Mon 3/9/2026 10:00 AM CST - House Hearing Room I, House Government Operations Committee

1. **- Delegation of medication administration to certified medical assistants and medications they can administer.** State Website

HB 2044 (SB 2548)

P. Marsh

Sponsors: Pat Marsh, Shane Reeves

Description: As introduced, allows a physician assistant to delegate medication administration to a certified medical assistant. Adds categories of medications to the list of medications that a certified medical assistant is authorized to administer or prepare, and makes other related changes.

AI Summary: Authorization is expanded for physician assistants in Tennessee to delegate tasks, including medication administration, to certified medical assistants under collaborative agreements with licensed physicians. Certification requirements for medical assistants are updated to include recognized certifying bodies such as the American Association of Medical Assistants (AAMA), and specific categories of medications and tasks that may be delegated are detailed, with restrictions on activities requiring professional judgment. Rules for delegation and training responsibilities are established, and certain anesthetic and aesthetic medications are explicitly excluded from delegation to certified medical assistants.

Fiscal Impact: (Dated January 27, 2026) NOT SIGNIFICANT

6. **- Requires TennCare to publish biannual reports on psychotropic medication use and costs statewide.** State Website

HB 2389 (SB 2255)

B. Martin

Sponsors: Brock Martin, Brent Taylor

Cosponsors: Janice Bowling, Rusty Crowe, Joey Hensley, Jack Johnson

Amendment Summary: Senate amendment 1, House Insurance Committee amendment 1 (013445) requires the Division of TennCare (Division), in consultation with the Department of Health (DOH) and the Department of Children's Services (DCS), to publish two comprehensive statewide data reports on the use of psychotropic medication and the psychotropic medication's associated costs, utilizing data primarily derived from medical and pharmacy claims from the TennCare program. Requires the reports to be submitted by January 1, 2027, and biannually thereafter. Establishes that, beginning July 1, 2027, the biannual reports are due within 90 days of the end of each calendar year and the beginning of each state fiscal year. Requires the Division to post both reports in a conspicuous, publicly accessible location on the Division's website, and to transmit official copies of both reports to certain legislative committees. Authorizes the Division to promulgate rules to effectuate the legislation, in consultation with DOH and DCS.

Description: As introduced, requires the bureau of TennCare to biannually publish two comprehensive statewide data reports on the use of psychotropic medications and the psychotropic medications' associated costs with certain list categories and data points that must be included in each report. Broadly captioned.

AI Summary: Requirements are imposed on the TennCare bureau to publish biannual comprehensive statewide reports on psychotropic medication use and costs, including data on children in state custody and young adults receiving foster care services. Reports must categorize data by age groups, medication counts, and county of residence, ensuring de-identification to comply with privacy laws, and include comparative data for the preceding two years. The bureau is authorized to promulgate rules in consultation with the departments of health and children's services to implement these provisions under HB 2389 (Tennessee).

Fiscal Impact: (Dated February 12, 2026) NOT SIGNIFICANT

Mon 3/9/2026 12:00 PM CST - Senate Hearing Room I, Senate Judiciary Committee

1. **- TACIR study on state and local readiness to support a medical marijuana program.** State Website

SB 1603 (HB 1972)

F. Haile

Sponsors: Ferrell Haile, Andrew Farmer

Description: As introduced, requires TACIR to conduct a study on the creation of a medical cannabis program in this state. Specifies that the study must include the process for implementing a medical cannabis program and the operational readiness of state and local governmental entities to support a medical marijuana program. Requires TACIR to report its findings to members of the general assembly by November 1, 2026. Broadly captioned.

AI Summary: A study is mandated for the creation of a medical cannabis program in Tennessee, focusing on implementation processes and the operational readiness of state and local government

entities. The Tennessee Advisory Commission on Intergovernmental Relations (TACIR) is tasked with conducting the study and reporting findings to the General Assembly by November 1, 2026. State departments and agencies are required to assist TACIR upon request to support the study.
Fiscal Impact: (Dated January 21, 2026) NOT SIGNIFICANT

11. **- Immunizations for children.** State Website
SB 1030
(HB 1156)
J. Bowling
Sponsors: Janice Bowling, Susan Lynn
Description: Deletes the responsibility of a parent or legal guardian to ensure that such person's child receives vaccines as recommended by guidelines of the Centers for Disease Control and Prevention or the American Academy of Pediatrics. Broadly captioned.
AI Summary: Tennessee Code Annotated Section 37-10-401(a) is amended by deleting the subsection that assigns parents or legal guardians the responsibility to ensure their children receive vaccinations as recommended by the CDC or AAP. Existing immunization laws and requirements for schools and child care facilities remain unaffected. The change emphasizes state legislative oversight over vaccination policy decisions, removing delegation to federal or private entities.
Fiscal Impact: (Dated February 20, 2025) NOT SIGNIFICANT

19. **- Civil cause of action against healthcare professionals for injuries caused by medical procedures performed under coercion.** State Website
SB 2031
(HB 1872)
A. Lowe
Sponsors: Adam Lowe, Jason Zachary
Cosponsors: Ed Jackson, Bobby Harshbarger, Jessie Seal, Ken Yager, Paul Bailey, Rusty Crowe, Joey Hensley, Bo Watson, Shane Reeves, Brent Taylor, Page Walley, Richard Briggs, John Stevens, Jack Johnson, Ferrell Haile, Todd Gardenhire, Dawn White, Paul Rose, Tom Hatcher, Becky Massey
Description: As introduced, creates a civil cause of action against a healthcare professional by a person who suffered an injury that resulted from certain medical procedures if the reason the person, or the person's parent, guardian, or legal representative, consented to the medical procedure was due in whole or in part to coercion by the healthcare professional.
AI Summary: A private cause of action is created allowing individuals to sue healthcare professionals for medical procedures performed to alter or treat gender identity inconsistent with the person's sex, including puberty blockers or hormones, if consent was obtained through coercion. Civil actions must be filed within eighteen years of the procedure or discovery of injury, regardless of when the procedure occurred. Definitions for healthcare professionals, medical procedures, minors, persons, and sex are established, and severability is provided.
Fiscal Impact: (Dated January 23, 2026) NOT SIGNIFICANT

23. **- Preferred drug lists that do not favor opioids over FDA-approved non-opioid pain treatments for incarcerated inmates.** State Website
SB 1790
(HB 1741)
S. Reeves
Sponsors: Shane Reeves, Elaine Davis
Cosponsors: Sabi Kumar, Esther Helton-Haynes, Michele Carringer, Bryan Terry
Amendment Summary: House amendment 1 (013455) authorizes the Department of Correction (DOC) to adopt or amend a formulary of approved prescription drugs for use in the correctional facilities operated by or on behalf of the Department. Requires DOC, in establishing and maintaining the formulary, to ensure that a non-opioid medication approved by the federal Food and Drug Administration for the treatment or management of pain is not disadvantaged or discouraged with respect to coverage relative to an opioid or narcotic drug for the treatment or management of pain on the formulary. Establishes that the legislation also applies to drugs being provided through a contract between DOC and a healthcare vendor for purposes of delivering healthcare services within correctional facilities. Effective January 1, 2027.
Description: As introduced, authorizes an insurer that offers an insurance policy that covers an inmate incarcerated to adopt or amend a preferred drug list (PDL). Requires the insurer to ensure that a non-opioid drug approved by the U.S. food and drug administration for the treatment or management of pain is not disadvantaged or discouraged with respect to coverage relative to an opioid or narcotic drug for the treatment or management of pain on the PDL. Broadly captioned.
AI Summary: A formulary for prescription drugs used in Tennessee correctional facilities is authorized to be adopted or amended by the Department of Correction, requiring non-opioid medications approved by the FDA for pain management to be given equal consideration to opioids on the formulary. Preferences may be established within opioid or non-opioid categories, but non-opioid drugs cannot be disadvantaged relative to opioids. These provisions take effect January 1, 2027.
Fiscal Impact: (Dated January 29, 2026) NOT SIGNIFICANT

Tue 3/10/2026 9:30 AM CST - House Hearing Room III, House Insurance Committee

1. **- Prohibits health insurers from using downcoding to reduce provider payments and establishes the Tennessee commission of insurance review.** State Website
HB 2619
(SB 2155)
D. Howell
Sponsors: Dan Howell, Bo Watson
Cosponsors: Cameron Sexton, Tim Hicks, John Crawford, Lowell Russell, Fred Atchley, David

Hawk, Scott Cepicky, Mary Littleton, Clay Doggett, Jason Zachary, Greg Vital, Kevin Vaughan, Elaine Davis, Pat Marsh, Brock Martin, Greg Martin, Debra Moody, Kip Capley, Robert Stevens, Aron Maberry, Clark Boyd, Esther Helton-Haynes, Gary Hicks, Johnny Garrett, Andrew Farmer, Mark Cochran, Renea Jones, Jeremy Faison, Bryan Terry

Description: As introduced, prohibits a health insurance entity from offering or maintaining a health benefit plan that adjusts claims to a less complex or costly procedure code, a practice known as downcoding, in a manner that prevents the provider from collecting the fee for actual services performed either from the health benefit plan or the patient. Establishes the Tennessee Commission of Insurance Review (TCIR) for review and enforcement of the anti-downcoding provisions. Prohibits insurers from offering policies which allow to alter fee schedules, reimbursement rates, or certain other policies without an opportunity for providers to review and renegotiate their contract with the insurer. Requires insurers to review AI-generated materials. Prohibits certain year-over-year adjustments to group insurance plans and targeted pricing known as "lasering" based on medical condition. Restricts insurers from transmitting enrollee medical information abroad and other changes related to health care insurance. (16pp.) Broadly captioned.

AI Summary: A Tennessee commission of insurance review is established to oversee and enforce regulations on health insurance entities, including prohibitions on downcoding, lasering, and unauthorized use of artificial intelligence in claim reviews. Health insurance entities are required to provide advance notice and negotiation opportunities before making material changes to provider contracts, ensure reimbursement parity across provider licensure classifications, and are restricted from sending enrollees' medical information outside the U.S. Ownership restrictions are imposed to prevent conflicts of interest between healthcare providers and health insurance entities starting July 1, 2026.

Fiscal Impact: (Dated February 16, 2026) STATE GOVERNMENT EXPENDITURES General Fund FY26 -27 $1,773,100 FY27-28 & Subsequent Years $1,743,100 Total Positions Required: 10 OTHER FISCAL IMPACT Passage of this legislation will result in an increase in state, local, and federal government expenditures relating to TennCare and CoverKids and the State Group Insurance Plans. However, due to multiple variables and insufficient data, the exact increase cannot be reasonably determined.

2.
HB 1959
(SB 2040)
R. Scarbrough

- "Freedom, Access, and Integrity in Registered Pharmacy (FAIR Rx) Act." State Website

Sponsors: Rick Scarbrough, Bobby Harshbarger

Cosponsors: Ferrell Haile, Shane Reeves, Randy McNally, Tom Hatcher, Adam Lowe, Bo Watson, Ken Yager, Sara Kyle, Joey Hensley, Steve Southerland

Amendment Summary: Senate Health & Welfare Committee amendment 1 (013168) prohibits the simultaneous owning or controlling of a licensed pharmacy and a pharmacy benefit management (PBM) entity.

Description: As introduced, enacts the "Freedom, Access, and Integrity in Registered Pharmacy (FAIR Rx) Act," which requires that a pharmacy benefits manager shall not, directly or indirectly, acquire, hold, control, or otherwise possess any ownership or beneficial interest in, or exercise control over, a pharmacy license or a pharmacy license holder, whether through ownership, contract, or any other arrangement, including through management, staffing, leasing, supply, franchise, service, formulary, or revenue-sharing agreements, or any other arrangement that transfers operational control or economic benefit to the pharmacy benefits manager. Allows the board of pharmacy to issue a limited-use pharmacy license for certain rare, orphan, or FDA-designated limited-distribution drugs. Broadly captioned.

AI Summary: Ownership, operation, or control of pharmacies by pharmacy benefits managers (PBMs) or affiliated health insurers is prohibited in Tennessee effective January 1, 2028, to prevent conflicts of interest and protect patient choice and pharmacy access. Pharmacies affiliated with PBMs or covered entities may continue operations through December 31, 2028, if actively pursuing a bona fide sale to an unaffiliated entity, with enforcement authority granted to the attorney general and civil penalties up to $10,000 per violation. The Tennessee Board of Pharmacy is authorized to promulgate rules and oversee compliance, with contested enforcement actions subject to expedited hearings and exclusive jurisdiction in chancery court.

Fiscal Impact: (Dated February 23, 2026) OTHER FISCAL IMPACT The proposed legislation may result in increased expenditures to the Division of TennCare and the State Group Insurance Program as a result of increased drug acquisition costs , professional dispensing fees , and administrative costs associated with modifying or renegotiating pharmacy networks and reimbursement arrangements. Cost-saving s from reducing certain non -competitive busin ess practices may occur . Because the fiscal impact depends on business decisions, procurement responses, and evolving market conditions, the net impact on state expenditures cannot be reasonably determined. Impacts are anticipated to be most pronounced in the short - to mid -term periods following enactment, with stabilization expected as reimbursement benchmarks and pharmacy networks adjust over time .

