

MASSACHUSETTS CHAPTER, AMERICAN ACADEMY OF PEDIATRICS

ANNUAL MEETING

REPORT OF COUNSEL

EDWARD J. BRENNAN, JR., ESQ.

May 11, 2017

The 2017-2018 Legislative session convened on Beacon Hill in January with over 6,000 bills filed for consideration. Legislative committees have been appointed, and hearings on bills started this month. Most of the bills are re-files from last session.

Since last year's Chapter Annual Meeting, the Legislature passed the following laws before the close of the 2016 legislative session. The Chapter supported these bills:

1. Gender Identity and Nondiscrimination, Chapter 134 of the Acts of 2016. The law would add to the state's nondiscrimination law gender identity. The law requires a public accommodation that lawfully segregates or separates access to such accommodation or entity based on a person's sex to grant access to such accommodation or entity consistent with the person's gender identity.
2. MCPAP. Included in the State Budget was the codification of the MCPAP program within the Department of Mental Health. The provision would codifies in the General Laws the state budget requirement that health insurance companies contribute their fair share to the operation of the MCPAP program, Chapter 160 of the Acts of 2016.
3. Medical Assistants Administering Immunizations. The Legislature passed Chapter 234 of the Acts of 2016, which allows certified medical assistants to administer immunizations under the medical direction of a primary care provider (physician, NP or PA). The primary care provider must be in the facility and available for assistance, but does not need to be in the room. The Chapter supported the bill.

Also passed in the closing days of the 2016 legislature was Chapter 400 of the Acts of 2016, which would establish a Board of Registration of Naturopathy, license naturopaths and define the practice of naturopathy. Naturopaths cannot prescribe, dispense or administer prescription medication, perform surgery or invasive procedures, use radiation or anesthesia and must track immunizations for children under 18 and refer patients to a primary care or collaborative physician where evidence exists that a patient has not been immunized. The Chapter opposed the bill.

2017 Legislative Session

The Chapter is taking action on the following bills:

1. Tobacco. H. 1217 & S. 1218 "An Act Modernizing Tobacco Control and Protecting the Health of Minors" would (i) raise the age of sale of tobacco products across the Commonwealth from 18 to 21; (ii) Regulate E-cigarettes and treat these products as tobacco products; (iii) Ban the sale of nicotine liquids and gels without child resistant packaging; and (iv) Ban the sale of all tobacco and nicotine delivery products in pharmacies and health care institutions. Chapter supports.

2. Lead Poisoning. H.1626 “An Act Relative to Tax Credits for the Containment or Abatement of Lead Paint and Further Protecting Children from Lead Paint Containment,” decreases the action level of lead from 25 micrograms per deciliter to 10; doubles tax credit for owners who de-lead their housing units; and increases penalties for housing discrimination. Chapter supports.
3. Conversion Therapy. H.1190 “An Act Relative to Abusive Practices to Change Sexual Orientation and Gender Identity in Minors” would prohibit conversion or reparative therapy. Such alleged “therapy” would seek to change a minor’s sexual orientation or gender identity. It has no validation in science, and poses significant risk to children and their families. Chapter supports.
4. Marijuana. The ballot question legalizing recreational use of marijuana that passed last fall is being implemented. A new Legislative Committee has been created to consider bills dealing with the issue of marijuana. The chapter supports several bills which would: limit access and marketing to children with regulations similar to tobacco and alcohol; mandate childproof packaging; and prevent accidental ingestion by regulating the appearances of edibles.
5. Nurse Practitioners - Independent Practice. The Massachusetts Coalition of Nurse Practitioners filed legislation (S.1257 & H. 2451) to grant nurse practitioners independent practice by eliminating the statutory provision requiring NPs to practice under the supervision of a physician for the purposes of ordering tests and therapeutics and prescribing medications. It would also remove the Board of Registration in Medicine from its current role in jointly regulating with the Board of Registration in Nursing the scope of practice of NPs. The scope of practice of NPs would be left solely with the Nursing Board. Moreover, the bill would expand their scope of practice by allowing NPs to interpret tests. Chapter opposes.
6. An Act to Promote Team Based Health Care. The Massachusetts Medical Society has filed legislation, H.2437 that would promote integrated, multi-disciplinary team-based care, in which clinical leadership of patient care teams is provided by qualified physicians. The bill would require physician assistants and certain Advanced Practice Nurses, such as nurse practitioners and nurse anesthetists, to work only as a part of physician-led patient care teams with appropriate collaboration and consultation, and under a written practice agreement. Chapter supports.
7. Epinephrine Supplies in Schools. H.2036 “An Act Relative to Emergency Stock Supply of Epinephrine in Schools,” requires each public school maintain a stock supply of non-patient specific epinephrine available to all students, including students with individualized health care plans prescribing epinephrine injections, to be administered in the event of an anaphylactic emergency. The stock epinephrine would be stored in an easily accessible unlocked location. The number and type of epinephrine auto-injectors required would be based on school population, and the individuals authorized to administer epinephrine would meet certain training requirements for such administration, including the use of epinephrine dose calculation devices. The program would be administered by DPH and funded by assessment on health insurers. Chapter supports.
8. Immunization Registry Opt-out. H.1179 “An Act Relative to the Computerized Immunization Registry” would allow parents of children who receive vaccinations to opt out of having their names and immunization information on the state’s immunization registry. Chapter opposes.
9. Diet Pills and Muscle-building Supplements. H.1195 “An Act Protecting Children from Harmful Diet Pills and Muscle-building Supplements” would ban the sale of over counter diet pills or diet supplements for weight loss to anyone under 18 years of age. Over counter diet pills and diet supplements for weight loss or muscle building “includes, but not limited to, thermogens, which are substances that produce heat in the body and promote calorie burning, lipotropics, which are compounds that break down fat during body metabolism, hormones, including hormone

