

MINUTES

**Senate Health Services Subcommittee of Public Health Committee
House Health Services Subcommittee of Public Health Committee
Monday, November 30, 2020
10:00 A.M.**

Subcommittee Members Present: Senators Jimmy Hickey, Jr., Chair; Missy Irvin, and Bill Sample
Representatives Deborah Ferguson, Chair; Justin Boyd, Michelle Gray, Lee Johnson, Jack Ladyman, and
Fredrick Love

Other Legislators Present: Senators Linda Chesterfield, Kim Hammer, Trent Garner, and David Wallace
Representatives Rick Beck, Stan Berry, Bruce Coleman, Denise Jones Ennett, Dan Douglas, Jon Eubanks,
Kenneth Ferguson, Justin Gonzales, Steve Hollowell, Tippi McCullough, John Payton, Clint Penzo, Aaron
Pilkington, Johnny Rye, Jamie Scott, Jeff Wardlaw, and Danny Watson

Call to Order and Comments by the Chair Senator Jimmy Hickey, Jr. called the meeting to order.

Consideration to Adopt Meeting Minutes from September 30, 2020 [Exhibit C] With no objection, the minutes were approved.

ISP2019-173 – “An Act to Study Methods to Increase Healthcare Choices and Access to Maternity, Prenatal, Postnatal, and Reproductive Healthcare by Utilizing Certified Nurse Midwives” [Exhibit D] Representative Justin Boyd discussed a concern regarding lack of care available for pregnant women. This legislation would expand the scope of practice for Nurse Midwives in order to provide opportunities for more access to care in rural areas of the state. The ISP does not present specific expansions, but allows for the opportunity to create scope of practice expansions later.

ISP2019-174 – “An Act to Authorize Pharmacists to Dispense HIV Pre-exposure and Post-exposure Prophylaxis” [Exhibit E] Representative Fredrick Love discussed that this legislation came up in an HIV task force for the Department of Health. However, there is no current discussion with the Pharmacists Association. If Pre-exposure Prophylaxis or Post-exposure Prophylaxis (PEP) is introduced to someone who has been exposed to HIV early enough, the virus may be killed within the body and the person may not contract HIV. Timing is important as PEP needs to be introduced within 72 hours in order to give the antiviral medication an increased ability to kill the virus. This legislation would allow pharmacists the ability to dispense PEP and then refer the individuals to their primary care physician. There are several states currently dispensing PEP through pharmacists.

ISP2019-175 – “An Act to Modify the Application Process for Certification to Practice as an Orthotic Assistant, Orthotic/Prosthetic Assistant, or Prosthetic Assistant; And for Other Purposes” [Exhibit F] Senator Missy Irvin discussed that this legislation would allow for those who have graduated from a graduate level orthotic/prosthetic educational program to work with prosthetic patients. This would need to be included in the current law so that these graduate level students would be able to work with those patients. There is no known opposition to this legislation.

ISP2019-176 – “An Act to Study Removal of the Collaborative Practice Agreement Requirement of Advanced Practice Registered Nurses and Granting Advanced Practice Registered Nurses Full Practice Authority Including Full Prescriptive Authority” [Exhibit G] Senator Kim Hammer discussed that studies since 1960 have shown no difference in healthcare outcomes based on whether they had an Advanced Practice Registered Nurse (APRN) or a physician. As of right now, in a collaborative practice agreement the supervising physician does not have to be in close proximity to the APRN. This legislation would expand the ability of citizens to receive full access to care. It differs from similar past legislation in the number of hours that would

be required, adding another layer of security and accountability to protect the public. There are currently 22 other states who have granted full practice to APRNs.

ISP2019-177 – “An Act to Amend the Signature Authority of Advanced Practice Registered Nurses and Physician Assistants for Documentation Related to Special Education and Related Services” [Exhibit H] Representative Justin Gonzales presented this legislation on behalf of Representative Charlene Fite.

ISP2019-178 – “An Act to Allow Pharmacists to Prescribe, Administer, Deliver, Distribute, or Dispense Anti-Allergy Medications, Vaccines, or Immunizations to a Person Who is Three (3) Years of Age or Older” [Exhibit I] Representative Justin Boyd discussed how, because of current emergency federal legislation, pharmacists are able to administer vaccines to people between the ages of three (3) and eighteen (18). There is confusion as state law does not allow pharmacists to do this, but federal law does under an emergency act. This legislation would continue the current emergency federal legislation after the emergency has ended. This would change the pharmacist scope of practice to alleviate the current confusion. It would not allow pharmacists to offer a diagnosis, but would allow them to provide an immunization.