5.
HB 1930
(SB 2067)

- Report on coverage for mental health, alcoholism, and drug dependency. State Website

Sponsors: Kevin Vaughan, Bo Watson

K. Vaughan

Cosponsors: Ken Yager
Description: As introduced, revises requirement for the department of commerce and insurance to report on coverage for mental health, alcoholism, and drug dependency. Broadly captioned.
AI Summary: The deadline for annual submissions under Tennessee Code Annotated, Section 56-7-2360(e), is changed to January 31 each year. This amendment applies to health care-related reporting requirements. The effective date is upon becoming law.
Fiscal Impact: (Dated January 22, 2026) NOT SIGNIFICANT

6. **- Allocates the first $150 million of HMO tax revenue from July 1, 2026, to enhance TennCare reimbursements for certain medical providers.** State Website

HB 2046 (SB 2080)

R. Williams

Sponsors: Ryan Williams, Bo Watson
Cosponsors: Rusty Crowe
Description: As introduced, directs the first $150 million of tax revenue generated by the health maintenance organization tax on or after July 1, 2026, to be utilized to draw down federal funds to reimburse a physician, advanced practice registered nurse, or physician assistant who is entitled to receive TennCare reimbursement for a CPT code for evaluation and management, obstetrics and gynecology, or anesthesia. Broadly captioned.
AI Summary: TennCare reimbursement rates for evaluation and management, obstetrics and gynecology, and anesthesia services are increased to up to 110% of the current Medicare rate, funded by the first $150 million of health maintenance organization tax revenue starting July 1, 2026. The tax revenue is designated to draw down federal funds to reimburse physicians, advanced practice registered nurses, and physician assistants for specified CPT codes. The Bureau of TennCare and Department of Commerce and Insurance are authorized to promulgate rules to implement these provisions.
Fiscal Impact: (Dated February 26, 2026) STATE GOVERNMENT REVENUE General Fund Division of TennCare FY26 -27 & Subsequent Years ($150,000,000) $150,000,000 EXPENDITURES Division of TennCare FY26 -27 & Subsequent Years $150,000,000 FEDERAL GOVERNMENT EXPENDITURES FY26 -27 & Subsequent Years $261,466,200

9. **- Stopping Health Insurers from Excluding Legal Decisions (SHIELD) Act.** State Website

HB 2243 (SB 2070)

B. Martin

Sponsors: Brock Martin, Bo Watson
Cosponsors: Debra Moody, Michele Reneau, Michael Hale, Timothy Hill
Description: As introduced, prohibits health insurance entities from calculating a quality measure, quality rating, incentive payment, or reimbursement tier for a healthcare provider by including any exempt patient in the denominator of any vaccination-related metric. Prohibits a health insurance entity from terminating a healthcare provider from a network, reduce a provider's reimbursement rate, or withhold an incentive payment solely because the provider retains exempt patients in the provider's practice.
AI Summary: SB 2070/HB 2243 (Tennessee) prohibits health insurance entities from including patients who decline vaccinations in vaccination-related quality measures used to determine provider reimbursement, incentives, or network status. Providers must document exempt patients in medical records and submit claims with appropriate diagnosis codes to exclude these patients from quality metric calculations. Health insurers are barred from penalizing providers by reducing reimbursement, withholding incentives, or terminating network participation solely for retaining exempt patients, with violations subject to timely reimbursement penalties.
Fiscal Impact: (Dated February 27, 2026) STATE GOVERNMENT EXPENDITURES General Fund FY26 -27 $1,913, 900 FY27 -28 & Subsequent Years $546,8 00 FEDERAL GOVERNMENT EXPENDITURES FY26 -27 $3,336,1 00 FY27 -28 & Subsequent Years $953, 200

Tue 3/10/2026 11:00 AM CST - House Hearing Room I, House Education Committee

13. **- Expands prescribed forms of epinephrine for life-threatening allergic reactions than an LEA or nonpublic school is authorized to administer.** State Website

HB 1550 (SB 1716)

E. Davis

Sponsors: Elaine Davis, Joey Hensley
Cosponsors: Scott Cepicky
Amendment Summary: Senate Education amendment 1 (013538) changes the effective date to July 1, 2026.
Description: As introduced, expands the prescribed forms of epinephrine that an LEA or nonpublic school is authorized to administer when a student is believed to be experiencing a life-threatening allergic or anaphylactic reaction to any prescribed form of epinephrine, not just epinephrine auto-injectors.
AI Summary: Requirements are imposed for public and nonpublic schools in Tennessee to maintain epinephrine supplies for treating allergic reactions when a student's personal epinephrine is unavailable or for first-time reactions, with recommended storage in at least two unlocked, secure locations. Physicians are authorized to prescribe epinephrine in the name of local education agencies or schools, and liability protections are established for prescribing physicians and school personnel administering epinephrine unless actions are taken with intentional disregard for safety.

The effective date of these provisions is set for July 1, 2026.
Fiscal Impact: (Dated February 07, 2026) LOCAL GOVERNMENT EXPENDITURES Permissive FY26-27 & Subsequent Years NET $202,500

Tue 3/10/2026 11:00 AM CST - House Hearing Room II, House Population Health Subcommittee

4. **HB 2569 (SB 1584)** S. Kumar

- Hospitals must offer flu and pneumococcal immunizations to patients aged 50 or older before discharge. State Website

Sponsors: Sabi Kumar, Ferrell Haile

Description: As introduced, lowers the age of an inpatient from 65 to 50 or older when a hospital, each year from October 1 through March 1, must offer immunization against influenza disease prior to discharge. Requires a hospital to offer immunization against pneumococcal disease to an inpatient aged 50 or older prior to discharge. Broadly captioned.

AI Summary: Immunization requirements are imposed on hospitals in Tennessee under SB 1584/HB 2569, mandating that inpatients aged 50 or older be offered influenza and pneumococcal vaccines prior to discharge, following CDC advisory committee recommendations and subject to vaccine availability. The influenza vaccine must be offered annually between October 1 and March 1. These provisions take effect on July 1, 2026.

Fiscal Impact: (Dated January 12, 2026) NOT SIGNIFICANT

5. **HB 2176 (SB 2460)** R. Travis

- Requires the department of mental health and substance abuse services to include the legislative librarian in quarterly reports on accommodations and delayed admissions in state mental health facilities. State Website

Sponsors: Ron Travis, Paul Bailey

Description: Mental Health & Substance Abuse Services, Dept. of - As introduced, adds the legislative librarian to the list the department of mental health and substance abuse services must submit its quarterly report to on the implementation and impact of available suitable accommodations, including the number and length of any delayed admissions, in state owned or operated hospitals or treatment resources. - Amends TCA Title 4; Title 33; Title 52; Title 63 and Title 68.

AI Summary: The Tennessee Department of Mental Health is required to include the legislative librarian as a recipient in its quarterly reports. Tennessee Code Annotated Section 33-6-109 is amended to specify this addition. The change takes effect immediately upon becoming law.

Fiscal Impact: (Dated February 02, 2026) NOT SIGNIFICANT

6. **HB 1852 (SB 1767)** M. Fritts

- "Tennessee mRNA Pharmaceutical Sovereignty and Safety Act." State Website

Sponsors: Monty Fritts, Mark Pody

Description: As introduced, enacts the "Tennessee mRNA Pharmaceutical Sovereignty and Safety Act," which prohibits individuals, including professional providers of health care and veterinary medicine, from administering any vaccine or other injectable solution that contains an mRNA vaccine or vaccine material. Broadly captioned.

AI Summary: Administration of mRNA vaccines or injectable solutions containing mRNA vaccine material to humans or animals is prohibited in Tennessee under HB 1852. Violations are classified as Class A misdemeanors with fines up to $2,500 per offense, and healthcare providers may face license suspension or revocation. The act, effective January 1, 2027, is motivated by concerns over mRNA vaccine safety and efficacy, including alleged adverse health effects and calls for moratoriums.

Tue 3/10/2026 12:30 PM CST - House Hearing Room I, House Health Committee

2. **HB 1665 (SB 1664)** A. Maberry

- Restricts healthcare providers from asking gender-related questions to minors without parental consent. State Website

Sponsors: Aron Maberry, Paul Rose

Description: As introduced, prohibits a healthcare provider from asking certain listed gender-related questions to a minor unless a parent is physically present and fully informed and provides written consent to such questions and the questions are directly related to the diagnosis or treatment of a specific medical or psychological condition currently being evaluated. Makes other related changes.

AI Summary: SB 1664/HB 1665 (Tennessee) prohibits healthcare providers from asking minors questions about gender identity without parental consent and restricts insurers from requiring such questions for reimbursement or credentialing. Parental rights to access all healthcare forms and to make healthcare decisions for minors are reinforced, and violations by providers are subject to professional discipline and consumer protection penalties. Exceptions are allowed for emergency care, mandated abuse reporting, and when parents are present and consent to gender-related inquiries directly related to diagnosis or treatment.

Fiscal Impact: (Dated January 26, 2026) NOT SIGNIFICANT

4. **HB 1984 (SB 1848)** T. Hill

- Authorizes new categories of health care providers to administer the opiod buprenorphine. State Website

Sponsors: Timothy Hill, Becky Massey

Cosponsors: Rusty Grills

Description: Authorizes additional healthcare providers to directly administer buprenorphine mono or buprenorphine without the use of naloxone. Adds that prescribing a buprenorphine product to nursing mother or prescribing an injectable mono product does not restrict certain healthcare providers from prescribing a buprenorphine product for the treatment of opioid use disorder without naloxone.

AI Summary: Use of buprenorphine mono or buprenorphine without naloxone is restricted to direct administration by healthcare providers within their scope of practice for substance use disorder treatment, prohibiting dispensing for off-premises use. Prescribing or dispensing of buprenorphine mono products without naloxone is limited to pregnant or nursing women, patients with documented adverse reactions, or when prescribing injectable mono products. Amendments to Tennessee Code Annotated Title 53, Chapter 11, are enacted under HB 1984 (Tennessee) to regulate buprenorphine product use accordingly.

Fiscal Impact: (Dated January 22, 2026) NOT SIGNIFICANT

6. **HB 1954 (SB 2549)** E. Helton-Haynes

- Buprenorphine products for inmates. State Website

Sponsors: Esther Helton-Haynes, Shane Reeves

Description: As introduced, adds that a healthcare provider who subcontracts through the contracted healthcare vendor with the department of correction may prescribe a buprenorphine product for the treatment of opioid use disorder if other certain listed criteria are met. Broadly captioned.

AI Summary: The definition of healthcare providers eligible to prescribe buprenorphine products is amended in Tennessee Code Annotated Section 53-11-311(j)(2)(B) to include those employed by, contracting with, or subcontracting through the contracted healthcare vendor with the department of correction or county or municipal jails. This change expands the scope of authorized prescribers within correctional healthcare settings. The amendment takes effect immediately upon becoming law.

Fiscal Impact: (Dated February 13, 2026) NOT SIGNIFICANT

7. **HB 2145 (SB 2544)** B. Terry

- Respiratory Care Interstate Compact Act. State Website

Sponsors: Bryan Terry, Shane Reeves

Description: As introduced, enacts the "Respiratory Care Interstate Compact Act." - Amends TCA Title 4 and Title 63.

AI Summary: An interstate compact is established to facilitate the practice of respiratory therapy across member states by allowing licensed respiratory therapists to obtain compact privileges to practice in multiple states while maintaining state regulatory authority. The compact creates a commission to oversee implementation, data sharing, adverse action reporting, rulemaking, and dispute resolution among member states. Provisions address active military members, license portability, enforcement mechanisms, and the conditions for state participation, withdrawal, and amendment of the compact.

Fiscal Impact: (Dated February 14, 2026) OTHER FISCAL IMPACT A precise fiscal impact cannot be determined, but expenditures to the Board of Respiratory Care are reasonably estimated to exceed $10,000 for participation once the Compact goes into effect. Pursuant to Tenn. Code Ann. § 4 -29-121, all health -related boards are required to be self -supporting over a two -year period. The Board of Respiratory Care had an annual deficit of $2,992 in FY23 -24, an annual deficit of $129,591 in FY24 -25, and a cumulativ e reserve balance of $936,442 on June 30, 2025.

10. **HB 2100 (SB 2281)** J. Faison

- Removes certificate of need requirement for nonresidential opioid treatment centers starting July 1, 2026. State Website

Sponsors: Jeremy Faison, Richard Briggs

Description: As introduced, removes nonresidential substitution-based treatment centers for opiate addiction from the requirement of obtaining a certificate of need beginning July 1, 2026.

AI Summary: Certain certificate of need provisions under Tennessee Code Annotated Title 68, Chapter 11 are repealed, including specific subdivisions related to mental health and substance abuse services. Multiple sections and subsections governing certificate of need requirements and processes are deleted to streamline regulatory oversight. These changes take effect on July 1, 2026.

Fiscal Impact: (Dated February 28, 2026) STATE GOVERNMENT REVENUE Health Facilities Commission FY26 -27 & Subsequent Years >($11,500) OTHER FISCAL IMPACT The Health Facilities Commission is required to prescribe fees for the C ertificate of Need program in an amount that allows the program to be self -sufficient. Therefore, it is assumed that any decrease in revenue will be offset by fees assessed to other facilities and providers.

19. **HB 398 (SB 343)** R. Williams

- Licensing board response to inquiry regarding prescriber identified as high-risk prescriber. State Website

Sponsors: Ryan Williams, Paul Bailey

Amendment Summary: House Health Subcommittee amendment 1 (014083) requires each

paramedic to complete a course of instruction on making an actual determination and pronouncement of death. Prohibits the Emergency Medical Services (EMS) Board from issuing a paramedic license to an applicant from another state if the applicant does not provide proof of the successful completion of a training course on the actual determination and pronouncement of death. Authorizes a licensed paramedic to make an actual determination and pronouncement of death if the paramedic has successfully completed training in the determination and pronouncement of death and the paramedic has attempted to resuscitate the person in accordance with standards established by the EMS Board. Does not permit a paramedic to make the actual determination and pronouncement of death of a patient who is in a hospital when the apparent death occurs. For the purpose of promulgating rules, the legislation takes effect upon becoming a law. For all other purposes, takes effect January 1, 2027.

Description: Increases, from 30 to 45, the number of days a licensing board has to respond to the department of health after the department has inquired about the status of an action or lack of action taken against a prescriber whose prescribing patterns of controlled substances have been identified as representing a statistical outlier, or if the prescriber is identified as a top prescriber or a high-risk prescriber. Broadly captioned.

AI Summary: The deadline for a specified action under Tennessee Code Annotated Section 68-1-128(h)(2) is extended from thirty to forty-five days. This change affects health-related provisions within Tennessee law. The amendment takes effect immediately upon becoming law.

Fiscal Impact: (Dated January 29, 2025) NOT SIGNIFICANT

21. **HB 2290** **(SB 2461)** R. Williams

- Certification requirements for assisted reproductive technology practitioners and fertility clinics. State Website

Sponsors: Ryan Williams, Paul Bailey

Description: As introduced, creates a certification requirement to practice in assisted reproductive technology. requires the department of health to create a certification process for fertility clinics and makes other related changes. Broadly captioned.

AI Summary: Requirements are established for medical and osteopathic practitioners to obtain certification to practice assisted reproductive technology in Tennessee, including compliance with specific training and use of standardized consent forms. Fertility clinics must be certified by the Department of Health, post a bond for embryo storage, undergo annual inspections, and report pregnancy success rates to both the CDC and the state. Genetic testing of embryos is restricted to chromosomal abnormalities or fatal fetal anomalies, and rules are authorized to be promulgated to enforce these provisions effective July 1, 2026.

Fiscal Impact: (Dated February 14, 2026) STATE GOVERNMENT EXPENDITURES General Fund FY26 -27 $503,800 FY27 -28 & Subsequent Years $369,1 00 Total Positions Required: 3 SB 2461 - HB 2290 2

23. **HB 2075** **(SB 2149)** B. Terry

- "Helping Open Pathways to Effective (HOPE) Treatment Act." State Website

Sponsors: Bryan Terry, Page Walley

Cosponsors: Iris Rudder, Bob Freeman, Esther Helton-Haynes, Elaine Davis, Chris Hurt, Sabi Kumar, Paul Sherrell, Torrey Harris

Description: As introduced, enacts the "Helping Open Pathways to Effective (HOPE) Treatment Act," which improves mental health and substance abuse services. Advocates conducting ibogaine drug development clinical trials. (11pp.) Broadly captioned.

