## MINUTES

## HOUSE HEALTH & WELFARE COMMITTEE

**DATE:** Wednesday, March 02, 2016

TIME: 9:00 A.M.

PLACE: Room EW20

**MEMBERS:** Chairman Wood, Vice Chairman Packer, Representatives Hixon, Perry, Romrell,

Vander Woude, Beyeler, Redman, Troy, Rusche, Chew

**ABSENT**/ Representative(s) Perry **EXCUSED**:

GUESTS: Alex Adams, Idaho Board of Pharmacy; Courtney Thompson, Citizen; Shannon

Gaertner Ewing, Idaho Board of Chiropractic Physicians; Mary Jo White, DC, State Board of Chiropractors; Ryan Fitzgerald, Idaho Assoc. of Chiropractic Physicians;

Tana Cory, Bureau of Occupational Licenses.

**Chairman Wood** called the meeting to order at 9:01 a.m.

**MOTION:** Rep. Hixon made a motion to approve the minutes of the February 10, 16, and

22, 2016, meetings. Motion carried by voice vote.

**S 1294:** Pam Eaton, President, CEO, Idaho Retailers Association, State Pharmacy

Association, presented **S 1294**, which lowers the pharmacist provided immunization age limit from 12 to 6 years of age, with parent or guardian consent. Immunizations at a pharmacy provide a convenience and access beyond the availability of a

physician's office, particularly in rural communities.

The educational campaign need for using the Immunization Registry Information System (IRIS), which was revealed in discussions with pharmacists, has begun. IRIS data requirements are addressed in the Board of Pharmacy Rules and registry

information is available to primary health care providers.

All pharmacist graduates are highly trained in immunizations and counseling patients. Additionally, license renewal requires a minimum of one hour of continuing

immunization education every year.

MOTION: Rep. Rusche made a motion to send S 1294 to the floor with a DO PASS

recommendation.

Answering committee questions, **Ms. Eaton** said pharmacists, physicians, or nurses are not liable for any vaccination's adverse effect. A double dose of a vaccine is not harmful. IRIS registration is part of the Vaccines for Children Program

(VFC), which is voluntary.

**Rep. Rusche** explained the VFC uses state funds to purchase children's vaccines in large enough quantities to negotiate the lowest price. Insurers are assessed for the cost and vaccines are distributed to providers. The providers can charge for administrative costs such as syringes and nurses time, but not for the vaccine. The IRIS registry helps tally how much vaccine the state needs to purchase and provide's a child's vaccination record. Practitioner or pharmacists are not required

to use the VFC.

**Courtney Thompson**, representing herself, testified **in opposition** to **S 1294**, stating pharmacists are not following the parental voluntary participation notification requirements. Adverse effects can occur long after the fifteen minute observation period. The vaccines include 20 to 24 pages of information, only two of which are given to parents. The existing risks and practices need more review before putting younger children in their path.

**Alex Adams**, Executive Director, Board of Pharmacy (BOP), testified **in support** of **S 1294**. The BOP Rules include IRIS as required reporting. Liability is harbored by any pharmacist and a complaint can be filed with the BOP to be adjudicated as appropriate. Since 2011, no pharmacist immunization complaint has been received.

Responding to committee questions, **Dr. Adams** said the pharmacy profession has a long history of over regulation, especially for immunization. Recordkeeping requirements specify information collection and maintenance for each administered immunization. Immunizations are administered by any size of pharmacy.

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

Answering committee questions, **Ms. Eaton** said pharmacists must submit their continuing education information as a part of annual license renewal. Many pharmacies exceed the BOP training requirements. Complaints can be lodged with the BOP.

**Dr. Adams** further answered a committee question. He said the continuing education requirement for immunizations and sterile compounding is enforced at the time of license renewal. Pharmacists are audited and any violations are investigated with possible financial and continuing education penalties.

