## SESSION OF 2017

## **SUPPLEMENTAL NOTE ON HOUSE BILL NO. 2030**

As Amended by House Committee on Health and Human Services

## **Brief\***

HB 2030, as amended, would amend the Kansas Pharmacy Act to change, from 18 to 12 years of age, the minimum age for a person to whom a pharmacist or a pharmacy student or intern working under the direct supervision and control of a pharmacist would be authorized to administer a vaccine, other than the influenza vaccine, pursuant to a vaccination protocol and with the requisite training.

## Background

The bill was introduced by the House Committee on Health and Human Services at the request of the Kansas Association of Chain Drug Stores. At the House Committee hearing, representatives of the Board of Pharmacy (Board), Dillons Pharmacy, the Kansas Association of Chain Drug the Kansas Independent Pharmacy Service Stores. Corporation, and the Kansas Pharmacists Association testified in favor of the bill, as introduced. The proponents generally stated the bill would increase convenience and access to vaccines for individuals who may otherwise not be immunized and may increase the vaccination rate in Kansas to further reduce the incidence of vaccine-preventable diseases. Written proponent testimony was provided by a representative of Walgreens.

Representatives of the Kansas Association of Osteopathic Medicine (KAOM) and the Kansas Medical

<sup>\*</sup>Supplemental notes are prepared by the Legislative Research Department and do not express legislative intent. The supplemental note and fiscal note for this bill may be accessed on the Internet at http://www.kslegislature.org

Society (KMS) testified in opposition to the bill, as introduced, and proposed amending the bill to raise the minimum age to 12 for anyone to whom pharmacists or pharmacy students or interns working under the direct supervision and control of a pharmacist could administer non-influenza vaccines. The KAOM representative stated concern with the vaccination of young children because a child's allergic reactions to compounds in vaccines are unknown, placing the child at a higher risk for a reaction. The KMS representative stressed the importance of not fragmenting care for pre-adolescents.

No neutral testimony was provided at the hearing.

The House Committee amended the bill to change the minimum age for a person to whom a pharmacist or a pharmacy student or intern working under the direct supervision and control of a pharmacist would be allowed to administer any vaccine.

The House Committee reconsidered its previous action on the bill and amended the bill by reinserting language related to the minimum age for administration of the influenza vaccine (returning to the language in existing law) and lowering the minimum age of the person to whom a pharmacist or pharmacy student or intern could administer vaccines other than influenza, from 18 to 12 years of age.

According to the fiscal note prepared by the Division of the Budget on the bill as introduced, enactment of the bill would have no fiscal effect for the Board. The Board indicates additional availability and convenience of vaccination offerings would increase the number of minors vaccinated, which could increase the number of vaccinations purchased. Any increase in purchases could increase revenues generated from sales and also affect healthcare-related expenditures for state and local governments; however, the fiscal effect cannot be estimated. Any fiscal effect associated with enactment of the bill, as introduced, is not reflected in *The FY 2018 Governor's Budget Report*.