AI Summary: Tennessee Senate Bill 2149/House Bill 2075 authorizes and funds participation in multistate clinical trials to research ibogaine as a treatment for opioid use disorder, co-occurring substance use disorders, and other neurological or mental health conditions. A council on emerging behavioral health treatments is established to oversee state participation, authorize institutions to join a multistate ibogaine research consortium, manage funding, and allocate revenue from intellectual property to a dedicated innovation fund supporting behavioral health research and training. Medical supervision requirements, confidentiality protections, and exemptions from controlled substances liability are imposed for authorized clinical trials conducted under FDA investigational new drug applications.

Fiscal Impact: (Dated February 21, 2026) OTHER FISCAL IMPACT To the extent that the federal Food and Drug Administration approves ibogaine for treatment of medical conditions there could be future increases in state expenditures and revenue associated with cohorts researching the use of ibogaine to treat opioid use disorder and other mental health condition s. Such increases are dependent on a number of unknown factors and cannot be reasonably estimated.

Tue 3/10/2026 2:00 PM CST - Senate Hearing Room I, Senate Commerce and Labor Committee

16. **SB 1664** **(HB 1665)** P. Rose

- Restricts healthcare providers from asking gender-related questions to minors without parental consent. State Website

Sponsors: Paul Rose, Aron Maberry

Description: As introduced, prohibits a healthcare provider from asking certain listed gender-related questions to a minor unless a parent is physically present and fully informed and provides written

consent to such questions and the questions are directly related to the diagnosis or treatment of a specific medical or psychological condition currently being evaluated. Makes other related changes.
AI Summary: HB 1665/SB 1664 (Tennessee) prohibits healthcare providers from asking minors questions about gender identity, gender dysphoria, or related topics without parental consent and presence, except when directly related to diagnosis or treatment. Insurance entities are barred from requiring such questions for reimbursement or credentialing and cannot penalize providers for noncompliance. Parental rights to access all healthcare forms and questionnaires are ensured, and violations by providers constitute unprofessional conduct subject to disciplinary action.
Fiscal Impact: (Dated January 26, 2026) NOT SIGNIFICANT

23.
SB 1692
(HB 1677)
B. Massey

- Military Families Licensing Recognition Act. State Website
Sponsors: Becky Massey, Rick Eldridge
Cosponsors: Jessie Seal, Kerry Roberts, Richard Briggs, Antonio Parkinson, Yusuf Hakeem, Lowell Russell, Brock Martin, Michele Reneau, Fred Atchley, Rush Bricken, Clark Boyd, Michael Lankford
Description: As introduced, enacts the "Military Families Licensing Recognition Act ." Authorizes issuance of occupational licenses to persons from another state or in the military who currently hold such occupational license. Specifies requirements for issuance of license.
AI Summary: Occupational licensing boards are required to issue licenses to active or retired military members and their families based on equivalent licenses or work experience held in other states or the military, subject to verification and good standing criteria. Licenses must be issued within ten business days, and applicants must affirm compliance with state laws and absence of disqualifying conduct. Licensing recognition is limited to Tennessee and does not affect interstate compacts or private certifications, with implementation effective July 1, 2026.
Fiscal Impact: (Dated February 21, 2026) STATE GOVERNMENT EXPENDITURES General Fund FY26-27 $32,100 OTHER FISCAL IMPACT The proposed legislation is estimated to increase licensure fee revenue for occupation al licensing board s; however , due to multiple unknown factors , such as the number of applicants and the specific board under which the applicant will seek licensure , the increase in revenue to any particular board cannot be determined with reasonable certainty.

24.
SB 226
(HB 470)
A. Lowe

- Professionals' Freedom of Religion Act. State Website
Sponsors: Adam Lowe, Tim Rudd
Cosponsors: Jody Barrett
Amendment Summary: House Business & Utilities Subcommittee amendment 1 (004890) enacts the Professionals' Freedom of Religion Act (Act). Prohibits a governmental entity, official of such entity, or accrediting, certifying, or licensing body from denying, revoking, or suspending a person's professional or business license, or taking adverse action against a person, based on the person's beliefs or the lawful expressions of such beliefs in a nonprofessional setting, including the licensee's religious beliefs concerning marriage, family, or sexuality. Declares that the Act does not apply to a license to practice law unless the Supreme Court establishes guidelines. Prohibits a person from denying or disfavoring an individual's access to or membership or participation in a multiple-listing service (MLS) or real estate brokers' organization based on an individual's religious or moral beliefs, or an individual's lawful expression of those beliefs in a nonprofessional setting that does not involve real estate-related activities or transactions, and where such expression does not otherwise violate the Tennessee Real Estate Broker License Act of 1973. Prohibits organizations that control or operate a real estate MLS from requiring a person to have a membership in the organization as a condition for a licensed broker or affiliate broker to have full use of such MLS. Prohibits a non-member from being charged an MLS participation fee higher than those paid by association members. Creates a cause of action for an individual harmed by a governmental entity or person resulting from actions prohibited in the Act. Declares that a governmental entity or person found to violate the Act is subject to payment to the complainant for damages for injury and other remedies as necessary to eliminate the unlawful actions. House Business & Utilities Subcommittee amendment 2 (005150) enacts the Professionals' Freedom of Religion Act (Act). Prohibits a governmental entity from denying, revoking, suspending, or taking adverse action against an individual's professional license for acts relevant to the individual's religious beliefs or moral convictions as long as the services provided otherwise meet the standard of care or practice for that profession. Declares that the Act does not apply to a license to practice law unless the Supreme Court establishes guidelines. Prohibits a person from denying or disfavoring an individual's access to or membership or participation in a multiple-listing service (MLS) or real estate brokers' organization based on an individual's religious or moral beliefs, or an individual's lawful expression of those beliefs in a nonprofessional setting that does not involve real estate-related activities or transactions, and where such expression does not otherwise violate the Tennessee Real Estate Broker License Act of 1973. Creates a cause of action for an individual harmed by a governmental entity or person resulting from actions prohibited in the Act. Declares that a governmental entity or person found to violate the Act is subject to payment to the complainant for damages for injury and other remedies as necessary to eliminate the unlawful actions.
Description: Enacts the "Tennessee Professionals' Freedom of Religion Act." Specifies that it is unlawful for a governmental entity to deny, revoke, suspend, or take other adverse action against an individual's license for the following: (1) Refusing to affirm a statement or oath that is contrary to the

individual's sincerely held religious beliefs or moral convictions; (2) Expressing sincerely held religious beliefs or moral convictions in any context, including a professional context, as long as the services provided otherwise meet the standard of care or practice for that profession; or (3) Providing faith-based services that otherwise meet the standard of care or practice for that profession. Makes it unlawful for a governmental entity to take any adverse action against a licensee or applicant for licensure based on such person's beliefs or the lawful expression of those beliefs, to the extent protected under the United States Constitution or the Constitution of Tennessee.
AI Summary: Protections are established under HB 470/SB 226 (Tennessee) to prohibit governmental entities from denying, revoking, or disciplining professional licenses based on individuals' sincerely held religious beliefs or moral convictions, including the expression of such beliefs and provision of faith-based services that meet professional standards. Restrictions are imposed on real estate brokers' organizations and multiple-listing services to prevent discrimination or unfavorable treatment based on religious or moral beliefs, and to prohibit mandatory membership or higher fees for non-members. Remedies are provided for individuals harmed by violations, including damages, attorney's fees, and other appropriate relief.
Fiscal Impact: (Dated February 1, 2025) NOT SIGNIFICANT

29.
SB 2010
(HB 1866)
S. Kyle

- Regulate Artificial Intelligence (AI) In Health Care Act. State Website
Sponsors: Sara Kyle, Justin Jones
Description: As introduced, creates the "Regulate Artificial Intelligence (AI) In Health Care Act." Specifies that a health insurance issuer that uses an artificial intelligence, algorithm, or other software tool for the purpose of utilization review or utilization management functions, based in whole or in part on medical necessity, or that contracts with or otherwise works through an entity that uses an artificial intelligence, algorithm, or other software tool for the purpose of utilization review or utilization management functions, based in whole or in part on medical necessity, shall not deny, delay, or modify healthcare services based, in whole or in part, on medical necessity unless the request for prior authorization for such healthcare services is reviewed by a licensed healthcare professional or healthcare provider. Specifies that a violation is an unfair claims practice. Authorizes the department of commerce and insurance to promulgate rules to effectuate this section.
AI Summary: Requirements are imposed on health insurance issuers in Tennessee under HB 1866/SB 2010 to ensure that any denial, delay, or modification of healthcare services based on medical necessity involving artificial intelligence or algorithmic tools must be reviewed and approved by a licensed healthcare professional. Violations are classified as unfair claims practices subject to penalties and allow for private causes of action with potential awards of actual and punitive damages plus attorney fees. The Department of Commerce and Insurance is authorized to promulgate rules to implement these provisions, effective July 1, 2026.
Fiscal Impact: (Dated February 04, 2026) NOT SIGNIFICANT

34.
SB 739
(HB 668)
B. Harshbarger

- Extension of cancellation and return policy period. State Website
Sponsors: Bobby Harshbarger, Renea Jones
Cosponsors: Adam Lowe, Janice Bowling, Elaine Davis, Michele Reneau, Bud Hulsey, Iris Rudder, Jeremy Faison, William Lamberth, Tim Rudd, Rick Eldridge, Greg Vital, Sabi Kumar
Description: Extends the cancellation period for individuals who purchase, subscribe to, or receive products, services, or memberships in any organization from 30 days to 45 days, provided that services have not been rendered, products are unused and in their original condition, or memberships have not been utilized. Broadly captioned.
AI Summary: The response time for consumer protection claims under Tennessee Code Annotated Section 47-18-123(a) is extended from thirty to forty-five days. HB 668 and SB 739 amend the timeframe within which consumer complaints must be addressed. The change takes effect immediately upon becoming law.
Fiscal Impact: (Dated February 3, 2025) NOT SIGNIFICANT

38.
SB 711
(HB 1076)
R. Briggs

- Time an insurer has to file with the commissioner of commerce and insurance. State Website
Sponsors: Richard Briggs, Scott Cepicky
Cosponsors: Randy McNally, Bo Watson, Shane Reeves
Description: Decreases the amount of time an insurer of personal risk insurance must file with the commissioner of commerce and insurance before the proposed effective date of all rates, supplementary rate information, policy forms, supporting information, and endorsements from 30 days to 21 days. Broadly captioned.
AI Summary: The notification period for certain insurance-related actions is reduced from thirty days to twenty-one days by amending Tennessee Code Annotated, Section 56-5-105(a). This change applies to insurance regulations within the state of Tennessee under HB 1076/SB 711. The amendment takes effect immediately upon becoming law to address public welfare needs.
Fiscal Impact: (Dated February 7, 2025) NOT SIGNIFICANT

47.
SB 2227
(HB 2539)

- Report on remote use of the WIC program by the Department of Health. State Website
Sponsors: Jack Johnson, William Lamberth
Cosponsors: Mark Cochran, Sabi Kumar

J. Johnson

Description: As introduced, removes provisions relative to a report that was due by December 15, 2022, from the department of health concerning remote use of the special supplemental food program for women, infants, and children. Broadly captioned.
AI Summary: Subsection (b) of Tennessee Code Annotated, Section 68-1-144, is deleted, removing the specific provision contained therein. Amendments affect multiple titles related to health, including Titles 4, 8, 33, 36, 48, 49, 52, 53, 55, 56, 62, 63, and 68. The changes take effect immediately upon becoming law.
Fiscal Impact: (Dated February 02, 2026) NOT SIGNIFICANT

50.
SB 420
(HB 870)
S. Reeves

- Pharmacy benefits. State Website
Sponsors: Shane Reeves, Iris Rudder
Cosponsors: Renea Jones
Description: Prohibits an insurer, pharmacy benefits manager, or third-party administrator from changing or conditioning the terms of health plan coverage based on availability of financial or other product assistance for a prescription drug. Establishes certain procedures for calculating an enrollee's contribution to an applicable cost sharing requirement. Broadly captioned.
AI Summary: Cost-sharing calculations for enrollees in Tennessee health plans are regulated to include amounts paid by or on behalf of the enrollee, with specific provisions for health savings account-qualified high deductible plans and exceptions for generic drugs. Insurers, pharmacy benefits managers, and third-party administrators are prohibited from altering health plan coverage terms based on the availability or amount of financial assistance for prescription drugs. These provisions apply to health plans entered into or renewed on or after January 1, 2026, under Senate Bill 420.
Fiscal Impact: (Dated January 31, 2025) NOT SIGNIFICANT

54.
SB 1796
(HB 1955)
S. Reeves

- Annual report on pharmacy benefits managers' alleged violations and penalties for reimbursement delays. State Website
Sponsors: Shane Reeves, Esther Helton-Haynes
Description: As introduced, directs the commissioner of commerce and insurance to publish and submit to the general assembly on or before October 1, 2026, a report containing data on alleged statutory violations by pharmacy benefits managers during the previous fiscal year for failing to meet requirements for timely reimbursements to pharmacies. Requires the report to include data on the number of alleged violations reported, the commissioner's findings from any ensuing investigations, and any penalties imposed for findings of violations. Broadly captioned.
AI Summary: A report on violations of pharmacy benefits manager regulations under § 56-7-3124 is required to be published by the Tennessee commissioner of commerce and insurance by October 1, 2026. The report must include the number of violations reported, investigation findings, and penalties imposed, and be submitted to legislative officials. The act takes effect immediately upon becoming law.
Fiscal Impact: (Dated January 20, 2026) NOT SIGNIFICANT

55.
SB 1797
(HB 2093)
S. Reeves

- Restrictions on managed care organizations regarding termination of qualified nursing facility contracts under TennCare. State Website
Sponsors: Shane Reeves, Ryan Williams
Description: As introduced, prohibits a managed care organization from suspending, denying, refusing to review, terminating, or otherwise taking action resulting in the actual or constructive termination of a qualified nursing facility contract except under certain listed circumstances. Specifies that the bureau of TennCare has the exclusive authority to determine whether a qualified nursing facility may be terminated from participating in the TennCare program and makes other related changes.
AI Summary: Requirements are imposed on managed care organizations (MCOs) in Tennessee to contract with all qualified nursing facilities certified to provide Medicaid services under TennCare, prohibiting MCOs from imposing additional participation or termination criteria beyond those established by the TennCare bureau. Exclusive authority is granted to the bureau to determine termination or eligibility of qualified nursing facilities, and MCOs are required to continue contracts and payments during bureau investigations or reviews. Contract provisions allowing MCOs to terminate nursing facility contracts without cause or independent of bureau action are declared void, with bureau oversight mandated for contract templates and enforcement actions.
Fiscal Impact: (Dated February 27, 2026) STATE GOVERNMENT EXPENDITURES General Fund FY26 -27 & Subsequent Years $205,100 Total Positions Required: 6 FEDERAL GOVERNMENT EXPENDITURES FY26 -27 & Subsequent Years $357,50 0

56.
SB 1936
(HB 1887)
S. Reeves

- Creates a licensure process for prescribed pediatric extended care programs. State Website
Sponsors: Shane Reeves, Robert Stevens
Description: As introduced, creates a licensure process for prescribed pediatric extended care programs. Requires TennCare to submit a waiver to the federal centers for Medicare and Medicaid services seeking approval to provide coverage and benefits for those who receive services from a prescribed pediatric extended care program.

