2022 Legislative Update Board of Medical Examiners

The following bills were enacted by the General Assembly during the 2022 legislative session and may impact the Board of Medical Examiners and/or the Board of Medical Examiners licensees:

Medical Assistants, <u>S.613/Act 171</u>

S.613 amends the Nurse Practice Act to define "Certified Medical Assistant" (CMA) as a graduate of post-secondary medical assisting programs identified in the Act and amends the definition of unlicensed assistive personnel to exclude CMAs, adds that they can be supervised by physicians, PAs, and APRNs, and establishes that UAPs cannot administer medicine except as otherwise provide by law. The definitions are added to the medical practice act, as well, and clarify that CMAs include medical assistants who are currently employed in that capacity on the effective date of the Act who do not have the required certification, but who achieve such certification no later than two (2) years after the effective date of the Act. The medical practice act is further amended to add 40-47-196 establishing which tasks can and cannot be delegated to a CMA, and which tasks can be delegated to UAP. Sections 40-47-30(A)(5) and 40-47-935(C), related to physician and PA delegation of tasks to unlicensed assistive personnel, are deleted from the medical practice act.

Effective date: July 15, 2022, Sixty days after approval of the Governor.

Pharmacy Access Act & Central Fill Pharmacy Permits, <u>S.628/Act 210</u>

S.628 will allow pharmacists to dispense a self-administered hormonal contraceptive or administer an injectable hormonal contraceptive to a patient who is 18 years of age or older, or under 18 if the person has evidence of a previous prescription from a practitioner for a self-administered hormonal contraceptive or an injectable hormonal contraceptive, pursuant to a standing order by a prescriber to a patient. The Act requires the Board of Medical Examiners and the Board of Pharmacy to issue a written joint protocol, no later than six months after the passage of the Act, to authorize a pharmacist to dispense a self-administered hormonal contraceptive or administer an injectable hormonal contraceptive without a patient-specific written order. The Act also creates a new central fill permit issued by the Board of Pharmacy.

Effective date: The Pharmacy Access Act will take effect upon the issuance of the BME and BOP written joint protocol, which must be issued no later than November 23, 2022, six months after approval of the Governor on May 23, 2022. The central fill permit section is effective May 23, 2022.

Do Not Resuscitate Orders, S.508/Act 122

S.508 amends the Emergency Medical Services Do Not Resuscitate Order Act to allow a parent or legal guardian of a medically eligible child to request or revoke a do not resuscitate order for emergency services for the child, with exceptions.

Effective date: March 14, 2022

Prohibition on State or Political Subdivision Covid-19 Vaccine Mandate, H.3126/Act 142

H.3126 prohibits vaccine mandates by the State and its political subdivisions for employees, independent contractors and nonemployee vendors, including firefighters, among others. The Act requires an employer to honor a religious exemption or medical exemption regarding any COVID-19 vaccine or booster requirement, and prohibits discrimination based on vaccination status in accommodations, dining, retail, entertainment and other establishments. The Act reenacts the COVID-19 Liability Immunity Act of 2021.

Effective date: April 25, 2022

Repeal date: December 31, 2023, unless reauthorized by the General Assembly

Mandatory Electronic Filing of Death Records, H.3325/Act 157

H.3325 eliminates the exception to the mandatory electronic filing of death certificate for physicians who certify fewer than twelve deaths annually and funeral homes who perform fewer than twelve funerals annually.

Effective date: July 1, 2022

Nondiscrimination in Access to Anatomical Gift and Organ Transplants, H.4597/Act 163

H.4597 adds Article 15 to Title 44, Chapter 43 to prohibit discrimination against person with mental or physical disabilities regarding access to organ transplants.

Effective date: May 13, 2022

Mobile Optometry Units, <u>H.4837/Act 165</u>

H.4837 amends the optometry practice act to authorize mobile units to visit and provide services on the site of a Title I public school to the students attending the school, provided the services must be rendered as part of a not-for-profit program. The Act establishes permitting requirements for mobile units. Under certain circumstances established in the law, the optometrist practicing in the mobile unit may be required to refer the student to a licensed ophthalmologist for follow-up care. Mobile units must apply for a permit and be inspected before operating.

