



The Massachusetts Chapter

April 24, 2014

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House of Representatives
State House
Boston, MA 02133

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Re: **Budget Amendments:
Amendment 964, Early Intervention
Amendment 783, Tobacco Cessation Program
Amendments 1077 & 612, Tobacco Control
Amendments 139 & 203, MCPAP**

Dear Representative,

I write on behalf of the Massachusetts Chapter, American Academy of Pediatrics ("MCAAP") which represents over 1,800 pediatricians practicing in the Commonwealth to urge you to support Budget amendments which would protect the health and welfare of children.

The MCAAP urges you to support:

1. Amendment 964, Line Item 4513-1020 Early Intervention.

This Amendment would increase the line item by \$1.58 million. Early intervention services are among the most critical services we can offer to our most vulnerable children and families. These are children under the age of three with significant physical, developmental or medical disabilities. There is a wealth of data from clinical studies and economic analyses that document the impressive return of investment for society on money spent to provide these kinds of services. It is precisely in this youngest age group where the services have the greatest impact.

The Commonwealth has made progress in recent years in providing developmental services to these vulnerable children. It would be tragic for children and families, but also for the Commonwealth as a whole, if this progress does not continue. If we short-change the critical areas of development and behavioral health, we will not reduce costs for the Commonwealth. *Underfunding of these services for vulnerable children inevitably generates far greater future costs in the areas of special education, mental health services and the criminal justice system.*

2. Amendment 783, Massachusetts Tobacco Control Program.

This amendment would invest \$9 million in tobacco prevention and cessation programming through the Massachusetts Tobacco Control Program (line item 4590-0300). This very valuable DPH program to encourage smoking cessation has been underfunded for years. The Commonwealth receives over a billion dollars a year from tobacco taxes and the Tobacco Settlement Fund, yet efforts to prevent children from smoking and encouraging smokers to stop have been severely reduced. Amendment 783 would provide needed additional funding to counter tobacco advertising and marketing and help educate the public on the addictive nature of e-cigarettes.

3. Amendments 1077 & 612, Tobacco Control.

These amendments would treat nicotine vapor products, such as e-cigarettes, as tobacco products and ban the sale to children under 18 (Amendment 1077) or under 21 (Amendment 612).

Electronic cigarettes resemble traditional cigarettes. They are battery-operated devices that provide inhaled doses of nicotine through a vaporized solution contained in a cartridge inserted into the device. Nicotine is an addictive, potent stimulant drug that is rapidly absorbed into the bloodstream and penetrates brain tissue within 15 seconds. It is a major health hazard and children must be protected from it.

Astonishingly, these products are not regulated and are being marketed in a reckless and dangerous manner that appeals directly to children and adolescents. E-cigarettes are being sold in fruit and candy flavors that are appealing to children, including bubble gum, cotton candy, Atomic Fireball, berry, peach, grape and vanilla. We believe that such marketing entices youngsters to use a product that encourages tobacco use and is dangerous in and of itself.

The MCAAP has been a strong and consistent advocate for public health initiatives and supports efforts to curtail the harmful effects of tobacco products, especially as it affects children and we would urge the House to adopt one of these amendments.

4. Amendments 139 & 203, Massachusetts Child Psychiatry Access Project (MCPAP).

These amendments would assess health insurers to fund their fair share of the MCPAP program that serves their insureds. The Commonwealth currently provides a subsidy to insurers whenever a physician uses the MCPAP program for an insured patient.

Launched in 2004, MCPAP has provided invaluable assistance to primary care pediatricians throughout the Commonwealth who are increasingly on the front lines in diagnosing and treating child mental health disorders. MCPAP provides mental health consultation by telephone to pediatricians and office evaluations for children and families when necessary. Since 2004, MCPAP has served children and families regardless of whether or not they have insurance. Currently, well over a majority of the MCPAP encounters per year are used by members of commercial insurers. One can reasonably assume that MCPAP has saved insurers from paying for unnecessary emergency room visits and for child psychiatric consultations. Our members in pediatric practice have found MCPAP to be a great help in supporting the coordination of services within the medical home.

We hope that MCPAP can continue to maintain the improvements in child mental health in the Commonwealth, support the medical home in pediatric offices, and prevent inappropriate emergency room utilization for child mental health services. We urge you to support Amendments 139 & 203, and require insurers to pay their fair share of this invaluable state program.

The Massachusetts Chapter, American Academy of Pediatrics strongly urges you to support these amendments.

Respectfully,

John O'Reilly, M.D., FAAP,
President, MCAAP