AI Summary: Licensure requirements and operational standards are established for prescribed pediatric extended care centers in Tennessee, including definitions, application procedures, inspections, and penalties for noncompliance. Coverage and benefits for services rendered at these centers are mandated under TennCare, subject to federal approval, with a waiver request deadline set for December 31, 2026. The law takes effect January 1, 2027, with rule promulgation authority granted to the relevant department.
Fiscal Impact: (Dated February 26, 2026) STATE GOVERNMENT REVENUE General Fund FY27 -28 & Subsequent Years $4,500 EXPENDITURES General Fund FY26 -27 $34,200 FY27 -28 $7,013,500 FY28 -29 $13,9 58,600 FY29 -30 & Subsequent Years $20,9 03,700 Total Positions Required: 1 FEDERAL GOVERNMENT EXPENDITURES FY27 -28 $12,494,90 0 FY28 -29 $24,989,80 0 FY29 -30 & Subsequent Years $37,484,7 00

57.
SB 2550
(HB 2579)
S. Reeves

- Notice period for health insurance entities to inform providers of changes to provider manuals or reimbursement policies. State Website
Sponsors: Shane Reeves, Sabi Kumar
Cosponsors: Rusty Crowe, Heidi Campbell
Description: As introduced, increases, from 60 to 65 days prior to the effective date of the change, the required minimum notice that a health insurance entity must provide to a healthcare provider of any material change made in the sole discretion of the insurance entity to the entity's previously released provider manual or a reimbursement rule and policy.
AI Summary: The deadline for health insurance claim payment determinations is extended from sixty (60) days to sixty-five (65) days under Tennessee Code Annotated, Section 56-7-3302(a)(1). This amendment applies to health insurance practices regulated by Title 56, Chapter 7 of Tennessee law. The change takes effect immediately upon becoming law.
Fiscal Impact: (Dated February 03, 2026) NOT SIGNIFICANT

58.
SB 2554
(HB 2162)
S. Reeves

- TennCare actuarial study and related comments to be submitted electronically to legislative committees. State Website
Sponsors: Shane Reeves, Iris Rudder
Description: As introduced, authorizes the comptroller of the treasury to submit the annual actuarial study of the TennCare program and participating managed care organizations, along with any related oral and written comments, to the designated legislative committees and offices in an electronic format. Broadly captioned.
AI Summary: Electronic submission of the final study and related oral and written comments to legislative committees is authorized by amending Tennessee Code Annotated, Section 71-5-188(a). HB 2162/SB 2554 (Tennessee) modifies reporting procedures for studies under Title 71 to allow electronic formats. The act takes effect immediately upon becoming law.
Fiscal Impact: (Dated February 02, 2026) NOT SIGNIFICANT

59.
SB 2557
(HB 2503)
S. Reeves

- Fee schedules for health insurance carriers. State Website
Sponsors: Shane Reeves, Cameron Sexton
Description: As introduced, decreases, from 10 to nine business days, the time that a health insurance carrier has after receipt of a written request from a healthcare provider to deliver to the provider at the provider's dedicated email address that provider's fee schedule, free of charge, in either a partial or full version as requested by the provider, in a transferable industry standard spreadsheet, including Microsoft Excel or other comparable format. Broadly captioned.
AI Summary: The timeframe for health insurance claim processing is reduced from ten to nine business days under Tennessee Code Annotated Section 56-7-1013(f)(1). This amendment applies statewide and takes effect immediately upon becoming law.
Fiscal Impact: (Dated February 03, 2026) NOT SIGNIFICANT

65.
SB 604
(HB 614)
P. Bailey

- Disclosure of maximum allowable cost lists - destruction of shared information. State Website
Sponsors: Paul Bailey, Ron Travis
Description: Requires a pharmacy services administrative organization or similar entity that receives maximum allowable cost list or related information from a contracted pharmacy to destroy the shared information within five business days of receipt of a written request for destruction from the sharing pharmacy. Broadly captioned.
AI Summary: Confidential pharmacy information shared with pharmacy services administrative organizations must not be disclosed to third parties and must be destroyed within five business days upon the pharmacy's written request. Amendments to Tennessee Code Annotated Section 56-7-3111 impose these restrictions on information sharing. HB 614/SB 604 (Tennessee) takes effect immediately upon becoming law.
Fiscal Impact: (Dated February 8, 2025) NOT SIGNIFICANT

70.
SB 1901
(HB 1709)
P. Bailey

- Requires U.S. citizenship or qualified alien status for eligibility for various professional licenses and permits. State Website
Sponsors: Paul Bailey, Mark Cochran
Cosponsors: Cameron Sexton, Jeremy Faison, Jason Zachary, William Lamberth, Pat Marsh,

Johnny Garrett, Gino Bulso, Justin Lafferty, Mark White, Dan Howell, Gary Hicks, Chris Todd, Kevin Vaughan, Andrew Farmer, Debra Moody, Dennis Powers, Sabi Kumar, Rusty Grills, Rick Scarbrough, Kip Capley, Tim Rudd, Elaine Davis, Lowell Russell, Mary Littleton, David Hawk, Scott Cepicky, Michael Hale, Michele Carringer, Clay Doggett, Lee Reeves, Tom Leatherwood, Monty Fritts, Rebecca Alexander, Dave Wright, Todd Warner, Tandy Darby, Jake McCalmon, Brock Martin, Greg Martin, Jerome Moon, Clark Boyd, Aron Maberry, Paul Sherrell, Renea Jones, William Slater, Tim Hicks, Timothy Hill, Michael Lankford, John Crawford, Rick Eldridge, Ron Gant, Rush Bricken, Esther Helton-Haynes, Iris Rudder, Ed Butler, Fred Atchley, Tom Stinnett, Kelly Keisling, Kevin Raper, Robert Stevens

Description: As introduced, specifies in various provisions that for a person to be eligible for a particular license, certificate, permit, or authorization, the person must be a citizen of the United States or a qualified alien. Broadly captioned.

AI Summary: Licensure and professional certification requirements are amended to mandate that applicants be United States citizens or qualified aliens as defined in § 4-58-102, with specific exceptions for certain visa holders in the alcoholic beverage industry. Eligibility verification processes are established for reciprocal licensing agreements and various professional fields, including court reporting, education, healthcare, and aeronautics instruction. Existing provisions requiring notary status for court reporters and certain citizenship criteria in healing arts licensing are repealed or revised to align with the new eligibility standards.

Fiscal Impact: (Dated February 12, 2026) NOT SIGNIFICANT

72.
SB 2457
(HB 2576)
P. Bailey

- Removes outdated reimbursement rules for anatomic pathology services billed by gastroenterologists. State Website

Sponsors: Paul Bailey, Sabi Kumar

Description: As introduced, removes an obsolete reference to reimbursement requirements related to anatomic pathology services applying to anatomic pathology services billed by gastroenterologists only applying on and after July 1, 2014. Broadly captioned.

AI Summary: A provision in Tennessee Code Annotated Section 56-7-1015(j) related to healthcare billing is repealed. The amendment removes specific regulatory language within Title 56 concerning healthcare billing practices. The change takes effect immediately upon becoming law.

Fiscal Impact: (Dated February 03, 2026) NOT SIGNIFICANT

76.
SB 2044
(HB 1990)
B. Taylor

- Study on health concerns of persons whose biological sex is female. State Website

Sponsors: Brent Taylor, Michael Lankford

Cosponsors: Aron Maberry

Description: As introduced, directs the department of health to conduct a study on health concerns of, and identifying obstacles for receiving better care for, persons whose biological sex is female. Requires the department to submit a report to the members of the general assembly on the results of the study on or before January 1, 2027. Broadly captioned.

AI Summary: A study on health concerns and obstacles to better care for persons whose biological sex is female is mandated to be conducted by the Tennessee Department of Health. A report on the study's findings must be submitted to the General Assembly by January 1, 2027. The act takes effect immediately upon becoming law.

Fiscal Impact: (Dated January 28, 2026) NOT SIGNIFICANT

89.
SB 2067
(HB 1930)
B. Watson

- Report on coverage for mental health, alcoholism, and drug dependency. State Website

Sponsors: Bo Watson, Kevin Vaughan

Cosponsors: Ken Yager

Description: As introduced, revises requirement for the department of commerce and insurance to report on coverage for mental health, alcoholism, and drug dependency. Broadly captioned.

AI Summary: The deadline for annual reporting under Tennessee Code Annotated, Section 56-7-2360(e), is changed to January 31 each year. This amendment applies to health care-related reporting requirements. The change takes effect immediately upon becoming law.

Fiscal Impact: (Dated January 22, 2026) NOT SIGNIFICANT

91.
SB 2080
(HB 2046)
B. Watson

- Allocates the first $150 million of HMO tax revenue from July 1, 2026, to enhance TennCare reimbursements for certain medical providers. State Website

Sponsors: Bo Watson, Ryan Williams

Cosponsors: Rusty Crowe

Description: As introduced, directs the first $150 million of tax revenue generated by the health maintenance organization tax on or after July 1, 2026, to be utilized to draw down federal funds to reimburse a physician, advanced practice registered nurse, or physician assistant who is entitled to receive TennCare reimbursement for a CPT code for evaluation and management, obstetrics and gynecology, or anesthesia. Broadly captioned.

AI Summary: TennCare reimbursement rates for evaluation and management, obstetrics and gynecology, and anesthesia services are increased to up to 110% of the current Medicare rate, funded by the first $150 million of tax revenue collected under the health maintenance organization tax starting July 1, 2026. Physicians, advanced practice registered nurses, and physician assistants

eligible for TennCare reimbursement are covered under this provision. The Bureau of TennCare and Department of Commerce and Insurance are authorized to promulgate rules to implement these changes.
Fiscal Impact: (Dated February 26, 2026) STATE GOVERNMENT REVENUE General Fund Division of TennCare FY26 -27 & Subsequent Years ($150,000,000) $150,000,000 EXPENDITURES Division of TennCare FY26 -27 & Subsequent Years $150,000,000 FEDERAL GOVERNMENT EXPENDITURES FY26 -27 & Subsequent Years $261,466,200

92.
SB 2081
(HB 1956)
B. Watson

- Step therapy for cancer treatments. State Website
Sponsors: Bo Watson, Rebecca Alexander
Description: As introduced, expands the prohibition, from stage 4 advanced metastatic cancer or metastatic blood cancer to any cancer, against a health benefit plan that provides coverage for cancer requiring the use of a step therapy protocol before the health benefit plan provides coverage for an approved prescription drug to an enrollee who has received a diagnosis of cancer. Broadly captioned.
AI Summary: Step therapy protocols are prohibited for health benefit plans covering cancer and associated conditions before providing coverage for approved prescription drugs to enrollees diagnosed with cancer. Definitions related to cancer coverage are broadened by removing specific references to stage 4 advanced metastatic cancer and metastatic blood cancer. The commissioners of commerce and insurance and health are authorized to promulgate rules to implement these provisions effective January 1, 2027.
Fiscal Impact: (Dated January 28, 2026) NOT SIGNIFICANT

93.
SB 2155
(HB 2619)
B. Watson

- Prohibits health insurers from using downcoding to reduce provider payments and establishes the Tennessee commission of insurance review. State Website
Sponsors: Bo Watson, Dan Howell
Cosponsors: Cameron Sexton, Tim Hicks, John Crawford, Lowell Russell, Fred Atchley, David Hawk, Scott Cepicky, Mary Littleton, Clay Doggett, Jason Zachary, Greg Vital, Kevin Vaughan, Elaine Davis, Pat Marsh, Brock Martin, Greg Martin, Debra Moody, Kip Capley, Robert Stevens, Aron Maberry, Clark Boyd, Esther Helton-Haynes, Gary Hicks, Johnny Garrett, Andrew Farmer, Mark Cochran, Renea Jones, Jeremy Faison, Bryan Terry
Description: As introduced, prohibits a health insurance entity from offering or maintaining a health benefit plan that adjusts claims to a less complex or costly procedure code, a practice known as downcoding, in a manner that prevents the provider from collecting the fee for actual services performed either from the health benefit plan or the patient. Establishes the Tennessee Commission of Insurance Review (TCIR) for review and enforcement of the anti-downcoding provisions. Prohibits insurers from offering policies which allow to alter fee schedules, reimbursement rates, or certain other policies without an opportunity for providers to review and renegotiate their contract with the insurer. Requires insurers to review AI-generated materials. Prohibits certain year-over-year adjustments to group insurance plans and targeted pricing known as "lasering" based on medical condition. Restricts insurers from transmitting enrollee medical information abroad and other changes related to health care insurance. (16pp.) Broadly captioned.
AI Summary: HB 2619/SB 2155 (Tennessee) establishes the Tennessee Commission of Insurance Review to oversee and enforce regulations on health insurance entities, including prohibiting downcoding, lasering, and unauthorized unilateral changes to provider contracts. It mandates human review of AI-based claim coding, restricts outsourcing of medical data outside the U.S., and prohibits ownership overlap between healthcare providers and insurers after July 1, 2026. It also requires equal reimbursement for providers performing similar services within their scope of practice regardless of licensure classification and grants the commission exclusive enforcement authority over these provisions.
Fiscal Impact: (Dated February 16, 2026) STATE GOVERNMENT EXPENDITURES General Fund FY26 -27 $1,773,100 FY27-28 & Subsequent Years $1,743,100 Total Positions Required: 10 OTHER FISCAL IMPACT Passage of this legislation will result in an increase in state, local, and federal government expenditures relating to TennCare and CoverKids and the State Group Insurance Plans. However, due to multiple variables and insufficient data, the exact increase cannot be reasonably determined.

