Approved: March 08, 2024

MINUTES OF THE HOUSE HEALTH AND HUMAN SERVICES COMMITTEE

The meeting was called to order by Chairperson Brenda Landwehr at 1:30 pm on Wednesday, January 31, 2024, in room 112-N.

All members were present

Committee staff present:

Carly Humes, Office of Revisor of Statutes David Long, Kansas Legislative Committee Assistant Elizabeth Cohn, Legislative Research Department Jenna Moyer, Office of Revisor of Statutes Leighann Thone, Legislative Research Department

Conferees appearing before the Committee:

David Adams, President, Kansas EMS Association
Jason White, Mid America Regional Council Emergency Rescue
Paul Davis, Director, Johnson County Department of Emergency Services
Dr. Bryan Beaver, EMS Medical Director
Joseph House, Executive Director, Kansas Board of EMS
Alexandra Blasi, Executive Director, Kansas Board of Pharmacy

Others in attendance:

No list available

Request for bill introductions

Representative Buehler introduced 24rs2895 on behalf of the Kansas Optometric Association regarding scope of practice. Without objection, accepted.

Representative Clifford introduced 24rs2584 on behalf of the American Chronic Pain Association relating to nonopioid alternatives for the treatment of pain. Without objection, accepted.

Representative Ruiz introduced 24rs2700 on behalf of the Board of Dieticians regarding the Dietician Licensure Compact. Without objection, accepted.

Representative Ruiz introduced 24rs2787 on behalf of the Board of Dieticians regarding updating records and reviewing the Licensing Act. Without objection, accepted.

Representative Landwehr introduced 24rs2885 on her behalf relating to transferring authority for continuing care retirement communities from the Kansas Insurance Department to the Kansas Department for Aging and Disability Services. Without objection, accepted.

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Representative Landwehr introduced 24rs2899 on her behalf regarding the establishment of the pregnancy compassion program and the pregnancy compassion public awareness program. Without objection, accepted.

Representative Landwehr introduced 24rs2900 on her behalf regarding no surgery for children gender affirming care. Without objection, accepted.

Hearing on: HB2579 — Authorizing the board of emergency medical services to distribute non-prescription over-the-counter medications.

Jenna Moyer, Revisor of Statutes, provided an overview of **HB2579**.

Jason White, The Mid-America Regional Council (MARC), provided testimony in support of HB2579 (Attachment 1). MARC is a bi-state council of local governments serving nine area counties in Missouri and Kansas. EMS agencies in the MARC region support the bill which will allow ambulance service owners, managers and physician medical directors to decide what if any "over the counter" (OTC) medications EMS personnel could distribute. Due to interpretations of state statutes, EMTs and paramedics cannot distribute OTC medications. The bill would allow OTC medications to be distributed by EMS personnel. There are at least 39 states that have a "Leave Behind" program which allows naloxone to be left behind during overdose emergencies.

Paul Davis, Director, Johnson County Department of Emergency Services, provided testimony in support of <u>HB2579</u> (<u>Attachment 2</u>). In the battle against the opioid epidemic, the practice of leaving behind of OTC naloxone for patients grappling with opioid addiction is necessary. The legal department attorneys for the Johnson County Government have advised that OTC naloxone is no different than any other OTC medication with respect to regulations. Leaving behind OTC naloxone holds immense potential in stemming the tide of opioid related fatalities.

Dr. Bryan Beaver, EMS Medical Director, provided testimony in support of HB2579 (Attachment 3). EMS providers daily make life saving decisions under pressure including the delivery of life saving medications. The skill sets necessary to preform critical, life saving tasks makes them more than capable of handling the distribution of OTC medications. These medications are specifically formulated and tested for general safety and EMS providers are well trained for their appropriate use. The bill will allow EMS programs to provide more comprehensive care which may reduce unnecessary hospital visits, thus easing the burden on emergency departments.

Dr. Beaver responded to questions from the committee.

David Adams, President, Kansas Emergency Medical Services Association, provided testimony in

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support of <u>HB2579</u> (<u>Attachment 4</u>). The Covid-19 pandemic showcased the flexibility and evolution of Emergency Medical Services. OTC medications can provide immediate relief for minor ailments and symptoms. Leaving behind OTC medications ensures patients have access to basic care even after the EMS team has left. Possible amendments to the bill were provided.

Written only in support of **HB2579**:

Rachelle Colombo, Executive Director, Kansas Medical Society (Attachment 5)

Randy Bowman, Executive Director, Kansas Association of Local Health Departments (Attachment 6)

Dave Johnston, Chairman, Region III EMS Council (Attachment 7)

Ruaa Hassaballa-Muhamad, Chairman of the Board of Directors, Kansas Public Health Association (Attachment 8)

Joseph House, Executive Director, Kansas Board of EMS, provided testimony in opposition to <u>HB2579</u>
(Attachment 9). Additional language in the bill is unnecessary and asks to legislate a practice bystanders and laypeople can do today. This create obstacles in the path of an EMS provider. It is the Board's current stance that the giving of OTC medications to another individual does not need to be legislated. This bill would create the need for additional training and additions to the medical protocols. Mr. House noted several possible amendments to the bill. The bill would also create a statutory disconnect within the emergency opioid antagonist law.

Mr. House responded to questions from the committee.

Alexandra Blasi, Executive Director, Kansas Board of Pharmacy, provided a neutral position regarding **HB2579** (Attachment 10). While the Board has no jurisdiction over emergency medical services, recent changes in federal laws governing OTC naloxone have raised concerns about limitations of current Kansas law. The Board strongly supports increase access to and the availability of the medication and believes this is an important pathway. The Board does not have concerns about the broader allowance of emergency medical personnel providing OTC medications to patients.

The hearing on **HB2579** was closed.

Chairman Landwehr noted without objection the committee will work **HB2579**.

Representative Buehler motioned and Representative Eplee seconded to pass out HB2579 favorably.

There was discussion.

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<u>Representative Oropeza motioned and Representative Ruiz seconded to amend Line 15 by removing "when authorized by a physician". Motion carried.</u>

Representative closed.

<u>Representative Buehler motioned and Representative Ruiz seconded to pass out HB2579 favorably as</u> amended. Motion carried.

<u>Final action on: HB2578</u> — <u>Providing that programs and treatments provided by a certified community behavioral health clinic be granted a renewal certification if such programs and treatments have been previously certified or accredited.</u>

Representative Buehler motioned and Representative Bryce seconded to pass out **HB2578** favorably.

There was discussion.

Representative Buehler closed on his motion.

Representative Buehler motioned and Representative Bryce seconded to pass out **HB2578** favorably. Motion carried.

The meeting was adjourned at 2:23 PM.