ISP2019-179 – “An Act to Ensure that Healthcare Professionals with Prescriptive Authority May Dispense Full Prescriptions” [Exhibit J] Representative Justin Gonzales discussed how this legislation would allow those with prescriptive authority to dispense full prescriptions from their clinics and how it would be more convenient for patients. Other states currently have similar legislation. This legislation does not get rid of the classes or schedules of prescriptions and includes limits to what prescriptions can be prescribed. Healthcare professionals would still not be able to prescribe medications that they aren't already allowed to prescribe.

ISP2019-180 – “An Act to Allow Pharmacists to Prescribe, Administer, Deliver, Distribute, or Dispense Vaccines and Immunizations to a Person Three (3) Years of Age or Older and to Test, Screen, and Treat Minor Non-chronic Health Conditions” [Exhibit K] Representative Justin Gonzales presented this legislation on behalf of Representative Austin McCollum.

ISP2019-181 – “An Act to Amend the Arkansas Athletic Trainers Act; And to Authorize Athletic Trainers to Practice Under the Direct Supervision of a Physician” [Exhibit L] Representative Lee Johnson discussed that there is confusion in regards to whether athletic trainers can work under a supervising physician or under a physical trainer in a certain setting. Under current legislation, athletic trainers can work under a supervising physical therapist in a clinical setting and a physician in a nonclinical setting. This legislation would alleviate confusion and allow physicians to supervise athletic trainers in a clinical setting as well. There has been discussion between athletic trainers and physical therapists regarding this legislation. This would not be a collaborative practice agreement.

ISP2019-182 – “An Act to Authorize Full Independent Practice Authority for Advanced Practice Registered Nurses Who Meet Certain Requirements; And to Create the Full Independent Practice Committee” [Exhibit M] Representative Lee Johnson discussed that this legislation would create a pathway to autonomy for nurse practitioners in the state and would require accountability similar to that of physicians. There are nurse practitioners in the state who currently practice free from collaboration with a physician. These nurses have the education and the experience to practice free from the collaborative agreement and the agreement is often confused with supervision. This legislation would create a sub board of physicians and nurse practitioners who would examine APRN applications for autonomy and vet them for qualifications. If an issue occurred, the Medical Board or the Nursing Board would make recommendations to the sub board on how the APRN should proceed. The sub board would have authority to make the final action. Arkansas would be the first state to have this type of sub board. Licensure would still be up to the Nursing Board for APRNs. In a hospital setting, it would be up to individual hospitals to decide if APRNs receive staff privileges.

ISP2019-183 – “An Act to Amend the Arkansas Athletic Trainers Act; To Amend the Definition of ‘Athletic’ Within the Arkansas Athletic Trainers Act; And for Other Purposes” [Exhibit N] Senator Kim Hammer discussed that this legislation would add law enforcement, military, and rescue services to the list of professions athletic trainers can be hired to work with. These additions require athleticism of their personnel in order to perform their job duties. Having an athletic trainer work with them would help reduce the number of workmen’s compensation claims and off the job time due to injuries. This legislation would be proactive in allowing athletic trainers to be present in these professions to help prevent injuries. There has been no dialogue with physical therapists, however they are aware of the bill.

ISP2019-184 – “An Act to Establish the Psychological Interjurisdictional Compact in Arkansas; And for Other Purposes” [Exhibit O] Representative Lee Johnson discussed that this legislation would be a compact licensure bill, would look specifically at psychologists, and would attempt to facilitate licensure across multiple states. It is not currently known whether this would preempt state laws.

ISP2019-185 – “An Act to Amend the Membership of the Arkansas State Medical Board; To Amend the Supervision and Prescriptive Authority of Physician Assistants; And for Other Purposes” [Exhibit P] Senator Kim Hammer discussed how this legislation would further define what Physician Assistants would be allowed to do. It would allow for Physician Assistants to be involved in conversations and have a representative on the state Medical Board. This legislation would allow Physician Assistants to pronounce death in the absence of a physician.

ISP2019-187 – “An Act to Authorize the Arkansas Natural Naturopathic Physicians Licensure Act; And for Other Purposes” [Exhibit R] Representative Clint Penzo discussed that this legislation would create a way for Naturopathic Doctors (NDs) to be licensed in the state and the license would be placed under the Medical Board. There are several states that currently allow naturopathic physicians to practice but there is not a pathway in Arkansas for them to be licensed in the state. NDs would still be required to attend a four year medical school to be licensed in the state.

ISP2019-188 – “Requesting that the House Committee on Public Health, Welfare and Labor Study the Best Practices and Policies on Minor Cosmetic Procedures, Including Scope of Practice of Healthcare Professionals Involved in Cosmetic Procedures” [Exhibit S] Representative Michelle Gray discussed the proposal of her ISP being in response to Rule 46 filed in ALC regarding aesthetics and cosmetic procedures.

With no further business, the meeting was adjourned at 11:59 PM.