modulators and hormone mimetics, appetite supplements, or ingredients deemed adulterated under 21 USCA sec. 342.” Chapter supports.

10. Sugary Drinks. S.1120 “An Act to Protect Youth from the Health Risks of Sugary Drinks,” prohibits marketing of sugary drinks in schools. The bill also requires labeling on certain sugary drink advertisements. Anyone who advertises sugary drinks must include a Warning: Drinking beverages with added sugar(s) contributes to obesity, diabetes, and tooth decay.” Not required on drink containers...limited to advertisements. A limitation on sugary beverages in children’s meals at chain restaurants would be imposed. Chain restaurants can only sell kid’s meal if the default beverage is: water, sparkling water or flavored water with no added natural or artificial sweeteners; nonfat or 1% milk or non-dairy alternative containing no more than 130 calories per container; or 100% juice, with no added sweeteners, in a serving size of no more than 8 oz. Chapter supports.
11. Prevention and Wellness Trust Fund. H.2480& S.643 “An Act to Promote Public Health through the Prevention and wellness trust fund,” would renew funding for the Prevention and Wellness program that supports health initiatives in high need communities to prevent chronic conditions i.e. childhood asthma. Chapter supports.
12. Safe Alternative to Toxic Chemicals. S. 474 “An Act for a Competitive Economy through Safer Alternatives to Toxic Chemicals,” would establish a process to identify safe household chemicals and encourage their use by banning sale of unsafe chemicals. Chapter supports.
13. Detergent Poisoning. H.1145 “An Act to Protect Children from Detergent Poisoning,” would regulate liquid detergent packets to make them less attractive to children; require warning labels; and ban sale of liquid detergent packets unless it meets requirements of Mass law as required under this bill. Chapter supports.
14. Skilled care for Fragile Children. H.2233 & S.1465 “An Act Requiring Protection for the Continuous Skilled Care of Fragile Children,” would establish a general “Bill of Right” for every child or adult who is eligible for continuous skilled nursing program, with a medically complex health condition, or special health needs requiring specialized care in all settings shall be guaranteed access to high quality care that is appropriate to the acuity of the patient. MassHealth would be required to promulgate rules to provide such care. Chapter supports.

RFDASH Bills:

The MCAAP Residents and Fellows Day at the State House is May 25, 2017 and participants will advocate in support of the following bills:

1. Safe Communities Act. S.1305 “An Act to protect the civil rights and safety of all Massachusetts residents,” would prevent local police departments from enforcing immigration enforcement.
 - The bill would prohibit a law enforcement agency from inquiring about a person’s immigration status unless info is required by law or is an element in a crime for which the person is being investigated.
 - No police officer can arrest or detain a person solely for immigration enforcement program; exception is if probable cause that the person has committed a crime
 - Police can’t continue to detain a person solely for immigration purpose once the person is released from local custody.
2. Children’s Mental Health Access. S.547 “An Act to increase access to children's mental health services in the community,” would require health insurance policies to cover home-based and community-based behavioral health services for children with emotional disturbance. Such services must be comparable in scope to the array of services developed in response to the court’s judgement and remedial plan in the Rosie D matter.

3. SNAP Common Application. S.612 “An Act improving public health through a common application for core food, health and safety-net programs”- Create a common application for SNAP and MassHealth in order to help enroll the 670,000 individuals eligible for SNAP who do not receive this benefit.
 - At time of initial application or renewal of MassHealth, a recipient can use a common application for SNAP benefits.
 - Secy. of Health & Human Services must develop common application.