VOTE ON MOTION:

Chairman Wood called for a vote on the motion to send S 1294 to the floor with a DO PASS recommendation. Motion carried by voice vote. Chairman Wood and Rep. Rusche will sponsor the bill on the floor.

S 1231:

**Roger Hales**, on behalf of the Idaho Board of Chiropractic Physicians, presented **S 1231**. This legislation clarifies the existing law prohibiting the use of legend or prescription drugs, as defined by the Federal Drug Administration (FDA). Chiropractic physicians are prohibited from prescribing, dispensing, independently administering, distributing, directing, or suggesting to a patient legend or prescriptive drugs. The term "RX only" is added to traditional labeling of legend or prescriptive drugs. The final update clarifies the applicable products, drugs, and substances.

**Courtney Thompson**, representing herself and Health Freedom Idaho, testified **in opposition** to **S 1231**. Vitamins and supplements are given intravenously for the greatest impact. This legislation seeks to keep chiropractors from using or suggesting the use of IV vitamins or supplements to treat patients with chronic illnesses. An adverse financial impact of **S 1231** will be in lost tax revenue, lost chiropractic office jobs, and increased disability costs for persons no longer receiving the treatments. This legislation impacts freedom of choice for Idaho constituents.

**Shannon Gaertner Ewing**, Chiropractor, Past Chairman, State Board of Chiropractic Physicians, Trustee, University of Western States, testified **in support** of **S 1231**, although she has concerns with the statute language. The communication restrictions mean adverse reaction electronic health care physician alerts cannot be discussed with patients. Removal of the terms "direct" or "suggest" would allow doctors receiving the alerts to direct patients back to pharmacists and medical doctors.

**Ms.** Ewing said a university masters and doctorate program for advanced chiropractic services is being developed. The program will include extensive pharmaceutical hours and address many of the issues surrounding the use of IV nutrients. Students already receive 132 hours of graduate school training in nutrition administration, complications, and safe application.

**Chairman Wood** commented the suggested change references terms not being amended in **S 1231**. He suggested **Dr. Ewing** work with the Board of Chiropractic Physicians to bring forward legislation addressing this issue for the next session.

**Dr. Mary Jo White**, Chairman, Idaho State Board of Chiropractic Physicians, Chiropractor, Chiropractic College Service, Functional Medicine, Past President, Idaho Association of Chiropractic Physicians, Patient, testified **in support** of **S 1231**. The Chiropractic Physician Board and Association have different roles which can be difficult to understand. This legislation is not perfect, but it aligns statutes to include beneficial services.

Responding to committee questions, **Dr. White** said the association continues to define the scope of practice and formulate Rules. The statute has limited the use of legend drugs as redefined by the FDA.

**Mr. Hales**, responding to committee questions, explained a legend or prescriptive drug is typically reserved for use by someone with prescribing authority. Legend and prescriptive drugs are interchangeable terms and are defined together. The FDA change classified injectable vitamins and minerals as legend drugs, affecting their continued use.

**Ryan Fitzgerald**, on behalf of the Idaho Association of Chiropractic Physicians, testified **in opposition** to **S 1231**. The association's draft bill to establish the profession's rule of law and standard of education is not moving forward this year. He requested an interim committee join the association discussions. This legislation needs more work to maintain the care choices patients have received for many years.

ORIGINAL MOTION:

**Rep. Troy** made a motion to **HOLD S 1231** in committee.

**Reps. Troy** and **Hixon** expressed concern for the ability of chiropractors to practice to the full scope of their training and the limiting of consumer choices.

SUBSTITUTE MOTION:

Rep. Rusche made a substitute motion to send S 1231 to the floor with a DO PASS recommendation. Motion carried by voice vote. Reps. Vander Woude, Troy, and Hixon requested to be recorded as voting NAY. Chairman Wood will sponsor the bill on the floor.

**ADJOURN:** 

There being no further business to come before the committee, the meeting was adjourned at 10:46 a.m.

| Representative Wood | Irene Moore |
|---------------------|-------------|
| Chair               | Secretary   |