98.
SB 2499
(HB 2457)
S. Kyle

- Requires TennCare contractors to reimburse claims for long-acting injectable HIV treatment and prevention drugs administered. State Website
Sponsors: Sara Kyle, Torrey Harris
Cosponsors: Justin Pearson
Description: As introduced, requires a managed care organization or pharmacy benefits manager that is contracted with the bureau to reimburse a claim for a long-acting injectable drug intended for treatment and prevention of human immunodeficiency virus and administered in a pharmacy, physician's office, clinic, ambulatory surgical treatment center, or hospital. Broadly captioned.
AI Summary: Coverage and reimbursement requirements are imposed on managed care organizations and pharmacy benefits managers contracted with TennCare for long-acting injectable drugs used to treat or prevent HIV, administered in various healthcare settings. Reimbursement must

be provided for each individual treatment under either the medical or pharmacy benefit, but not both, ensuring providers are compensated appropriately. These provisions take effect July 1, 2026.
Fiscal Impact: (Dated February 26, 2026) STATE GOVERNMENT EXPENDITURES General Fund FY26 -27 & Subsequent Years $314,200 FEDERAL GOVERNMENT EXPENDITURES FY26 -27 & Subsequent Years $547,700

Wed 3/11/2026 8:00 AM CST - House Hearing Room I, House Commerce Committee

12.
HB 1709
(SB 1901)
M. Cochran

- Requires U.S. citizenship or qualified alien status for eligibility for various professional licenses and permits. State Website
Sponsors: Mark Cochran, Paul Bailey
Cosponsors: Cameron Sexton, Jeremy Faison, Jason Zachary, William Lamberth, Pat Marsh, Johnny Garrett, Gino Bulso, Justin Lafferty, Mark White, Dan Howell, Gary Hicks, Chris Todd, Kevin Vaughan, Andrew Farmer, Debra Moody, Dennis Powers, Sabi Kumar, Rusty Grills, Rick Scarbrough, Kip Capley, Tim Rudd, Elaine Davis, Lowell Russell, Mary Littleton, David Hawk, Scott Cepicky, Michael Hale, Michele Carringer, Clay Doggett, Lee Reeves, Tom Leatherwood, Monty Fritts, Rebecca Alexander, Dave Wright, Todd Warner, Tandy Darby, Jake McCalmon, Brock Martin, Greg Martin, Jerome Moon, Clark Boyd, Aron Maberry, Paul Sherrell, Renea Jones, William Slater, Tim Hicks, Timothy Hill, Michael Lankford, John Crawford, Rick Eldridge, Ron Gant, Rush Bricken, Esther Helton-Haynes, Iris Rudder, Ed Butler, Fred Atchley, Tom Stinnett, Kelly Keisling, Kevin Raper, Robert Stevens
Description: As introduced, specifies in various provisions that for a person to be eligible for a particular license, certificate, permit, or authorization, the person must be a citizen of the United States or a qualified alien. Broadly captioned.
AI Summary: Requirements are imposed for professional licenses, permits, certificates, authorizations, or registrations in Tennessee to be granted only to United States citizens or qualified aliens as defined in § 4-58-102, with specific exceptions for certain visa holders in alcoholic beverage-related licenses. Eligibility criteria across multiple professional and occupational fields, including court reporters, educators, healthcare practitioners, and aeronautics instructors, are amended to include citizenship or qualified alien status verification. Reciprocal licensing agreements and renewals are conditioned on confirming such status, effective for applications or renewals on or after the law's enactment.
Fiscal Impact: (Dated February 12, 2026) NOT SIGNIFICANT

19.
HB 470
(SB 226)
T. Rudd

- Professionals' Freedom of Religion Act. State Website
Sponsors: Tim Rudd, Adam Lowe
Cosponsors: Jody Barrett
Amendment Summary: House Business & Utilities Subcommittee amendment 1 (004890) enacts the Professionals' Freedom of Religion Act (Act). Prohibits a governmental entity, official of such entity, or accrediting, certifying, or licensing body from denying, revoking, or suspending a person's professional or business license, or taking adverse action against a person, based on the person's beliefs or the lawful expressions of such beliefs in a nonprofessional setting, including the licensee's religious beliefs concerning marriage, family, or sexuality. Declares that the Act does not apply to a license to practice law unless the Supreme Court establishes guidelines. Prohibits a person from denying or disfavoring an individual's access to or membership or participation in a multiple-listing service (MLS) or real estate brokers' organization based on an individual's religious or moral beliefs, or an individual's lawful expression of those beliefs in a nonprofessional setting that does not involve real estate-related activities or transactions, and where such expression does not otherwise violate the Tennessee Real Estate Broker License Act of 1973. Prohibits organizations that control or operate a real estate MLS from requiring a person to have a membership in the organization as a condition for a licensed broker or affiliate broker to have full use of such MLS. Prohibits a non-member from being charged an MLS participation fee higher than those paid by association members. Creates a cause of action for an individual harmed by a governmental entity or person resulting from actions prohibited in the Act. Declares that a governmental entity or person found to violate the Act is subject to payment to the complainant for damages for injury and other remedies as necessary to eliminate the unlawful actions. House Business & Utilities Subcommittee amendment 2 (005150) enacts the Professionals' Freedom of Religion Act (Act). Prohibits a governmental entity from denying, revoking, suspending, or taking adverse action against an individual's professional license for acts relevant to the individual's religious beliefs or moral convictions as long as the services provided otherwise meet the standard of care or practice for that profession. Declares that the Act does not apply to a license to practice law unless the Supreme Court establishes guidelines. Prohibits a person from denying or disfavoring an individual's access to or membership or participation in a multiple-listing service (MLS) or real estate brokers' organization based on an individual's religious or moral beliefs, or an individual's lawful expression of those beliefs in a nonprofessional setting that does not involve real estate-related activities or transactions, and where such expression does not otherwise violate the Tennessee Real Estate Broker License Act of 1973. Creates a cause of action for an individual harmed by a governmental entity or person resulting from

actions prohibited in the Act. Declares that a governmental entity or person found to violate the Act is subject to payment to the complainant for damages for injury and other remedies as necessary to eliminate the unlawful actions.
Description: Enacts the "Tennessee Professionals' Freedom of Religion Act." Specifies that it is unlawful for a governmental entity to deny, revoke, suspend, or take other adverse action against an individual's license for the following: (1) Refusing to affirm a statement or oath that is contrary to the individual's sincerely held religious beliefs or moral convictions; (2) Expressing sincerely held religious beliefs or moral convictions in any context, including a professional context, as long as the services provided otherwise meet the standard of care or practice for that profession; or (3) Providing faith-based services that otherwise meet the standard of care or practice for that profession. Makes it unlawful for a governmental entity to take any adverse action against a licensee or applicant for licensure based on such person's beliefs or the lawful expression of those beliefs, to the extent protected under the United States Constitution or the Constitution of Tennessee.
AI Summary: Protections are established under SB 226/HB 470 (Tennessee) to prohibit governmental entities from denying, revoking, or taking adverse actions against professional licenses based on individuals' sincerely held religious beliefs or moral convictions, including the expression of such beliefs and provision of faith-based services that meet professional standards. Restrictions are imposed on real estate multiple-listing services and brokers' organizations to prevent discrimination or unfavorable treatment based on religious or moral beliefs expressed outside professional real estate activities, and to prohibit mandatory membership or higher fees for non-members. Remedies are provided for individuals harmed by violations, including damages, attorney's fees, and other appropriate relief.
Fiscal Impact: (Dated February 1, 2025) NOT SIGNIFICANT

Wed 3/11/2026 8:00 AM CST - House Hearing Room II, House Criminal Justice Subcommittee

49.
HB 2101
(SB 2323)
J. Faison

- Increases annual purchase limits for ephedrine and pseudoephedrine products and updates tracking and fee requirements. State Website
Sponsors: Jeremy Faison, Ferrell Haile
Description: As introduced, increases the amount of products containing ephedrine or pseudoephedrine a person may purchase in a year from 43.2 grams to 61.2 grams. Changes references to the "National Precursor Log Exchange" (NPLEx) to the "electronic sales tracking system." Requires manufacturers of ephedrine products sold in Tennessee to, on a monthly basis, pay fees to the administrator of the electronic sales tracking system.
AI Summary: Requirements are imposed on pharmacies in Tennessee to use an electronic sales tracking system for monitoring over-the-counter sales of ephedrine and pseudoephedrine products, including mandatory real-time data submission and stop-sale alerts for individuals on the methamphetamine registry. The allowable purchase limit of these products is increased from 43.2 grams to 61.2 grams, and manufacturers are required to pay monthly fees to support the tracking system starting in 2027. Provisions also establish immunity for pharmacies acting in good faith, define the roles of the system administrator and law enforcement, and mandate system interoperability with the Tennessee Methamphetamine Information System if the current system becomes unavailable.

Wed 3/11/2026 9:30 AM CST - House Hearing Room III, House Finance, Ways, and Means Subcommittee

4.
HB 406
(SB 422)
B. Martin

- Promulgation of rules regarding oversight of facilities that manufacture, warehouse, and distribute medical devices. State Website
Sponsors: Brock Martin, Shane Reeves
Cosponsors: Tom Leatherwood, Esther Helton-Haynes, Greg Martin, Debra Moody, Sabi Kumar, Kevin Raper, Renea Jones, Mike Sparks, Michele Reneau, Jake McCalmon, Raumesh Akbari, Ken Yager
Amendment Summary: House Insurance Subcommittee amendment 1 (004430) requires a health insurer, beginning July 1, 2025, to provide coverage for prosthetic and custom orthotic devices in a manner that: (1) equals or exceeds the levels of coverage for such devices under the federal Medicare program; and (2) is no more restrictive than coverage of other medical devices provided under the health benefit plan. Requires coverage for prosthetic or custom orthotic devices to include: (1) a prosthetic or custom orthotic device determined by the covered person's healthcare provider to be the most appropriate model that adequately meets the medical needs of the covered person for purposes of completing activities of daily living or essential job-related activities; (2) a prosthetic or custom orthotic device determined by the covered person's healthcare provider to be the most appropriate model that meets the medical needs of the covered person for purposes of performing physical activities, including, but not limited to, running, cycling, swimming, and strength training, or to maximize the covered person's whole-body health and lower or upper limb function; (3) all materials and components necessary to use the prosthetic or custom orthotic device; (4) instruction

to the enrollee on using the prosthetic or custom orthotic device; and (5) repair or replacement of the prosthetic or custom orthotic device. Requires a health insurer that issues a health benefit plan to consider coverage benefits for prosthetic and custom orthotic devices as habilitative or rehabilitative benefits for purposes of any state or federal requirement for coverage of essential health benefits. Prohibits a health insurer from imposing cost-sharing requirements on prosthetic or custom orthotic devices unless the cost-sharing requirements do not exceed the cost-sharing requirements applicable to the health benefit plan's coverage for inpatient physician and surgical services. Requires a health insurer to ensure access to medically necessary clinical care and to prosthetic and custom orthotic devices and technology from not less than two distinct prosthetic and custom orthotic device providers in the health benefit plan's provider network, or, if medically necessary covered prosthetic and custom orthotic devices are not available from an in-network provider, then provide a process by which the covered person is referred to an out-of-network provider and fully reimburse the out-of-network provider at a mutually agreed upon rate less any cost-sharing requirement as determined on an in-network basis. Requires a health insurer to provide reimbursement for the replacement of a covered prosthetic or custom orthotic device or for any part of such devices, without regard to continuous use or useful lifetime restrictions, if an ordering healthcare provider determines that the provision of a replacement device, or a replacement part of such device, is necessary. Establishes that a violation of the legislation is subject to sanctions by the Commissioner of the Department of Commerce and Insurance (DCI). Requires, by January 15, 2026 and each January 15 thereafter, health insurers that provide coverage of prosthetic or custom orthotic devices to report to DCI data regarding coverage of prosthetic and custom orthotic devices under the legislation for the previous calendar year. Requires DCI to submit a report of aggregated and de-identified data to the Chairs of certain legislative committees and the Legislative Librarian by January 31, 2026, and by each January 31 thereafter.
Description: Lowers from every three years to every two years, the time within which the advisory committee composed of medical device industry representatives and a representative of the department of economic and community development must review rules regarding the board of pharmacy's oversight of facilities that manufacture, warehouse, and distribute medical devices in order to review the advancements of new medical device technologies. Broadly captioned.
AI Summary: The renewal period for medical device licenses is reduced from three years to two years under Tennessee Code Annotated Section 63-10-314(b). This change applies to medical device regulation within the state of Tennessee. The amendment takes effect immediately upon becoming law.
Fiscal Impact: (Dated February 1, 2025) NOT SIGNIFICANT

9. **- Increases the maximum number of nonrelated residents allowed in tier 1 and tier 2 homes for the aged.** State Website
HB 1899
(SB 2083)
W. Slater
Sponsors: William Slater, Bo Watson
Description: As introduced, increases from three to five the maximum number of nonrelated persons in a home for the aged to be considered a tier 1 home for the aged. Increases from four to six the maximum number of nonrelated persons in a home for the aged to be considered a tier 2 home for the aged.
AI Summary: Definitions for "home for the aged" are revised in Tennessee Code Annotated, categorizing such homes into tier 1 for those housing five or fewer nonrelated persons and tier 2 for those housing six or more nonrelated persons. The classification impacts regulatory treatment of domiciliary care facilities providing room, board, and personal services to aged individuals. The changes take effect immediately upon enactment.
Fiscal Impact: (Dated February 13, 2026) STATE GOVERNMENT REVENUE Health Facilities Commission Department of Disability and Aging FY26 -27 & Subsequent Years ($1,200) $800

Wed 3/11/2026 9:30 AM CST - House Hearing Room I, House Insurance Subcommittee

1. **- Fee schedules for health insurance carriers.** State Website
HB 2503
(SB 2557)
C. Sexton
Sponsors: Cameron Sexton, Shane Reeves
Description: As introduced, decreases, from 10 to nine business days, the time that a health insurance carrier has after receipt of a written request from a healthcare provider to deliver to the provider at the provider's dedicated email address that provider's fee schedule, free of charge, in either a partial or full version as requested by the provider, in a transferable industry standard spreadsheet, including Microsoft Excel or other comparable format. Broadly captioned.
AI Summary: The deadline for health insurance claim payment determinations is reduced from ten to nine business days under Tennessee Code Annotated Section 56-7-1013(f)(1). This amendment applies statewide and takes effect immediately upon becoming law.
Fiscal Impact: (Dated February 03, 2026) NOT SIGNIFICANT

2. **- Study of neighboring states' innovations in health insurance coverage for substance use disorder and report to the General Assembly.** State Website
HB 1756
(SB 1803)
Sponsors: Iris Rudder, Ed Jackson

I. Rudder

Cosponsors: Esther Helton-Haynes

Amendment Summary: Senate Commerce and Labor Committee amendment 1 (013835) requires the Commissioner of the Department of Commerce and Insurance to conduct a study of neighboring states' recent innovations in addressing substance use disorder through new health insurance coverage and reimbursement methods, strategies, or models, including coverage and reimbursement for recovery housing. Requires the Commissioner to compile the findings and legislative recommendations developed from the study into a report, which must be transmitted to the Chief Clerks of the Senate and House of Representatives and to the Legislative Librarian by December 31, 2026.

Description: As introduced, directs the commissioner to use existing resources to study recent innovations by neighboring states to address substance use disorder through new health insurance coverage and reimbursement methods, strategies, or models. Requires the commissioner to compile the findings and any recommendations from the study into a report for transmission to the general assembly no later than December 31, 2026. Broadly captioned.

