

MINUTES

HOUSE & SENATE HEALTH SERVICES SUBCOMMITTEES OF THE HOUSE & SENATE INTERIM COMMITTEES ON PUBLIC HEALTH, WELFARE AND LABOR

October 10, 2017

The House and Senate Health Services Subcommittees met Tuesday, October 10, 2017 at 1:30 p.m. in Committee Room A, of the Multi-Agency Complex (MAC) Building, Little Rock, Arkansas.

Senate Health Services members attending: Senator John Cooper.

House Health Services members attending: Representatives Aaron Pilkington, Vice Chair; Justin Boyd, Robin Lundstrum, and Austin McCollum.

Other legislators attending: Senators Ronald Caldwell, and Lance Eads. Representatives Mary Bentley, Bruce Coleman, Bruce Cozart, Kim Hammer, and James Sorvillo.

Comments by the Chairs

Representative Aaron Pilkington called the meeting to order.

Consideration to Approve the August 14, 2017 Meeting Minutes (EXHIBIT C)

Representative Pilkington stated that without objection, the minutes from the August 14, 2017 meeting are approved.

Discussion of ISP 2017-003 - "Requesting that the House Committee on Public Health, Welfare and Labor Study and Promote Awareness of Pediatric Acute-Onset Neuropsychiatric Syndrome, also known as 'PANS'." (EXHIBIT D)

Representative Kim Hammer, Sponsor of ISP 2017-003; Matt Brumley, Director, Saline Health Foundation; Cathy Puckett, mother of Cameron (a child diagnosed with 'PANS' and/or 'PANDAS'); and Claude Ashley, MD, Pediatrician, Dothan, Alabama; presented ISP2017-003.

Representative Hammer introduced and briefly explained ISP2017-003, outlined the presentation for today (which includes a video), and introduced Mr. Brumley as the first presenter.

Mr. Brumley introduced the illness known as Pediatric Acute-Onset Neuropsychiatric Syndrome, also known as 'PANS'. The three focal points of this presentation are awareness, diagnosis, and treatment for this disease.

Ms. Puckett's son, Cameron, was diagnosed with 'PANS' at the age of 19, and she briefly described her family's very painful experience with this illness and how it had debilitated their son. She described the long process of elimination that finally led to the correct diagnosis and the treatment plan that returned Cameron to a normal life. He now attends college at UCA in Conway, Arkansas. Ms. Puckett emphasized how crucial it is that insurance companies, doctors, and the public are educated as to the *extreme* severity of this illness.

(Video was shown at this time of several cases.)

Dr. Claude Ashley shared his extensive knowledge of and experience with ‘PANS’ and ‘PANDAS’. Dr. Ashley has one child with autism and one child with ‘PANS’:

- ❖ The immune system of autistic children make them more susceptible to ‘PANDAS’.
- ❖ A cell type common to both Autism and ‘PANDAS’ is the highly inflammatory TH17 cell.
- ❖ Profound separation anxiety is extremely common to this illness.
- ❖ ‘PANDAS’ is a syndrome of neuropsychiatric symptoms, triggered by a routine infection or exposure to common viruses (such as streptococcus).
- ❖ It is an autoimmune disorder (your body is attacking itself).
- ❖ Describing the treatment, Dr. Ashley suggested that early diagnosis and treatment when children have strep throat repeatedly after having it once, may avert this illness for these children
- ❖ If they are having motor tics and changes in their personality 2 weeks after they have had strep, treat them with antibiotics and ibuprofen—tics go away the next day, and the children usually recover.
- ❖ Relapses of this disease have been known to occur.

Representative Hammer suggested that the members read the handout prepared by the Commonwealth of Massachusetts, (Handout #1) regarding ‘PANS’ and ‘PANDAS’. Representative Hammer introduced Becky Wallace, the mother of Max Wallace (a child diagnosed with ‘PANS’ and/or ‘PANDAS’), to give testimony.

Representative Hammer stated there will be a phase 2 of this interim study presented at the next subcommittee meeting.

Mr. Brumley closed with final comments on the severity, sadness, and the progress in promoting awareness of this tragic illness. Representative Hammer requested that the video be sent to the chairs of this subcommittee.

Discussion of ISP 2017-068 – “An Act to Recognize the Emergency Medical Services Personnel Licensure Interstate Compact; and for other Purposes.” (EXHIBIT E)

Representative Scott Baltz, Sponsor, and Ken Kelly, Owner, Pro-Med Ambulance Service in El Dorado, Arkansas;

Item E will be presented at a future meeting.

Discussion of ISP 2017-079 – “Requesting that the House Committee on Public Health, Welfare and Labor Study Methods to Enhance Access to Immunizations in Arkansas by Overcoming Challenges to Immunization Access.” (EXHIBIT F)

Representative Justin Boyd, Sponsor; Gary Wheeler, MD, MPS, Chief Medical Officer, Arkansas Department of Health; and Jason Derden, Pharm.D., Pharmacy Administrator, Arkansas Medicaid Pharmacy Program, Division of Medical Services, Department of Human Services; presented ISP2017-079.

Representative Boyd stated that today the Arkansas Department of Health will, as requested at the August 14, 2017 meeting, share their comments with the subcommittee regarding immunization in Arkansas.

In Arkansas, 3 out of 4 children are on Medicaid or the ARKids program. These programs are state funded.

Mr. Derden agrees that Arkansas is lacking in immunization coverage, as evidenced by the mumps outbreak in Northwest Arkansas. Arkansas’ low immunization coverage is due to the access issue and the insufficient reimbursement rate. Dr. Wheeler said it is a big expense to acquire, store, and administer vaccines; along with monitoring equipment and the immense amount of bureaucratic requirements to ensure that the vaccines remain viable. In addition, there is also the expense of paying for nurses and providers.

Arkansas would spend \$9.3 million annually if the Medicaid reimbursement fee was increased from \$9.56 to \$19.54 per vaccination. About \$2.8 million would have to be absorbed by Medicaid if the rates were raised to that level. The main deterrent to promoting increased vaccinations is that all providers are currently losing money with every vaccination. Dr. Wheeler stated that the HPV vaccine would prevent rectal, and 90% of all cervical cancer. Only about 2/3 to 3/4 of Arkansas children are vaccinated due to the access issue.

Representative Boyd recommended three changes to improve the immunization count in Arkansas:

- ❖ Improve reimbursement fees
- ❖ Make reporting more user-friendly (use Web IZ)
- ❖ Improve access for children to get immunizations

Dr. Wheeler suggested and it was agreed upon, to invite Dr. Dillaha to speak on adult immunizations at a future meeting.

The meeting adjourned at 2:50 p.m.