe/form/SV\_07Zo3WbrmfJPphI



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#### **ABOUT AAN**

The Alabama Academy of Neurology is the professional association representing neurologists in Alabama.

#### AAN is dedicated to:

- Supporting the highest standards of excellence in the practice of neurology
- Improving patient access to quality neurological care;
- Advancing the profession of neurology by supporting principals, policies and practices that seek to improve patient care, and
- Supporting education and advocacy for our profession, our patients and their families.



### American Academy of Neurology Virtual Annual Meeting

April 17-22, 2021 San Francisco, CA

Because of the COVID-19 pandemic, the 2021 AAN Annual Meeting will be held in a fully virtual format from April 17-22. Registration information is available at www.aan.com/conferences-community/annual-meeting/. Register by March 25 to save on the registration fee.

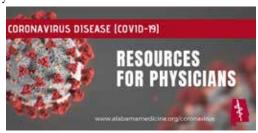
#### **COVID-19 Vaccine Provider Information**

The Medical Association of the State of Alabama provides updated information on the COVID-19 vaccine and its availability in its online *Vaccine Toolkit* that includes:

- Comparisons the Pfizer, Moderna and Johnson & Johnson Vaccines
- Vaccine Availability for Physicians
- Pfizer Vaccine Allocation
- Moderna Vaccine Allocation
- Storage of the Moderna Vaccine
- How to enroll as a Vaccine Provider
- Billing/Coding the Vaccine
- COVID-19 Vaccine Frequently Asked Questions
- COVID-19 Talking Points

Access the toolkit and other COVID resources for physicians at

www.alabamamedicine.org/coronavirus.



### Legislative Update, continued

Commission. Strangely enough, the State Health Officer position would not exist, but two roles take its place, with the highest, Secretary of the Alabama Department of Public Health, to be appointed by the governor with no requirement that he/she be a physician. It passed the Senate Healthcare Committee and awaits consideration from the full Senate.

**Medical Marijuana** (SB46) by Sen. Tim Melson, MD (R–Florence) would authorize medical marijuana in the state. The House Judiciary Committee, the first of two House committees expected to vet the bill, have conducted a public hearing. Rep. Mike Ball (R–Madison), a Judiciary Committee member and retired law enforcement officer, is shepherding the bill in the House.

#### **Lawsuits & Liability**

**COVID-19 Liability Protection** (SB30) provides liability protection to physicians, health facilities, and businesses from claims arising from COVID-19 and the state's response to the pandemic. The Medical Association, with the help of Starnes, Davis, Florie, LLP, worked with Sen. Arthur Orr in drafting this bill. SB30 has been signed by the Governor.

Medicaid False Claims Act (SB241) is brought by Sen. Jim McClendon and prohibits certain fraudulent activities affecting the Alabama Medicaid program. Furthermore, liability for violations of these prohibitions include a civil penalty of \$5,500-\$11,000 per claim, and treble damages. These prohibitions and penalties are different and much more drastic than what current Medicaid and Medicare law provides, creating very serious liability and monetary concerns for physicians. The Senate Judiciary Committee discussed the bill but, due to opposition from Sen. Larry Stutts, MD, Sen. Roger Smitherman, and others, it did not receive a vote.

#### Finance & Taxation

Cares Act Tax Exclusion (SB98 & HB170) exclude any money received from the CARES Act or other similar COVID-related relief measures from Alabama income tax. "We are not going to tax any of the stimulus monies that came in for businesses, for individuals, for anyone," said Sen. Dan Roberts (R–Mountain Brook). This legislation was signed by the Governor.

#### **Federal Legislation**

Medicaid Expansion (The American Rescue Plan Act of 2021), signed by President Biden, includes a number of key provisions that strengthen both public and private health insurance coverage. Among its Medicaid and the Children's Health Insurance Program (CHIP) provisions, the American Rescue Plan encourages states to finally take up the Medicaid expansion by offering even more favorable financial incentives than those already in place and allows states to provide longer postpartum health coverage for new mothers.

## American Heart Assoc. presents strategies to preserve brain health

#### by Bob Shepard, UAB News

Primary care clinics can play an important role in preserving patients' brain health using the American Heart Association's Life's Simple 7 as a guide, as well as addressing six other factors associated with cognitive decline, according to a new American Stroke Association/ American Heart Association Scientific Statement, "A Primary Care Agenda for Brain Health."

The statement was published March 15 in the Association's journal Stroke. Led by researchers at the University of Alabama at Birmingham, it has been endorsed by the American Academy of Neurology as an educational tool for neurologists.

Preserving brain health in an aging population is a growing concern in the United States. An estimated one in five Americans 65 years and older has mild cognitive impairment, and one in seven has dementia. By 2050, the number of Americans with dementia is expected to triple, the statement authors note.

"Primary care is the right home for practice-based efforts to prevent or postpone cognitive decline. Primary care professionals are most likely to identify and monitor risk factors early and throughout the lifespan," said the chair of the scientific statement writing group, Ronald M. Lazar, PhD, the Evelyn F. McKnight Endowed Chair for Learning and Memory in Aging and director of the Evelyn F. McKnight Brain Institute at the UAB School of Medicine. "Prevention doesn't start in older age; it exists along the health care continuum from pediatrics to adulthood. The evidence in this statement demonstrates that early attention to these factors improves later life outcomes."