AI Summary: A study is mandated for the Tennessee commissioner of commerce and insurance to examine neighboring states' recent innovations in addressing substance use disorder through health insurance coverage and reimbursement methods, including coverage for recovery housing. Findings and legislative recommendations must be compiled into a report and submitted by December 31, 2026. The act takes effect immediately upon becoming law.

Fiscal Impact: (Dated January 23, 2026) NOT SIGNIFICANT

3.
HB 2162
(SB 2554)
I. Rudder

- TennCare actuarial study and related comments to be submitted electronically to legislative committees. State Website

Sponsors: Iris Rudder, Shane Reeves

Description: As introduced, authorizes the comptroller of the treasury to submit the annual actuarial study of the TennCare program and participating managed care organizations, along with any related oral and written comments, to the designated legislative committees and offices in an electronic format. Broadly captioned.

AI Summary: Electronic submission of the final study and accompanying oral and written comments to legislative committees is authorized by amending Tennessee Code Annotated, Section 71-5-188(a). HB 2162 (Tennessee) modifies reporting procedures related to insurance studies to allow electronic formats. The act takes effect immediately upon becoming law.

Fiscal Impact: (Dated February 02, 2026) NOT SIGNIFICANT

5.
HB 1956
(SB 2081)
R. Alexander

- Step therapy for cancer treatments. State Website

Sponsors: Rebecca Alexander, Bo Watson

Description: As introduced, expands the prohibition, from stage 4 advanced metastatic cancer or metastatic blood cancer to any cancer, against a health benefit plan that provides coverage for cancer requiring the use of a step therapy protocol before the health benefit plan provides coverage for an approved prescription drug to an enrollee who has received a diagnosis of cancer. Broadly captioned.

AI Summary: Step therapy protocols are prohibited for health benefit plans covering cancer treatment, requiring coverage of approved prescription drugs without prior step therapy for any cancer diagnosis. Definitions related to cancer in the step therapy context are broadened by removing references to specific advanced or metastatic cancer stages. Rulemaking authority is granted to the commissioners of commerce and insurance and health to implement these provisions, effective January 1, 2027, for applicable policies.

Fiscal Impact: (Dated January 28, 2026) NOT SIGNIFICANT

8.
HB 1866
(SB 2010)
J. Jones

- Regulate Artificial Intelligence (AI) In Health Care Act. State Website

Sponsors: Justin Jones, Sara Kyle

Description: As introduced, creates the "Regulate Artificial Intelligence (AI) In Health Care Act." Specifies that a health insurance issuer that uses an artificial intelligence, algorithm, or other software tool for the purpose of utilization review or utilization management functions, based in whole or in part on medical necessity, or that contracts with or otherwise works through an entity that uses an artificial intelligence, algorithm, or other software tool for the purpose of utilization review or utilization management functions, based in whole or in part on medical necessity, shall not deny, delay, or modify healthcare services based, in whole or in part, on medical necessity unless the request for prior authorization for such healthcare services is reviewed by a licensed healthcare professional or healthcare provider. Specifies that a violation is an unfair claims practice. Authorizes the department of commerce and insurance to promulgate rules to effectuate this section.

AI Summary: Requirements are imposed on health insurance issuers in Tennessee under SB 2010/HB 1866 to ensure that any denial, delay, or modification of healthcare services based on medical necessity involving artificial intelligence or algorithmic tools for utilization review must be reviewed by a licensed healthcare professional. Definitions for artificial intelligence and health insurance issuers are established, and violations are classified as unfair claims practices subject to penalties and private causes of action with damages and attorney fees. The Department of Commerce and Insurance is authorized to promulgate rules to implement these provisions, effective

July 1, 2026.
Fiscal Impact: (Dated February 04, 2026) NOT SIGNIFICANT

Wed 3/11/2026 10:00 AM CST - Senate Hearing Room I, Senate Energy, Agriculture and Natural Resources Committee

22. **- Prohibits adding fluoride to public drinking water and bottled water sales, and regulates naturally occurring fluoride levels.** State Website
SB 2304 (HB 2471)
M. Pody
Sponsors: Mark Pody, Susan Lynn
Description: As introduced, enacts the "Tennessee Fluoride-Free Water Act" to prohibit public water systems from adding fluoride to drinking water, prohibit sales of bottled water containing added fluoride, and requires certain actions for naturally occurring fluoride that exceeds certain levels in drinking water and bottled water.
AI Summary: HB 2471/SB 2304 (Tennessee) prohibits the addition of fluoride or fluoride-containing compounds to public drinking water systems and bottled water sold within the state, requiring clear labeling of naturally occurring fluoride levels and warnings if concentrations exceed 0.7 mg/L. Public water systems must monitor and reduce naturally occurring fluoride levels exceeding EPA maximum contaminant level goals and notify customers accordingly. Civil penalties are increased for violations related to fluoride addition, and enforcement provisions empower the Department of Agriculture to regulate bottled water sales and impose fines for noncompliance.
Fiscal Impact: (Dated February 28, 2026) STATE GOVERNMENT EXPENDITURES General Fund FY26 -27 & Subsequent Years $136, 800 Total Positions Required: 1 OTHER FISCAL IMPACT Any decrease in local government expenditures cannot be quantified with reasonable certainty.

Wed 3/11/2026 11:00 AM CST - House Hearing Room III, House Health Subcommittee

3. **- Expands terms indicating medical practice.** State Website
HB 1770 (SB 1753)
B. Martin
Sponsors: Brock Martin, Ferrell Haile
Amendment Summary: Senate amendment 1 (012603) adds "clinical informatics", "lifestyle medicine", and "medical virtualist" to the list of words and abbreviations that, when added to a name, indicate or induce others to believe that the person is engaged in the practice of medicine or osteopathic medicine. Expands what is referred to as the practice of medicine or osteopathic medicine to involve someone who determines, or causes to be determined, whether a treatment or procedure is appropriate for the symptoms and diagnosis of a condition.
Description: As introduced, adds clinical informatics, lifestyle medicine, and medical virtualist to the list of words or abbreviations that a person may attach to a name to indicate or induce another person to believe that the person is engaged in the practice of medicine or osteopathic medicine.
AI Summary: New medical specialties including clinical informatics, lifestyle medicine, and medical virtualist are added to Tennessee's definitions of medical practice under SB 1753/HB 1770. The scope of medical and osteopathic practice is expanded to explicitly include determining or causing to be determined the appropriateness of treatments or procedures for patients' symptoms and diagnoses, without creating a private right of action. These provisions take effect immediately and apply to actions occurring on or after the effective date.
Fiscal Impact: (Dated January 21, 2026) NOT SIGNIFICANT

7. **- Requires public posting of pain management clinic inspection criteria on Department of Health website.** State Website
HB 2572 (SB 2279)
S. Kumar
Sponsors: Sabi Kumar, Richard Briggs
Description: As introduced, requires the department of health to make available to the public on its website all inspection criteria required for compliance by pain management clinics. Makes other changes relative to pain management. Broadly captioned.
AI Summary: High-risk prescribers are identified annually based on clinical outcomes, including patient overdoses, and are subject to chart reviews, with pain management specialists exempted from this designation. Temporary medical director coverage by pain management specialists is authorized without in-person presence and does not count toward clinic limits, while inspection criteria for pain management clinics must be publicly available online. Advisory private letter rulings may be issued to licensees on regulatory matters, and certain reporting and notification requirements are modified, including extending reporting intervals from weekly to quarterly.
Fiscal Impact: (Dated February 26, 2026) NOT SIGNIFICANT

13. **- Protects good faith disclosures by healthcare providers from waiving quality improvement committee confidentiality.** State Website
HB 2259 (SB 2413)
E. Helton-Haynes
Sponsors: Esther Helton-Haynes, Bo Watson
Description: As introduced, specifies that a good faith disclosure of information related to an activity of a quality improvement committee (QIC) made by a healthcare provider or healthcare organization to a patient or a family member of a patient is not a waiver of the privilege and confidentiality

protections provider under current law and makes other related changes.
AI Summary: Confidentiality and privilege protections are expanded for quality improvement committees (QICs) in Tennessee, including definitions of adverse healthcare incidents and open discussions. Healthcare providers and organizations are authorized to engage in voluntary, good faith communications with patients or families after adverse incidents without waiving privilege or incurring liability. Procedures for open discussions are established, including participant rights, confidentiality waivers, and limitations on discovery and use of communications in legal proceedings under HB 2259.

19.
HB 1887
(SB 1936)
R. Stevens

- Creates a licensure process for prescribed pediatric extended care programs. State Website
Sponsors: Robert Stevens, Shane Reeves
Description: As introduced, creates a licensure process for prescribed pediatric extended care programs. Requires TennCare to submit a waiver to the federal centers for Medicare and Medicaid services seeking approval to provide coverage and benefits for those who receive services from a prescribed pediatric extended care program.
AI Summary: Licensure requirements and operational standards are established for prescribed pediatric extended care centers serving medically or technologically dependent minors in Tennessee under SB 1936/HB 1887. The legislation mandates background checks, inspection protocols, and administrative penalties for noncompliance, while limiting care to nonresidential services of up to twelve hours per day and capping patient capacity at sixty. TennCare coverage for services at these centers is authorized, contingent on federal approval, with rulemaking authority granted to the relevant department.
Fiscal Impact: (Dated February 26, 2026) STATE GOVERNMENT REVENUE General Fund FY27 -28 & Subsequent Years $4,500 EXPENDITURES General Fund FY26 -27 $34,200 FY27 -28 $7,013,500 FY28 -29 $13,9 58,600 FY29 -30 & Subsequent Years $20,9 03,700 Total Positions Required: 1 FEDERAL GOVERNMENT EXPENDITURES FY27 -28 $12,494,90 0 FY28 -29 $24,989,80 0 FY29 -30 & Subsequent Years $37,484,7 00

21.
HB 1688
(SB 2307)
S. Lynn

- The Frank J. Lake III Act. State Website
Sponsors: Susan Lynn, Mark Pody
Description: As introduced, enacts "The Frank J. Lake III Act." Requires a long-term care ombudsman for an assisted-care living facility to notify all residents of such facility if the facility contacts the ombudsman. Directs the health facilities commission to post a certain specified notice on the commission's website if an assisted-care living facility is placed on probation. Requires an assisted-care living facility, prior to the admission of a resident or prior to the execution of a contract for the care of a resident in such facility, to provide in writing to the resident or the resident's guardian, conservator, or representative the website link that lists the current licensure status of the assisted-care living facility and any history of disciplinary actions for such facility. Broadly captioned.
AI Summary: Requirements are imposed on assisted-care living facilities in Tennessee to disclose licensure status and disciplinary history to residents or their representatives prior to admission or contract execution. Notices indicating possible disciplinary action and pending resolution must be posted on the Health Facilities Commission website when facilities are under investigation or probation. Long-term care ombudsmen are mandated to notify residents or their representatives if contacted by an assisted-care living facility.
Fiscal Impact: (Dated January 19, 2026) NOT SIGNIFICANT

22.
HB 1160
(SB 1064)
S. Lynn

- List of psychotropic medications and side effects of each medication. State Website
Sponsors: Susan Lynn, Paul Bailey
Cosponsors: Tim Hicks, Rusty Crowe, Joey Hensley
Description: Requires the department of health on or before January 1, 2026, to submit a report with a list of each drug that is psychotropic medication pursuant to current law and the side effects of each medication to the chair of the health and welfare committee of the senate and the chair of the committee of the house of representatives having jurisdiction over health-related matters. Broadly captioned.
AI Summary: A report listing each psychotropic medication defined in § 49-2-124 and their side effects is required to be submitted by the Tennessee Department of Health to legislative health committee chairs by January 1, 2026. The report aims to provide detailed information on psychotropic drugs used within the state. This requirement is established by Senate Bill 1064 and House Bill 1160 in Tennessee.
Fiscal Impact: (Dated February 8, 2025) NOT SIGNFICANT

23.
HB 658
(SB 502)
T. Hicks

- Expands the scope of practice for athletic trainers. State Website
Sponsors: Tim Hicks, Ferrell Haile
Cosponsors: Mark White, Esther Helton-Haynes, Clark Boyd, Andrew Farmer, Michael Hale, Paul Bailey
Description: Expands the scope of practice for athletic trainers by authorizing them to treat conditions that limit or prevent a person's participation in certain physical activities rather than just treating injuries that limit or prevent such participation. Clarifies the description of athletic trainers to

include healthcare providers and establishes new procedures that may be utilized by athletic trainers in the delivery of health care.
AI Summary: Licensure requirements and definitions for athletic trainers are updated in Tennessee under SB 502/HB 658, including expanded definitions of athletic injury and healthcare procedures authorized for athletic trainers. Certification by the Board of Certification (BOC) and approval by the state board are required for licensure, with provisions for out-of-state applicants from states without current licensure or certification acts. Supervision standards for athletic training students are clarified, and the scope of practice is defined to include manual techniques and various therapeutic modalities.
Fiscal Impact: (Dated March 4, 2025) NOT SIGNIFICANT

24.
HB 853
(SB 259)
M. Reneau

- Review of a child's health and medical records by parent or legal guardian. State Website
Sponsors: Michele Reneau, Mark Pody
Description: Clarifies that a child's parent, legal guardian, or legal custodian may access and review all health and medical records of the child, including those records related to treatments available to unemancipated minors without parental consent. Allows an employee of a local education agency to provide bandages, gauze, or ice packs for the treatment of minor cuts, scrapes, bumps, and bruises. Broadly captioned.
AI Summary: Parental access to medical, mental health, rehabilitation, and prescription records of unemancipated minors is expanded, with exceptions when access is deemed likely to endanger the minor's life or safety, particularly in cases involving abuse reporting. Informed consent from a parent or guardian is required before providing vaccinations or medical treatment to minors, except in emergencies. Definitions of medical treatment and procedures are clarified, and provisions for minor injury care by educational staff are specified.
Fiscal Impact: (Dated January 24, 2025) NOT SIGNIFICANT

30.
HB 2166
(SB 1947)
J. Barrett

- Blood bank to comply with physician's order for autologous blood donation. State Website
Sponsors: Jody Barrett, Janice Bowling
Description: As introduced, requires a blood bank to comply with a physician's order for an autologous blood donation or directed blood donation for a specific patient. Requires a hospital to allow a patient who is scheduled for a medical procedure to provide an autologous blood donation or directed blood donation upon order of a physician.
AI Summary: Requirements are imposed on blood banks and hospitals in Tennessee to comply with physician orders for autologous and directed blood donations, ensuring all donations meet federal and state safety, testing, and compatibility standards. Reasonable administrative fees may be charged for facilitating these donations, and hospitals may refuse donations only when medically contraindicated or unsafe. These provisions take effect July 1, 2026, under SB 1947/HB 2166.
Fiscal Impact: (Dated January 22, 2026) NOT SIGNIFICANT

