ACS State Affairs Legislative Update – May 22, 2026

STATE AFFAIRS WORKGROUP

Arnold Baskies, MD, FACS (NJ); Christina Colosimo, DO, FACS (CA); Ali Kasraeian, MD, FACS (FL); Kevin Koo, MD, FACS (MN); David Santos, MD, FACS (TX); and Kelly Swords, MD, FACS (CA). The Workgroup plays a critical role in identifying state advocacy priorities, setting new policy objectives, and evaluating state advocacy grant applications among other duties.

ACS STATE AFFAIRS PRIORITY ISSUES

- Prior Authorization/Downcoding
- Restrictive Covenants
- Private Equity/Corporate Practice of Medicine
- Scope of Practice
- Cancer
- Rural Surgery
- Professional Liability
- Continuing Medical Education/Maintenance of Certification
- Trauma

For more information regarding ACS State Affairs Policy Priorities in your state, please contact Catherine Hendricks, State Affairs Manager, at chendricks@facs.org. To view a complete list of bills ACS State Affairs is tracking, visit our online State Legislative Tracker.

ACS GRANT PROGRAM

State Chapters are eligible to apply for ACS State Advocacy Grants and may use funds towards their annual state advocacy day, to hire a lobbyist, or other relevant advocacy functions such as travel costs for members, catering, venue rentals, printing, and more. To learn more information regarding the ACS State Advocacy Grants, apply here.

STATUS OF LEGISLATIVE SESSIONS

Legislatures not in session: Montana, Nevada, North Dakota, and Texas have no legislative session in 2026. The following legislatures have adjourned: Alabama (4/9); Arkansas (4/29); Colorado (5/13); Connecticut (2/4); Georgia (4/2); Hawaii (5/8); Idaho (4/2); Indiana (2/27); Iowa (5/3); Kansas (4/11); Kentucky (4/15); Maine (4/29); Maryland (4/13); Mississippi (4/15); Missouri (5/15); Nebraska (4/17) New Mexico (2/19); Oklahoma (5/14); Oregon (3/6); South Dakota (3/30); Tennessee (4/23); Utah (3/6); Washington (3/12); West Virginia (3/14); and Wyoming (3/11). State legislative session information for 2026 can be found here.

IN THE NEWS

Medicare Physician Fee Schedule (MPFS)

The House Energy and Commerce Committee held a hearing this week on the future of the Medicare Physician Fee Schedule (MPFS) and physician payment reform. The American College of Surgeons is actively engaged in efforts to protect patient access to surgical care and prevent further cuts to work RVUs. The ACS argues shifting more Medicare funding toward primary care does not necessarily improve health outcomes and could reduce access to critical specialty and

surgical services, a position outlined in a recent Health Affairs Forefront article authored by ACS surgeon leaders. The ACS is also continuing to advocate against prior authorization requirements, which delays care and interfere with surgeons ability to make patient-centered clinical decisions. Take action now to stop the cuts to work RVUs here.

The physician noncompete battle intensifies

The debate over physician noncompete agreements, which restrict where doctors can work after leaving an employer, continues to expand. Supporters argue these agreements protect health care organizations' significant investments in recruiting and onboarding physicians, while critics say they disrupt doctor-patient relationships, limit patient access to trusted providers, and worsen staffing shortages, especially in rural areas. Physicians opposing noncompetes argue patients should have the freedom to continue seeing their doctors without geographic barriers. The article also highlights the evolving patchwork of state laws, noting four states currently ban noncompetes entirely, while others such as Tennessee and Ohio are revising restrictions. At the same time, recent court decisions in Texas show some noncompete agreements remain enforceable, underscoring the ongoing national conflict over balancing employer protections with physician mobility and patient care access. Read more here.

LEGISLATIVE TRACKING

DELAWARE

HB 429 – Step Therapy

Introduced by Representative Melissa Minor-Brown (D), HB 429 allows health insurers to require patients to try AB-rated generic drugs, but also interchangeable biological products and biosimilars, before covering equivalent branded prescription drugs. The bill was introduced in the Assembly and referred to the Economic Development, Banking, Insurance, and Commerce Committee

SCR 195 – Cancer **ADOPTED**

Introduced by Senator David Wilson (R), SCR 195 designates September 2026 as 'Prostate Cancer Awareness Month' to promote awareness, encourage screenings, and highlight the importance of early detection for prostate cancer. The bill was introduced in the Senate and Adopted May 20.

MICHIGAN

HB 5988 – Step Therapy

Introduced by Representative Mike McFall (D), HB 5988 requires health insurers to base step therapy protocols on high-quality, evidence-based clinical guidelines developed by multidisciplinary expert panels; protocols must also consider atypical patient needs, and insurers must provide access to the criteria upon request; insurers must have an accessible process for health care providers to request exceptions to step therapy protocols; exceptions must be granted within 72 hours or 24 hours in urgent cases if certain conditions are met, such as contraindications, expected ineffectiveness, prior failed attempts, medical necessity, or patient stability on a current medication; if the insurer doesn't respond in time, the exception is automatically granted. The bill was introduced in the House and referred to the Insurance Committee.

NEW JERSEY

S 4254 – Cancer

Introduced by Senator Benjie Wimberly (D), S 4254 requires health insurers and Medicaid to provide no cost sharing colorectal cancer screenings for individuals aged 33 and over, and for those under 33 if medically necessary. The bill was introduced in the Senate and referred to the Commerce Committee.

OHIO

HB 905 – Insurance

Introduced by Representative Anita Somani (D), HB 905 prohibits any person or entity from simultaneously owning, directly or indirectly, both a health insurer or pharmacy benefit manager and a health care provider or management services organization. The bill was introduced in the House and is awaiting referral to a committee.

HB 922 – Cancer

Introduced by Representative Desiree Tims (D), HB 922 requires health insurers and Medicaid to cover colorectal cancer screenings for individuals aged 21 and older, lowering the coverage age from 45; prohibits higher cost-sharing for younger adults. The bill was introduced in the House and is awaiting referral to a committee.