Life's Simple 7 focuses on seven lifestyle targets to achieve ideal cardiovascular health:

- managing blood pressure
- maintaining healthy cholesterol levels
- reducing blood sugar
- · increasing physical activity
- eating a healthy diet
- maintaining a healthy weight
- not smoking

The new statement suggests primary care professionals also consider assessing additional risk factors to address cognitive health. The six risk factors to consider along with Life's Simple 7 that have an impact on optimal brain health are:

- depression
- · social isolation
- excessive alcohol use sleep disorders
- less education
- hearing loss

"Scientists are learning more about how to prevent cognitive decline before changes to the brain have begun. We have compiled the latest research and found Life's Simple 7 plus other factors like sleep, mental health and education are a more comprehensive lifestyle strategy that optimizes brain health in addition to cardiovascular health," said Lazar, who is also a professor of neurology and neurobiology at UAB.

The statement uses cognition to define brain health, referring to the spectrum of intellectual-related activities, such as memory, thinking, reasoning, communication and problem solving, that enables people to thrive and navigate the world on an everyday basis. The ability to think, solve problems, remember, perceive and communicate is crucial to successful living; their loss can lead to helplessness and dependency.

Lazar says that five components of Life's Simple 7 have formal screening tools in place that will aid in early recognition of cognitive decline. The other two, diet and physical activity, have guidelines already in place to aid in their adoption.

"Studies have shown that these domains are impacted by factors that are within our control to change," said Virginia Howard, PhD, co-chair of the statement writing group and Distinguished Professor in the Department of Epidemiology at the School of Public Health at UAB. "Prevention and mitigation are important because, once people have impaired cognition, the current treatment options are very limited."

The authors say that screening and observation need to begin at an early age. A growing body of evidence suggests that making changes in early adulthood can have a significant effect on cognitive decline in older age.

"The time when we need to pay attention to these factors is sooner than we thought," Lazar said. "Now we understand that attention to these factors even as young as the 30s can make a major difference in the onset of cognitive decline."

Howard says access to primary care is a hurdle to be addressed, as an estimated 15

percent of American adults still lack health insurance, and 25 percent of Americans do not have a source of primary care.

"The need for more practitioners in the primary care fields will become even more acute as the population ages," Howard said. "Improved access, more clinicians, better practice models and improved reimbursement will help integrate these preventive measures into daily primary care practice, with the goal of preventing cognitive decline."

"Advanced practice practitioners could be vitally important in this effort, along with the use of new technology such as telehealth and apps to help with reminders and motivation to engage in positive behaviors," Lazar said. "For example, many people already wear a device on their wrist for this purpose. It's about maintaining our quality of life as we get older."

Lazar noted the leadership role of UAB in the effort, as he and Howard served as leaders of the AHA writing group. Howard pointed to the close collaborative relationship between the university's School of Medicine and School of Public Health.

"Alabama is an at-risk state, with a large medically underserved population, positioning UAB to be a real leader in this field," she said. "We have the tools, the incentive and the will to make a difference."

Lazar called this work one of the most important efforts that he has undertaken in his career.

"This can be life-changing," he said. "This is a national health care problem that affects all people, with a particular emphasis on the medically underserved. It will require a combined effort from all of us, including the general public, medical community and policymakers; but we know what we need to accomplish, we know the steps we need to take, and we know what will happen if we succeed."

This scientific statement was prepared by the volunteer writing group on behalf of the American Heart Association's Stroke Council. Co-authors are Walter N. Kernan, MD; Hugo J. Aparicio, MD, MPH; Deborah A. Levine, MD, MPH; Anthony J. Viera, MD, MPH; Lori C. Jordan, MD, Ph.D.; David L. Nyenhuis, PhD; Katherine L. Possin, PhD; Farzaneh A. Sorond, MD, PhD; and Carole White, PhD, RN.

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New Member

# Why Renew your membership with AAN

Membership in AAN means joining your colleagues in the only specialty society in Alabama that works to protect the neurology profession and patient's access to care.

#### Lobbying

AAN members have a strong voice in the Alabama State House and the U.S. Congress with a top-notch lobbying team focusing on legislation to strengthen the practice of neurosurgery.

AAN members receive updates on legislation, what it means to you as a professional, and how to contact committee members to voice your opinion. Your voice counts!

#### Communication

AAN members receive a quarterly e-newsletter and e-mail blasts of the top news and events affecting Alabama's neurologists. In 2020, we regularly communicated COVID-19 resources, including Confernce Calls and grant information, and how to order PPE.

#### Education

AAN offers an educational program each year. While our 2020 Conference was cancelled because of COVID-19 we hope to be back in full swing for our 2021 conference. AAN's Board will monitor coronavirus developments and follow recommendations from the Alabama Department of Public Health and Centers for Disease Control in determining whether to conduct the meeting in-person or on-line.

More details will be shared via email and on AAN's website, www.alneurology. com, as they become available.

#### **Networking**

AAN members are a great resource for professional networking. Get connected, and get to know your fellow practitioners! You've already invested in your career. Your membership in AAN is a vital continuation of that investment.

#### Join Us Today!

Visit www.alneurology.com to print a dues form or find a link to online dues payment. We are only as strong as our membership, and we want you to join us!

#### **Questions?**

If you have questions, contact Meghan Martin at (334) 954-2500 or by e-mail at mmartin@alamedical.org.

## Renew online at www. tinyurl.com/AAN2021

# **NEWS & NOTES**

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