33.
HB 2415
(SB 2406)
R. Stevens

- Allows healthcare quality improvement committees to assess security measures for patient and staff safety. State Website
Sponsors: Robert Stevens, Dawn White
Description: As introduced, permits a healthcare organization's quality improvement committee to evaluate the security measures in place at a healthcare organization to ensure the safety of patients and staff. Broadly captioned.
AI Summary: An evaluation of security measures to ensure the safety of patients and staff is required to be included in healthcare facility assessments under Tennessee Code Annotated Section 68-11-272(b)(4). This amendment is enacted through HB 2415 in Tennessee and takes effect immediately upon becoming law.
Fiscal Impact: (Dated February 08, 2026) NOT SIGNIFICANT

38.
HB 2246
(SB 2586)
C. Hurt

- Regulates the retrieval, manufacture, storage, and use of stem cells for therapy. State Website
Sponsors: Chris Hurt, Ed Jackson
Description: As introduced, establishes requirements for the retrieval, manufacture, storage, and use of stem cells used for stem cell therapy. Broadly captioned.
AI Summary: HB 2246 (Tennessee) imposes regulations on physicians performing stem cell therapies not approved by the FDA, limiting use to orthopedics, wound care, or pain management within their scope of practice. Requirements include sourcing stem cells from FDA-registered and accredited facilities, providing patient consent with detailed risk disclosures, and including specific advertising notices. Violations may result in disciplinary action or felony charges for unauthorized use of fetal or embryonic cells or illegal distribution of related products.
Fiscal Impact: (Dated February 08, 2026) NOT SIGNIFICANT

40.
HB 1972
(SB 1603)
A. Farmer

- TACIR study on state and local readiness to support a medical marijuana program. State Website
Sponsors: Andrew Farmer, Ferrell Haile
Description: As introduced, requires TACIR to conduct a study on the creation of a medical cannabis

program in this state. Specifies that the study must include the process for implementing a medical cannabis program and the operational readiness of state and local governmental entities to support a medical marijuana program. Requires TACIR to report its findings to members of the general assembly by November 1, 2026. Broadly captioned.
AI Summary: A study is mandated for the creation of a medical cannabis program in Tennessee, focusing on implementation processes and the operational readiness of state and local government entities. The Tennessee Advisory Commission on Intergovernmental Relations (TACIR) is tasked with conducting the study and reporting findings to the General Assembly by November 1, 2026. State departments and agencies are required to assist TACIR upon request to support the study.
Fiscal Impact: (Dated January 21, 2026) NOT SIGNIFICANT

42.
HB 2110
(SB 2431)
C. Boyd

- Exempts non-diagnostic MRI and PET services from health facility licensing requirements. State Website
Sponsors: Clark Boyd, Rusty Crowe
Description: As introduced, designates as not requiring a license from the health facilities commission as a regulated healthcare facility or service any magnetic resonance imaging or positron emission tomography that is not used for diagnostic purposes. Broadly captioned.
AI Summary: Licensing requirements are modified to exempt magnetic resonance imaging and positron emission tomography equipment not used for diagnostic purposes from health facility regulation under Tennessee Code Annotated Title 68. Subdivisions related to these imaging technologies are amended to reflect this exemption. The changes take effect on July 1, 2026.
Fiscal Impact: (Dated February 24, 2026) NOT SIGNIFICANT

45.
HB 2093
(SB 1797)
R. Williams

- Restrictions on managed care organizations regarding termination of qualified nursing facility contracts under TennCare. State Website
Sponsors: Ryan Williams, Shane Reeves
Description: As introduced, prohibits a managed care organization from suspending, denying, refusing to review, terminating, or otherwise taking action resulting in the actual or constructive termination of a qualified nursing facility contract except under certain listed circumstances. Specifies that the bureau of TennCare has the exclusive authority to determine whether a qualified nursing facility may be terminated from participating in the TennCare program and makes other related changes.
AI Summary: Contracting and termination authority over qualified nursing facilities in Tennessee's TennCare managed long-term care system are centralized under the TennCare bureau, prohibiting managed care organizations (MCOs) from independently terminating or imposing additional participation requirements beyond those set by the bureau. MCOs must contract with any qualified nursing facility willing to provide Medicaid services under equal terms, continue contracts during bureau investigations, and may only terminate contracts for cause as defined by bureau actions. Contract provisions allowing termination without cause by MCOs are void, and all MCO contract templates require bureau approval to ensure compliance.
Fiscal Impact: (Dated February 27, 2026) STATE GOVERNMENT EXPENDITURES General Fund FY26 -27 & Subsequent Years $205,100 Total Positions Required: 6 FEDERAL GOVERNMENT EXPENDITURES FY26 -27 & Subsequent Years $357,50 0

46.
HB 2539
(SB 2227)
W. Lamberth

- Report on remote use of the WIC program by the Department of Health. State Website
Sponsors: William Lamberth, Jack Johnson
Cosponsors: Mark Cochran, Sabi Kumar
Description: As introduced, removes provisions relative to a report that was due by December 15, 2022, from the department of health concerning remote use of the special supplemental food program for women, infants, and children. Broadly captioned.
AI Summary: Subsection (b) of Tennessee Code Annotated, Section 68-1-144, is deleted, removing specific provisions related to health regulations. The amendment affects multiple titles within Tennessee law, including health and public welfare statutes. The change takes effect immediately upon becoming law.
Fiscal Impact: (Dated February 02, 2026) NOT SIGNIFICANT

50.
HB 2557
(SB 2242)
W. Lamberth

- Changes the annual reporting date for TennCare's pharmacist-provided medication therapy management pilot program. State Website
Sponsors: William Lamberth, Jack Johnson
Cosponsors: Mark Cochran
Description: As introduced, changes from April 15 to October 15, the date in which the bureau of TennCare is directed to annually report to the senate health and welfare committee and the health committee of the house of representatives regarding program costs and patient outcomes related to incorporating the pharmacist-provided medication therapy management pilot program each year the pilot program is supported. Broadly captioned.
AI Summary: The deadline for a specific requirement under Tennessee Code Annotated Section 63-10-222 is extended from April 15 to October 15. This change affects regulations related to pharmacies as outlined in Titles 33, 53, 63, 68, and 71 of Tennessee law. The amendment takes

effect immediately upon becoming law.
Fiscal Impact: (Dated February 02, 2026) NOT SIGNIFICANT

54. **HB 2136 (SB 2556)** B. Terry

- Directs the department of health to submit a report of each medication approved by the FDA for the purpose of women's health. State Website
Sponsors: Bryan Terry, Shane Reeves
Description: As introduced, directs the department of health to submit a report of each medication approved by the FDA for the purpose of women's health to the speaker of the senate and the speaker of the house of representatives on or before January 1, 2027.
AI Summary: A report detailing each FDA-approved medication for women's health, including a synopsis of each, is required to be submitted by the Tennessee Department of Health to the speakers of the senate and house by January 1, 2027. The act amends Tennessee Code Annotated Titles 39, 53, 63, and 68 to include this reporting requirement. The act takes effect immediately upon becoming law.
Fiscal Impact: (Dated February 03, 2026) NOT SIGNIFICANT

55. **HB 2315 (SB 2570)** P. Sherrell

- Allows certain psychologists to prescribe medication under specific conditions. State Website
Sponsors: Paul Sherrell, Ferrell Haile
Cosponsors: Brock Martin
Description: As introduced, creates prescribing authority for certain psychologists if certain conditions and prerequisites are met. Broadly captioned.
AI Summary: Prescriptive authority is granted to licensed doctoral-level psychologists who complete specified education, training, and certification requirements, allowing them to prescribe psychotropic medications under defined conditions. Restrictions are imposed prohibiting prescribing narcotics, opiates, or treatment without concurrent care by a physician, and requirements for record-keeping, renewal, and oversight are established. Relevant Tennessee statutes are amended to recognize prescribing psychologists in controlled substance regulations, pharmacy notifications, and healthcare practice scopes effective July 1, 2026.

Wed 3/11/2026 12:30 PM CST - House Hearing Room II, House Banking and Consumer Affairs Subcommittee

21. **HB 668 (SB 739)** R. Jones

- Extension of cancellation and return policy period. State Website
Sponsors: Renea Jones, Bobby Harshbarger
Cosponsors: Elaine Davis, Michele Reneau, Bud Hulsey, Iris Rudder, Jeremy Faison, William Lamberth, Tim Rudd, Rick Eldridge, Greg Vital, Sabi Kumar, Adam Lowe, Janice Bowling
Description: Extends the cancellation period for individuals who purchase, subscribe to, or receive products, services, or memberships in any organization from 30 days to 45 days, provided that services have not been rendered, products are unused and in their original condition, or memberships have not been utilized. Broadly captioned.
AI Summary: The deadline for consumer protection claims under Tennessee Code Annotated Section 47-18-123(a) is extended from thirty to forty-five days. HB 668 (Tennessee) modifies the time frame for filing such claims to enhance consumer rights. The act takes effect immediately upon becoming law.
Fiscal Impact: (Dated February 3, 2025) NOT SIGNIFICANT

27. **HB 1859 (SB 1598)** S. Brooks

- "Freedom from Medical Debt Act." State Website
Sponsors: Shaundelle Brooks, London Lamar
Description: As introduced, enacts the "Freedom from Medical Debt Act," which requires the state treasurer to contract with a nonprofit entity to acquire and repay certain medical debts for Tennessee residents with incomes at or below 400 percent of the federal poverty level or who owe medical debt equal to 5 percent or more of their household income, and prohibits healthcare providers from reporting a patient's medical debt to a consumer reporting agency. Broadly captioned.
AI Summary: Medical debt repayment is facilitated through contracts between the Tennessee state treasurer and nonprofit entities that purchase eligible medical debts at fair market value and ensure removal of adverse credit information upon repayment. Reporting of medical debt to consumer reporting agencies is prohibited starting July 1, 2026, and violations are subject to enforcement under the Tennessee Consumer Protection Act. Interest earnings of $1 million are allocated in fiscal year 2026-2027 to support nonprofit medical debt repayment programs for Tennessee residents meeting specified income and debt criteria.
Fiscal Impact: (Dated February 26, 2026) STATE GOVERNMENT REVENUE Freedom from Medical Debt Fund FY26-27 $1,000,000 EXPENDITURES General Fund Freedom from Medical Debt Fund FY26-27 $1,000,000 $1,000,000 FY27-28 & Subsequent Years $189,400 - Total Positions Required: 1 OTHER FISCAL IMPACT Any appropriation that may be allocated from the General Fund in FY27 -28 and subsequent years to contract with a nonprofit entity cannot be predicted with certainty . SB 1598 - HB 1859 2

Wed 3/11/2026 12:30 PM CST - House Hearing Room III, House Civil Justice Subcommittee

1. **- Civil cause of action against healthcare professionals for injuries caused by medical procedures performed under coercion.** State Website

HB 1872 (SB 2031)

J. Zachary

Sponsors: Jason Zachary, Adam Lowe

Cosponsors: Ed Jackson, Bobby Harshbarger, Jessie Seal, Ken Yager, Paul Bailey, Rusty Crowe, Joey Hensley, Bo Watson, Shane Reeves, Brent Taylor, Page Walley, Richard Briggs, John Stevens, Jack Johnson, Ferrell Haile, Todd Gardenhire, Dawn White, Paul Rose, Tom Hatcher, Becky Massey

Description: As introduced, creates a civil cause of action against a healthcare professional by a person who suffered an injury that resulted from certain medical procedures if the reason the person, or the person's parent, guardian, or legal representative, consented to the medical procedure was due in whole or in part to coercion by the healthcare professional.

AI Summary: A private cause of action is created allowing individuals to sue healthcare professionals for damages if medical procedures, including surgeries or administration of puberty blockers or hormones, were performed to alter a person's sex identity or treat gender dysphoria, and consent was obtained through coercion. The action applies to procedures performed before or after the effective date, with a statute of limitations extending up to eighteen years from the procedure or discovery of injury. Definitions for healthcare professionals, medical procedures, minors, persons, and sex are established, and severability is provided.

Fiscal Impact: (Dated January 23, 2026) NOT SIGNIFICANT

Wed 3/11/2026 12:30 PM CST - House Hearing Room I, House State & Local Government Committee

10. **- Requires reporting on undocumented individuals and the state's annual costs for public services provided to them.** State Website

HB 1711 (SB 2108)

E. Davis

Sponsors: Elaine Davis, Dawn White

Cosponsors: Cameron Sexton, Jeremy Faison, Jason Zachary, William Lamberth, Pat Marsh, Johnny Garrett, Mark Cochran, Gino Bulso, Justin Lafferty, Rusty Grills, Mark White, Dan Howell, Gary Hicks, Chris Todd, Kevin Vaughan, Andrew Farmer, Debra Moody, Dennis Powers, Michael Hale, Lee Reeves, Sabi Kumar, Rick Scarbrough, Kip Capley, Tim Rudd, Lowell Russell, Mary Littleton, David Hawk, Scott Cepicky, Michele Carringer, Clay Doggett, Tom Leatherwood, Monty Fritts, Dave Wright, Todd Warner, Tom Stinnett, Tandy Darby, Jake McCalmon, Greg Martin, Jerome Moon, Rebecca Alexander, Clark Boyd, Aron Maberry, Paul Sherrell, Renea Jones, William Slater, Tim Hicks, Michael Lankford, John Crawford, Rick Eldridge, Ron Gant, Timothy Hill, Brock Martin, Iris Rudder, Rush Bricken, Ed Butler, Esther Helton-Haynes, Fred Atchley, Kelly Keisling, Kevin Raper, Robert Stevens

Description: As introduced, requires reporting by law enforcement agencies and local governmental entities and officials regarding persons not lawfully present in the United States. Requires the department of finance and administration to report the annual cost incurred by this state for public schools, including public higher education institutions, prisons, hospitals, and social services agencies to provide benefits and services to persons not lawfully present in the United States.

AI Summary: Requirements are imposed on Tennessee law enforcement agencies and local governmental entities to submit quarterly reports to a centralized immigration enforcement division regarding illegal activities, ordinance violations, and public benefits usage by individuals not lawfully present in the United States. Annual cost reports on state expenditures for public services provided to such individuals must be submitted to the governor and legislative leaders beginning in 2026. Failure of employees or officials to report as required is classified as a Class A misdemeanor.

