

MINUTES
HOUSE HEALTH & WELFARE COMMITTEE

DATE: Monday, February 11, 2013
TIME: 9:00 A.M.
PLACE: Room EW20
MEMBERS: Chairman Wood(27), Vice Chairman Perry, Representatives Hancey, Henderson, Hixon, Malek, Morse, Romrell, Vander Woude, Rusche, Chew
**ABSENT/
EXCUSED:** None.

GUESTS: Nancy Kerr and Mary Leonard, Idaho Board of Medicine; Norm Rudolph, Idaho Concrete Co.; Chris Hahn and Mitch Scoggins, Department of Health & Welfare (DHW); Susan Miller, Board of Dentistry; Pam Eaton and Mark Johnston, Idaho State Board of Pharmacy; Bill Deal, Department of Insurance; Elizabeth Criner, Veritas Advisors; Woody Richards, Willamette Dental; Jack Myers, Immunization Board.

Chairman Wood(27) called the meeting to order at 9:01 a.m.

H 89: **Nancy Kerr**, Executive Director, Board of Medicine, presented **H 89**, legislation that changes the Idaho Code of Medicine Practice Act compensation reference to an honorarium, which is not considered salary and not subject to retirement withholding. Responding to questions, Ms. Kerr stated that the only physical change is one letter on page 3, line 2, and a Public Employee Retirement System of Idaho (PERSI) qualification would disqualify a board member from participation in any private pension plan.

MOTION: **Rep. Rusche** made a motion to send **H 89** to the floor with a **DO PASS** recommendation.

For the record, no one indicated their desire to testify.

**VOTE ON
MOTION:** **Chairman Wood(27)** called for a vote on the motion to send **H 89** to the floor with a **DO PASS** recommendation. **Motion carried by voice vote. Rep. Malek** will sponsor the bill on the floor.

RS 21852C1: **Rep. Rusche** presented **RS 21852C1**, a resolution regarding Idaho's response to prescription drug abuse. He explained the various types of abuse and the work group that was formed to discuss and make recommendations on the issue. Improvements include database modernization, improved staffing, prescriber drug pattern notification, medication abuse public information media efforts, and improved licensing board awareness and scrutiny. This resolution instructs the Office of Drug Policy to continue in its lead role.

MOTION: **Rep. Malek** made a motion to introduce **RS 21852C1. Motion carried by voice vote.**

RS 21972: **Susan Miller**, Executive Director, Board of Dentistry, presented **RS 21972**, which would allow dentists to practice under the name of a professional limited liability company, as long as all members are duly licensed to render the same professional services. Reference is also provided to limited managed care plans as dental services. Clarification is made regarding disciplinary action against a dentist practicing with any business where ownership interest is held by someone not licensed to practice dentistry in Idaho, other than in a limited managed care plan. Responding to a question, Ms. Miller stated that this proposed legislation replaces **H 31**.

MOTION:

Rep. Rusche made a motion to introduce **RS 21972. Motion carried by voice vote.**

Dr. Christine Hahn, Public Health Medical Director, Idaho Division of Public Health, DHW, gave a presentation to the committee about the Idaho Immunization Assessment Board, established in 2010. She described the limited immunization program prior to 2009. Immunization assessments ensure statewide childhood vaccination access, purchase vaccines at a lower cost, and allow single vaccine maintenance. The ninety-seven assessed carriers are all current with their payments and the Division is working to include TRICARE, which covers military dependants, as a carrier. Assessment fiscal year (FY) 2011 to 2013 rate comparisons indicate an increase in the number of children covered, with a rate per covered child increase that includes new vaccines purchased in the spring, prior to flu season. The human papillomavirus (HPV) vaccine, which is expensive, is not required. The Patient Protection and Affordable Care Act (PPACA) requires health insurers to provide coverage for all routine childhood immunizations, with no preventative health care co-pays or deductibles. Any funds not used are rolled over to the next year's vaccine purchases. There is legislation forthcoming with a two-year extension of the original July 1, 2013, sunset.

Answering questions, **Dr. Hahn** explained that prior to 2009 the DHW estimated the amounts of vaccine purchases, but now they use survey information, which gives them a more accurate count. The assessment is a separate fee paid by health insurers and sent to the Department of Insurance. The vaccine administering physician is left out of the financial process. Federal dollars received by the Department purchases vaccines for uninsured children. For insured children, vaccination costs are billed to their insurers, and payments go into a dedicated fund to purchase vaccines. Providers giving immunizations receive the vaccine at no cost. The dual vaccine distribution scheme was changed to a single vaccine system because the providers had to separate vaccines they purchased from those provided. This meant separate storage systems and additional costs that small or rural practices could not afford, making it difficult for kids to have access to vaccines.

Dr. Hahn stated that the 2010 process and the immunization policy commission have improved overall rates. Rates that remain low reflect outbreaks in schools and other settings. We need to protect children who have immunity issues or have been unable to get immunized. All vaccine purchases are through a CBC contract, which is a better price than if we had to shop around. The assessment rates are expected to level out over the next two years, which is the reason for the sunset extension. The sunset clause was put in place because it was not clear if PPACA would continue and how it would affect vaccine purchases. The HPV vaccine is a recommended, not required, vaccine to prevent cervical and other cancers. It is a controversial vaccine that decreases certain annual exams; however, it will take several years to see the results from the vaccine. Children on Medicaid and those who are uninsured have their vaccine paid for by a federal program. Children who are insured have insurers who pay for their vaccines, with their payments going into the fund used to purchase the vaccines.

Jack Myers, Executive Vice President, Blue Cross of Idaho, Chairman, Immunization Board, answered a question about the cost of the HPV vaccine, which is a three-dose program at a cost of \$111 for one dose.

Dr. Hahn stated that the Advisory Committee for Immunization Practices indicates the development of a vaccine for the meningitis virus for infants. Under PPACA, once recommended, insurers must cover any vaccine. Immunization requirements exist for school entry and child care, but parents can request exemption for medical, religious or other reasons. Additionally, any parent can choose to immunize for all or some of the vaccines. She explained that vaccines do become outdated, although each vaccine has a different outdate. To assure use before the outdate, they monitor the amounts ordered and work with the physicians to maintain a wastage rate of less than 1%.

Rep. Rusche shared with the committee that the health vaccine clinics are held infrequently and the best practice is to vaccinate a child at the practitioner's office.

Mark Johnston, Board of Pharmacy, responded to a previous meeting question regarding **H 17** licensing of pharmacists, stating that they are only able to license individuals residing within the fifty states and the District of Columbia. Anything outside the US borders is federally regulated and requires an importers or exporters registration. With a few exceptions, if a drug is not approved by the Federal Drug Administration (FDA), but is available and the manufacturer has signed a contract with the FDA, they can import that drug into the US. Anyone physically crossing a US border can carry a one-year supply of a non-controlled substance and sixty tablets of a controlled substance on their person; however, online purchase is illegal.

ADJOURN:

There being no further business to come before the committee, the meeting was adjourned at 9:59 a.m.

Representative Wood(27)
Chair

Irene Moore
Secretary