Effective date: May 13, 2022

Unlicensed Persons Authorized to Provide Medications, S.1059/Act 179

S.1059 amends the Nurse Practice Act, Section 40-33-43, to allow unlicensed persons with documented medication training and skill competency evaluations to provide medications in intermediate care facilities for persons with intellectual disabilities, as defined in Article 3, Chapter 7, Title 44, and in nursing homes, as defined in Article 3, Chapter 7, Title 44. The Act also requires the SC Department of Health and Human Services (DHHS) to develop a Medication Technical Certification Program, which shall include curriculum, training, competence, and testing certification requirements. DHHS shall also create and maintain a Medication Technical Registry.

Effective date: May 16, 2022

Registration of Sign Language Interpreters, H.3795/Act 188

H.3795 requires persons providing sign language interpreting services for agencies, boards, commissions, and hospitals and healthcare facilities regulated by DHEC under Title 44, to hold a recognized certification in sign language interpretation as approved by the SC Association of the Deaf, the SC Registry of Interpreters for the Deaf, or the National Registry of Interpreters for the Deaf. The Act does not apply to a person in certain emergency situations or as part of a supervised internship or mentorship if accompanied by an interpreter with recognized certification.

Effective date: January 1, 2024

Consent on Behalf of Certain Patients to Electro-Convulsive Therapy, <u>H.4600/Act 192</u>

H.4600 revises the order of priority for individuals allowed to make decisions for patients who need, but are unable to consent, to electro-convulsive therapy or major medical treatment.

Effective date: May 16, 2022

Rena Grant Sickle Cell Disease Voluntary Patient Registry Act, H.3166/Act 206

H.3166 requires DHEC to develop and maintain the sickle cell disease voluntary patient registry to enable individuals diagnosed with sickle cell disease to register so that physicians and other health care practitioners providing care to the patient may confirm the patient's diagnosis.

Effective date: May 23, 2022

South Carolina Parkinson's Disease Research Collection Act & Opioid Antidote Distribution, <u>S.1011/Act 211</u>

S.1011 creates the South Carolina Parkinson's Disease Research Collection Act to require Medical University of South Carolina (MUSC) to collect data on the incidence of Parkinson's disease in SC and other epidemiological data. Every patient diagnosed with Parkinson's disease or a related Parkinsonism must be notified about the database and the opportunity to participate. The Act also

requires MUSC to provide notification of the mandatory reporting of Parkinson's disease and parkinsonism to the Board of Medical Examiners at least 180 days prior to requiring information be reported. The Act also allows a hospital to distribute an opioid antidote to a person at risk of experiencing an opiate-related overdose or a caregiver of a person at risk of experiencing an opiate-related overdose, and shielding a hospital from civil or criminal liability or from disciplinary action from the licensing board for distributing the same.

Effective date: May 23, 2023, twelve months after approval by the Governor

South Carolina Opioid Recovery Act, H.5182/Act 222

H.5182 establishes the Opioid Recovery Act, which creates the SC Opioid Recovery Fund from which money will be distributed to help address and remediate opioid-related issues, and creates the SC Opioid Recovery Fund Board to administer the SC Opioid Recovery Fund.

Effective date: May 23, 2022

Medical Ethics and Diversity Act, H.4776/Act 235

The Medical Ethics and Diversity Act provides that a medical practitioner, health care institutions and health care payers have a right not to participate in or pay for any health care service which violates the practitioner's or entity's conscience. The Act provides a shield against criminal, civil or administrative liability for exercising that right and prohibits discrimination against the medical practitioner, health care institution or health care payer for exercising that right. The rights are subject to an exception for emergencies. Medical practitioners are defined to include doctors, nurse practitioners, physician's assistants, nurses, nurses' aides, allied health professionals, medical assistants, pharmacists, pharmacy technicians, faculty and students of medical and nursing schools, psychology and counseling faculty and students, medical researchers, lab technicians, counselors, or social workers. The Act provides that a medical practitioner may file a complaint with the State Human Affairs Commission (SHAC) for alleged violations, SHAC must investigate alleged violations, and SHAC must provide the LLR Director with a copy of its report if the respondent is a medical practitioner.

Effective date: June 17, 2022

Disclaimer: This legislative update is not intended as legal advice. LLR is providing this legislative update to notify licensees of recently enacted legislation that may impact his or her practice area or license. This legislative update provides only a high level overview of enacted legislation and licensees are urged to review the entire enacted legislation, which is available in the hyperlinks above.