POLICY DEVELOPMENT:

Legislative Items
• **HB 48 w/ HA 1**: Establishes a Health Care Provider Loan Repayment Program for new primary care providers to be administered by the Delaware Health Care Commission.

• **HB 160 w/ HA 1**: Telehealth Access Preservation and Modernization Act of 2021, continues and enhances Delawareans’ access to telehealth and telemedicine services and, through the adoption of the Interstate Medical Licensure Compact, ensures that telehealth services can be provided through qualified medical practitioners in a streamlined and efficient pathway to licensure that meets the health care delivery system needs of the 21st century.
SB 120: Strengthen the primary care system in this State by doing the following: (1) Directing the Health Care Commission to monitor compliance with value-based care delivery models and develop, and monitor compliance with, alternative payment methods that promote value-based care. (2) Requiring rate filings limit aggregate unit price growth for inpatient, outpatient, and other medical services, to certain percentage increases over the next 4 years. (3) Requiring an insurance carrier to spend a certain percentage of its total cost on primary care over the next 4 years. (4) Requiring the Office of Value-Based Health Care Delivery to establish mandatory minimums for payment innovations, including alternative payment models, and evaluate annually whether primary care spending is increasing in compliance with the established mandatory spending minimums for payment innovations.
Legislative Update – Dr. Jan Lee (DHIN)

• **SB 87:** Specifies that the state’s designated organ procurement organization, Gift of Life, is allowed access to DHIN data for purposes consistent with the Anatomical Gifts Act in order to determine if someone who has indicated their willingness to be an organ donor has any medical indications that would preclude their donation.

• **SB 88:** Brings Delaware PHI privacy law into harmony with recently enacted federal legislation. It clarifies that data held by DHIN may be used for purposes allowed under HIPAA and other federal laws and regulations pertaining to the privacy of PHI. It specifies that de-identified data may be made available to providers, payers, and researchers for purposes similar to those specified by statute for access to the claims database. It further specifies that identified data for those purposes will not be released except with explicit consent of the patient. It requires DHIN to make available to individuals and to third parties whom they may designate any data that DHIN holds about them. DHIN will be required to promulgate regulations specifying how DHIN will implement these privacy requirements.
• **HB 39:** Requires that inadvertent out-of-network services be included in individual and group health insurance policies as well as group and blanket health insurance policies. This bill defines inadvertent out-of-network services as those services that are covered under a policy or contract of health insurance, but are provided by an out-of-network provider in an in-network facility, or when in-network health care services are unavailable or not made available to the insured in the facility.
• HB 33 w/ HA 1 & SA 1: Relating to physician assistants
• SB 60 w/ SA 1: Allows nurse practitioners and physician assistants to recommend medical marijuana for adult patients
• SB 73 w/SA 1: Authorizes a dentist to practice for DPH under a provisional license
• SB 76: Authorizes the distribution of fentanyl testing strips
• SB 77: Protects a lay individual from civil liability who administers naloxone under the Community-Based Naloxone Access Program
• SB 105: Allows pharmacists to administer/dispense contraceptives under a standing order from DPH