Fiscal Impact: (Dated February 12, 2026) STATE GOVERNMENT EXPENDITURES General Fund FY26 -27 $131,100 FY27 -28 & Subsequent Years $127,900 Total Positions Required: 1

11. **- Requires local governments to verify citizenship or lawful presence for public benefits and authorizes investigations of violations.** State Website

HB 1710 (SB 1915)

D. Powers

Sponsors: Dennis Powers, Ed Jackson

Cosponsors: Cameron Sexton, Jeremy Faison, Jason Zachary, William Lamberth, Pat Marsh, Johnny Garrett, Mark Cochran, Gino Bulso, Justin Lafferty, Mark White, Dan Howell, Chris Todd, Gary Hicks, Kevin Vaughan, Andrew Farmer, Debra Moody, Sabi Kumar, Rusty Grills, Tim Rudd, Rick Scarbrough, Elaine Davis, Lowell Russell, Mary Littleton, David Hawk, Scott Cepicky, Michael Hale, Michele Carringer, Lee Reeves, Clay Doggett, Tom Leatherwood, Monty Fritts, Rebecca Alexander, Dave Wright, Todd Warner, Tandy Darby, Jake McCalmon, Brock Martin, Greg Martin, Jerome Moon, Clark Boyd, Aron Maberry, Paul Sherrell, Renea Jones, Timothy Hill, Tim Hicks, John Crawford, William Slater, Michael Lankford, Rick Eldridge, Ron Gant, Rush Bricken, Esther Helton-Haynes, Iris Rudder, Ed Butler, Fred Atchley, Tom Stinnett, Kelly Keisling, Kevin Raper, Robert Stevens

Description: As introduced, adds local governments to the entities that must verify that each applicant for public benefits is a United States citizen or lawfully present in the United States. Authorizes the attorney general and reporter to investigate violations of requirements for verification of citizenship or presence for public benefits; requires certain reporting related to such verification for benefits.

AI Summary: Verification of U.S. citizenship or lawful presence is required for applicants aged 18 or older seeking federal, state, or local public benefits from state and local governmental entities and health departments in Tennessee, effective July 1, 2026. Reporting obligations are imposed on these entities to submit monthly data on applicants found ineligible and to report non-citizen benefit recipients to the centralized immigration enforcement division, with penalties for failure to report. Enforcement provisions authorize the attorney general to investigate violations and withhold state funds from non-compliant local entities.
Fiscal Impact: (Dated February 14, 2026) STATE GOVERNMENT EXPENDITURES General Fund FY26 -27 $131,100 FY27 -28 & Subsequent Years $127,900 Total Positions Required: 1

Wed 3/11/2026 12:30 PM CST - Senate Hearing Room I, Senate Health and Welfare Committee

Department of Children's Services and Department of Health Budget Hearings

12. **SB 1584 (HB 2569)** F. Haile

- Hospitals must offer flu and pneumococcal immunizations to patients aged 50 or older before discharge. State Website

Sponsors: Ferrell Haile, Sabi Kumar

Description: As introduced, lowers the age of an inpatient from 65 to 50 or older when a hospital, each year from October 1 through March 1, must offer immunization against influenza disease prior to discharge. Requires a hospital to offer immunization against pneumococcal disease to an inpatient aged 50 or older prior to discharge. Broadly captioned.

AI Summary: Immunization requirements are imposed on Tennessee hospitals to offer influenza and pneumococcal vaccines to inpatients aged 50 or older prior to discharge, following CDC advisory committee recommendations and subject to vaccine availability. The influenza vaccine must be offered annually between October 1 and March 1. These provisions take effect July 1, 2026.

Fiscal Impact: (Dated January 12, 2026) NOT SIGNIFICANT

14. **SB 502 (HB 658)** F. Haile

- Expands the scope of practice for athletic trainers. State Website

Sponsors: Ferrell Haile, Tim Hicks

Cosponsors: Paul Bailey, Mark White, Esther Helton-Haynes, Clark Boyd, Andrew Farmer, Michael Hale

Description: Expands the scope of practice for athletic trainers by authorizing them to treat conditions that limit or prevent a person's participation in certain physical activities rather than just treating injuries that limit or prevent such participation. Clarifies the description of athletic trainers to include healthcare providers and establishes new procedures that may be utilized by athletic trainers in the delivery of health care.

AI Summary: Licensure requirements and definitions for athletic trainers are revised in Tennessee under Senate Bill 502, including expanded definitions of athletic injuries and healthcare procedures authorized for athletic trainers. Certification by the Board of Certification and approval by the state board are mandated for licensure, with updated provisions for out-of-state applicants and student athletic trainers under supervision. The act authorizes athletic trainers to perform specified manual techniques and healthcare procedures within their competency and requires passing a jurisprudence examination for licensure.

Fiscal Impact: (Dated March 4, 2025) NOT SIGNIFICANT

15. **SB 343 (HB 398)** P. Bailey

- Licensing board response to inquiry regarding prescriber identified as high-risk prescriber. State Website

Sponsors: Paul Bailey, Ryan Williams

Amendment Summary: House Health Subcommittee amendment 1 (014083) requires each paramedic to complete a course of instruction on making an actual determination and pronouncement of death. Prohibits the Emergency Medical Services (EMS) Board from issuing a paramedic license to an applicant from another state if the applicant does not provide proof of the successful completion of a training course on the actual determination and pronouncement of death. Authorizes a licensed paramedic to make an actual determination and pronouncement of death if the paramedic has successfully completed training in the determination and pronouncement of death and the paramedic has attempted to resuscitate the person in accordance with standards established by the EMS Board. Does not permit a paramedic to make the actual determination and pronouncement of death of a patient who is in a hospital when the apparent death occurs. For the purpose of promulgating rules, the legislation takes effect upon becoming a law. For all other purposes, takes effect January 1, 2027.

Description: Increases, from 30 to 45, the number of days a licensing board has to respond to the department of health after the department has inquired about the status of an action or lack of action taken against a prescriber whose prescribing patterns of controlled substances have been identified as representing a statistical outlier, or if the prescriber is identified as a top prescriber or a high-risk prescriber. Broadly captioned.

AI Summary: The deadline for a specified action under Tennessee Code Annotated Section 68-1-128(h)(2) is extended from thirty to forty-five days. This amendment affects health-related provisions

within multiple titles of Tennessee law. The change takes effect immediately upon becoming law.
Fiscal Impact: (Dated January 29, 2025) NOT SIGNIFICANT

18.
SB 1767
(HB 1852)
M. Pody

- "Tennessee mRNA Pharmaceutical Sovereignty and Safety Act." State Website
Sponsors: Mark Pody, Monty Fritts
Description: As introduced, enacts the "Tennessee mRNA Pharmaceutical Sovereignty and Safety Act," which prohibits individuals, including professional providers of health care and veterinary medicine, from administering any vaccine or other injectable solution that contains an mRNA vaccine or vaccine material. Broadly captioned.
AI Summary: Administration of mRNA vaccines or injectable solutions containing mRNA vaccine material to humans or animals is prohibited in Tennessee under HB 1852/SB 1767. Violations are classified as Class A misdemeanors with fines up to $2,500 per offense, and healthcare providers may face license revocation or other disciplinary actions. The act takes effect January 1, 2027.

19.
SB 1039
(HB 1102)
J. Bowling

- Drug or alcohol test or screen for a patient who is pregnant. State Website
Sponsors: Janice Bowling, Chris Hurt
Description: Prohibits a healthcare facility from authorizing a licensed healthcare professional from performing a drug or alcohol test or screen on a patient who is pregnant, less than one year postpartum, or a newborn without written and oral consent. Allows for a drug or alcohol test or screen to be performed without the consent of the patient if, in the healthcare professional's judgment, an emergency exists and the patient or newborn is in immediate need of medical attention, and an attempt to secure consent would result in a delay of treatment that could increase the risk to the patient's or newborn's life or health. Broadly captioned.
AI Summary: Restrictions are imposed on drug and alcohol testing of pregnant or postpartum patients and newborns in Tennessee under HB 1102/SB 1039, requiring prior written and oral informed consent except in medical emergencies. Healthcare facilities are prohibited from authorizing testing without consent unless immediate treatment is necessary, and must provide detailed information about the test, potential legal consequences, and confidentiality. Refusal to submit to testing cannot be grounds for denial of treatment, and patient privacy rights are explicitly extended to this population.
Fiscal Impact: (Dated March 4, 2025) NOT SIGNIFICANT

22.
SB 2279
(HB 2572)
R. Briggs

- Requires public posting of pain management clinic inspection criteria on Department of Health website. State Website
Sponsors: Richard Briggs, Sabi Kumar
Description: As introduced, requires the department of health to make available to the public on its website all inspection criteria required for compliance by pain management clinics. Makes other changes relative to pain management. Broadly captioned.
AI Summary: High-risk prescribers are identified annually based on clinical outcomes, including patient overdoses, and are subject to chart review and investigation, with pain management specialists exempted from this designation. Temporary medical director coverage by pain management specialists is authorized without in-person presence and does not count toward clinic limits, while inspection criteria for pain management clinics must be publicly available online. Advisory private letter rulings may be issued to licensees on request, and the identification of high-risk prescribers is expunged upon completion of required courses.
Fiscal Impact: (Dated February 26, 2026) NOT SIGNIFICANT

25.
SB 2413
(HB 2259)
B. Watson

- Protects good faith disclosures by healthcare providers from waiving quality improvement committee confidentiality. State Website
Sponsors: Bo Watson, Esther Helton-Haynes
Description: As introduced, specifies that a good faith disclosure of information related to an activity of a quality improvement committee (QIC) made by a healthcare provider or healthcare organization to a patient or a family member of a patient is not a waiver of the privilege and confidentiality protections provider under current law and makes other related changes.
AI Summary: Amendments to Tennessee Code Annotated Title 68, Chapter 11, establish definitions for "adverse healthcare incident" and "open discussion" related to quality improvement committees (QICs). Protections are imposed to maintain confidentiality and privilege of QIC proceedings and documentation, while allowing good faith disclosures and voluntary open discussions with patients or families without waiving privilege or admitting liability. Procedures for conducting open discussions, including participant rights, confidentiality waivers, and immunity from liability for good faith communications, are regulated to encourage transparency and resolution following adverse healthcare incidents.

27.
SB 1848
(HB 1984)
B. Massey

- Authorizes new categories of health care providers to administer the opiod buprenorphine. State Website
Sponsors: Becky Massey, Timothy Hill
Cosponsors: Rusty Grills
Description: Authorizes additional healthcare providers to directly administer buprenorphine mono or buprenorphine without the use of naloxone. Adds that prescribing a buprenorphine product to

nursing mother or prescribing an injectable mono product does not restrict certain healthcare providers from prescribing a buprenorphine product for the treatment of opioid use disorder without naloxone.
AI Summary: Use of buprenorphine mono or buprenorphine without naloxone is restricted to direct administration by healthcare providers within their scope of practice for substance use disorder treatment, prohibiting dispensing for off-premises use. Prescribing or dispensing of buprenorphine mono products without naloxone is limited to pregnant or nursing women, patients with documented adverse reactions, or when using injectable mono products. Amendments to Tennessee Code Annotated Title 53, Chapter 11, are enacted under HB 1984/SB 1848 to implement these restrictions.
Fiscal Impact: (Dated January 22, 2026) NOT SIGNIFICANT

29.
SB 2556
(HB 2136)
S. Reeves

- Directs the department of health to submit a report of each medication approved by the FDA for the purpose of women's health. State Website
Sponsors: Shane Reeves, Bryan Terry
Description: As introduced, directs the department of health to submit a report of each medication approved by the FDA for the purpose of women's health to the speaker of the senate and the speaker of the house of representatives on or before January 1, 2027.
AI Summary: A report detailing each FDA-approved medication for women's health, including a synopsis of each, is required to be submitted by the Tennessee Department of Health to the state legislative leaders by January 1, 2027. This requirement is established under HB 2136/SB 2556 (Tennessee). The act takes effect immediately upon becoming law.
Fiscal Impact: (Dated February 03, 2026) NOT SIGNIFICANT

31.
SB 474
(HB 387)
J. Bowling

- Prohibits a healthcare provider from inquiring as to a patient's ownership of firearm ammunition. State Website
Sponsors: Janice Bowling, Ed Butler
Cosponsors: Jake McCalmon, Dennis Powers, Kip Capley, Rusty Grills, Chris Todd, Rush Bricken
Amendment Summary: Senate Health & Welfare Committee amendment 1, House Health Subcommittee amendment 1 (004188) refines definition of “healthcare provider.” Allows a healthcare provider to a lethality risk assessment if healthcare provider reasonably believes that a patient may pose a credible, actual risk to themselves or others. Removes the prohibition that a healthcare provider shall not discriminate against a patient based upon the patient's exercise of the constitutional right to own and possess a firearm, firearm ammunition, or firearm accessories.
Description: Prohibits a healthcare provider from inquiring as to a patient's ownership, possession of, or access to firearm ammunition or firearm accessories. Prohibits a healthcare provider from denying future treatment of a patient based upon a patient's ownership or control of a firearm, firearm ammunition, or firearm accessories. Subjects the healthcare provider to disciplinary action and a fine of $1,000 if the healthcare provider makes such inquires.
AI Summary: Restrictions are imposed on healthcare providers in Tennessee under HB 387/SB 474, prohibiting them from inquiring about or requiring disclosure of patients' firearm, ammunition, or accessory ownership unless relevant to medical care or safety. Exceptions allow qualified mental health professionals and emergency service providers to inquire about immediate firearm possession, and providers may conduct lethality risk assessments if a credible risk is perceived. Violations are deemed unethical conduct subject to disciplinary action and fines, effective July 1, 2025.
Fiscal Impact: (Dated March 4, 2025) NOT SIGNIFICANT

Wed 3/11/2026 2:00 PM CST - House Hearing Room I, House Business and Utilities Subcommittee

6.
HB 1677
(SB 1692)
R. Eldridge

- Military Families Licensing Recognition Act. State Website
Sponsors: Rick Eldridge, Becky Massey
Cosponsors: Antonio Parkinson, Yusuf Hakeem, Lowell Russell, Brock Martin, Michele Reneau, Fred Atchley, Rush Bricken, Clark Boyd, Michael Lankford, Jessie Seal, Kerry Roberts, Richard Briggs
Description: As introduced, enacts the "Military Families Licensing Recognition Act ." Authorizes issuance of occupational licenses to persons from another state or in the military who currently hold such occupational license. Specifies requirements for issuance of license.
AI Summary: Occupational licensing boards are required to issue licenses to active or retired military members and their families based on equivalent licenses or work experience held in other states or the military, provided certain criteria are met. Licenses must be issued within ten business days, and applicants must affirm the validity of their credentials under penalty of perjury, with boards authorized to investigate and revoke licenses for false statements. This act, effective July 1, 2026, applies only within Tennessee and does not affect interstate compacts, private certifications, or occupations regulated by the state supreme court.
Fiscal Impact: (Dated February 21, 2026) STATE GOVERNMENT EXPENDITURES General Fund FY26-27 $32,100 OTHER FISCAL IMPACT The proposed legislation is estimated to increase licensure fee revenue for occupation al licensing board s; however , due to multiple unknown factors ,

such as the number of applicants and the specific board under which the applicant will seek licensure , the increase in revenue to any particular board cannot be determined with reasonable certainty.