

MINUTES
HOUSE HEALTH & WELFARE COMMITTEE

DATE: Monday, March 06, 2017

TIME: 9:00 A.M.

PLACE: Room EW20

MEMBERS: Chairman Wood, Vice Chairman Packer, Representatives Hixon, Perry, Vander Woude, Redman, Gibbs, Blanksma, Hanks, Kingsley, Zollinger, Chew, Rubel

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

GUESTS: Lee Heider, Senate; Rebekah Hall, Erica Jensen, Jessica Rachels, Patrick Rachels, and Bianca Martinez; Christine Pisani, Idaho DD Council; Dieuwke A. Disney-Spencer, IDHW-Div. of Public Health; Emily McClure, March of Dimes

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

MOTION: **Rep. Redman** made a motion to approve the minutes of the February 21, 23, 28, and March 1, 2017, meetings. **Motion carried by voice vote.**

S 1060: **Sen. Lee Heider**, District 24, presented **S 1060**. Cytomegalovirus (CMV) is a member of the Herpes family, has no symptoms, has no known cure, and can pass through the placenta to an unborn child. This Legislation directs the Department of Health and Welfare (DHW) to provide information on CMV symptoms and prevention. There are approximately 30,000 babies born with CMV every year who may develop permanent and severe disabilities. Many health care providers are unfamiliar with CMV and its impact on an unborn child. We need to insure Idaho women and their doctors have access to accurate and updated information to prevent CMV infection.

Rebekah Hall, Idaho CMV Advocacy Project, testified in support of **S 1060**. Although relatively unknown, most individuals are infected with CMV by forty years of age. CMV is typically harmless, displaying common cold symptoms in healthy persons. However, it is one of the few viruses able to cross the placental barrier, making it very dangerous if contracted by a pregnant woman.

The Center for Disease Control reports one in 150 babies is born with CMV and one in five will have resulting long-term disabilities. This makes it more prevalent than the well-known Zika Virus, HIV, Spina Bifida, and Downs Syndrome.

After sharing the impact of CMV on her daughter and her family, she said all women should be able to easily understand how and why to prevent the CMV infection. Fiscally, the information distribution will save the state millions of dollars in the care and treatment of the various disabilities associated with CMV infection.

Answering a question, **Ms. Hall** said the virus spreads from wet bodily fluid to wet bodily fluid. Women working in day care facilities or with toddlers at home are at more risk. The virus, in existence for a long time, has recently been identified as a cause for many disabilities, particularly hearing loss beyond genetic abnormalities.

Erica Jensen, Nampa Resident, Registered Nurse, testified in support of **S 1060**. She shared the story of her second pregnancy and the questions that led to a CMV test with a confirmed diagnosis. Cost of preventative programs are much less. Public education to prevent one child from being infected is well worth the cost and effort.

Answering questions, **Ms. Jensen**, said she learned that a positive mononucleosis test result can actually be a false positive and indicative of CMV. Like chickenpox, CMV stays in the system and can be reactivated. Education will address how common the virus is and the importance of early detection.

Patrick Rachels, Sandpoint Resident, read the testimony from **Claire Szewczyk**, Audiology Student, Idaho State University, Co-founder, Idaho CMV Advocacy Project, **in support** of **S 1060**. CMV is the number one non-genetic cause of sensorineural hearing loss, the most common birth defect. Hearing loss causes delays in speech and language development, which can lead to learning problems and social isolation. (See Attachment 1)

Jessica Rachels, Sandpoint Resident, Member, CMV Advocacy Project, testified **in support** of **S 1060**. As a child care provider, she was never informed of her increased CMV risk. The standard health care precautions, such as washing her hands often and using two tissues when wiping a child's nose, are ineffective CMV preventive measures. Had she known about CMV, she would have taken extra precautions to protect her unborn child, who now suffers from disabilities. It is not too late to save future children.

MOTION:

Rep. Redman made a motion to send **S 1060** to the floor with a **DO PASS** recommendation.

Christine Pisani, Idaho Council on Development Disabilities, testified **in support** of **S 1060**. CMV, if transmitted to a child or any other individual with a compromised immune system, may result in permanent life-long developmental disabilities and a significantly shortened life span. The proposed education would provide pregnant women with the knowledge they need to take steps to protect their unborn and newborn babies from this silent virus.

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

In closing, **Sen. Heider** stated with no cure, prevention is very important. The cost of educational materials becomes minor if just one child is kept from contracting CMV.

Dieuwke Disney-Spenser, Deputy Administrator, Division of Public Health, DHW, was invited to answer a question. She said the Division of Public Health receives only federal funds. They can use information developed by other states and work with medical community partners to get information about CMV into the community. With or without passage of the **S 1060**, the Division of Public Health is committed to work with the Idaho CMV Advocacy Program and develop a specific CMV campaign.

SUBSTITUTE MOTION:

Rep. Hanks made a substitute motion to send **S 1060** to the floor with a **DO PASS** recommendation without the funding stipulated in the Fiscal Note.

SUBSTITUTE MOTION WITHDRAWN

After further discussion, **Rep. Hanks** asked to have her substitute motion withdrawn.

Answering further questions, **Ms. Disney-Spenser** said the DHW can and will incorporate CMV education within their existing programs, which highlight specific issues each year with a bigger campaign. They can use information already produced by the Idaho CMV Advocacy Project. Their commitment exists with or without this Legislation.

Mr. Rachels answered an earlier committee question. CMV, an ancient virus, is the only survivor virus which has learned to live with the host. It is a silent virus with no significant illness signs. New research suggests there may also be side affects for the adults contracting the virus.

**VOTE ON
MOTION:**

Chairman Wood called for a vote on the motion to send **S 1060** to the floor with a **DO PASS** recommendation. **Motion carried by voice vote. Reps. Zollinger and Hanks** requested to be recorded as voting **NAY. Vice Chairman Packer** will sponsor the bill on the floor.

ADJOURN:

There being no further business to come before the committee, the meeting was adjourned at 9:56 am.

Representative Wood
Chair

Irene Moore
Secretary