PRESENTATION OF THE BOARD OF PHARMACY

TO THE HOUSE COMMITTEE ON CONSUMER PROTECTION & COMMERCE

> TWENTY-NINTH LEGISLATURE Regular Session of 2017

> > Thursday, February 23, 2017 2:00 p.m.

TESTIMONY ON HOUSE BILL NO. 676. H.D. 1, RELATING TO HEALTH.

TO THE HONORABLE ANGUS L.K. MCKELVEY, CHAIR, AND MEMBERS OF THE COMMITTEE:

My name is Lee Ann Teshima, Executive Officer for the Board of Pharmacy

("Board"). I appreciate the opportunity to testify on House Bill No. 676, H.D. 1,

Relating to Health. This bill would authorize pharmacists to administer the human

papillomavirus vaccine, meningococcal vaccine, influenza vaccine, or tetanus,

diphtheria, and pertussis vaccine to persons between eleven and seventeen years of

age, pursuant to Hawaii Revised Statutes ("HRS") section 461-11.4.

The Board supports this bill and would like to emphasize that pursuant to HRS 461-11.4, in order to administer these vaccines, the pharmacist must:

 Have a valid prescription and verify that the prescriber or the prescriber's authorized agent is the patient's medical home. This ensures that the patient was examined by the primary care physician who, working in collaboration with the family, oversees the acute, chronic and preventive health needs of the patient in a comprehensive, coordinated, and continuous fashion; Testimony on House Bill No. 676, H.D. 1 Thursday, February 23, 2017 Page 2

- Have completed a training program approved by the Accreditation Council of Pharmacy Education prior to administering the vaccines;
- After any of the vaccinations are administered, immediately provide to the patient a vaccination record including the patient's name, date of birth, type of vaccine administered and the date and location it was administered; and
- Provide, within seventy-two hours to the medical home and within five business days to the department of health immunization registry, the same information provided to the patient pursuant to subsection (b) as well as the name of the vaccine administered, manufacturer, lot number and expiration date, method of administration and anatomical site of administration.

In regards to the training that is required to administer a vaccine to a minor, the course must be approved by the Accreditation Council of Pharmacy Education ("ACPE"). ACPE is a non-profit accreditation national agency recognized by the Council on Higher Education Accreditation and the U. S. Department of Education. The ACPE is also the Board's recognized approved provider for pharmacists' continuing education ("CE"). The approved pharmacy-based immunization delivery CE course offered by the American Pharmacists Association is approved by the ACPE for 12-contact hours of the self-study component and 8 hours of live training that is required for the completion of the certificate training program. In addition to the initial training program, pharmacists who administer a vaccine to a minor must also complete a training program every other biennial renewal period and submit proof of completion of the board approved course. Pharmacists who have

Testimony on House Bill No. 676. H.D. 1 Thursday, February 23, 2017 Page 3

completed the initial pharmacy-based immunization delivery CE course are listed on the Board's webpage. This allows the public to see which pharmacists at which pharmacy have completed the training in order to administer a vaccine to a minor.

We respectfully request that the effective date be changed to "upon approval". Thank you for the opportunity to present testimony on House Bill No. 676, H.D. 1. DAVID Y. IGE GOVERNOR OF HAWAII



VIRGINIA PRESSLER, M.D. DIRECTOR OF HEALTH

STATE OF HAWAII DEPARTMENT OF HEALTH P. O. Box 3378 Honolulu, HI 96801-3378 doh.testimony@doh.hawaii.gov



Testimony in SUPPORT of H.B. 676 H.D. 1
RELATING TO HEALTH
REPRESENTATIVE ANGUS L.K. MCKELVEY, CHAIR
HOUSE COMMITTEE ON CONSUMER PROTECTION AND COMMERCE
Hearing Date: February 23, 2017Room Number: 329

1 **Fiscal Implications:** None for the Department.

2 **Department Testimony:** The Department is supportive of H.B. 676 H.D. 1 as it may help to

3 improve human papillomavirus (HPV) and other adolescent vaccination rates in Hawaii by

4 increasing access to adolescent immunizations as well as potentially increasing available vaccine

5 supply for the pediatric population, statewide.

6 HPV vaccination is of special concern because it is an important public health measure that

7 protects against cancers caused by HPV. In 2015, according to U.S. Centers for Disease Control

8 and Prevention National Immunization Survey, Teen data, HPV vaccine series completion rates

9 for girls aged 13–15 years in Hawaii are estimated to be 44% (CI \pm 11) and for males aged 13–15

10 years, 29% (CI \pm 10). These rates are well below the Healthy People 2020 target of 80% coverage

11 levels for males and females aged 13–15 years.

HPV vaccine differs from other immunizations recommended for adolescents aged 11–12 years 12 13 (Tdap, MCV4, influenza) in that multiple doses (total number required is dependent upon the age at which vaccination is initiated and the child's health status) administered within a 6-month 14 period are required for series completion. Hawaii's poor HPV vaccination rates and the 15 complexity of the HPV immunization schedule are indicators that the development of novel 16 17 approaches to vaccination, such as the creation of opportunities for increased collaboration between the medical home and pharmacists proposed by this measure, should be encouraged to 18 19 provide enhanced access to HPV vaccine for Hawaii's keiki.

- 1 It should be noted that this measure would currently benefit only those with private insurance as
- 2 pharmacists/pharmacies do not participate in the Hawaii Vaccines For Children Program, which
- 3 supplies vaccines for administration to Medicaid/MedQuest-eligible patients.
- 4 Thank you for your consideration of this important health topic and for the opportunity to testify.



Legislative Testimony



Testimony Presented Before House Committee on Consumer Protection & Commerce Thursday, February 23, 2017 at 2:00 p.m. By Carolyn Ma, PharmD, BCOP DEAN UH Hilo - Daniel K. Inouye College of Pharmacy (DKICP)

HB 676 HD1 – RELATING TO HEALTH

Chair McKelvey, Vice Chair Ichiyama, and members of the committee:

My name is Carolyn Ma, and I am the Dean for the UH Hilo Daniel K. Inouye College of Pharmacy (DKICP). The college fully supports this bill that will allow registered pharmacists trained and certified in vaccine administration to administer the Human Papilloma Virus vaccine to 11-14 year old patients.

In relation to this bill, the DKICP, via the certified American Pharmacists Association (APHA) course, provides training in immunization administration in the first professional year.

Student pharmacists are expected to apply these skills in their experiential rotation courses throughout the remaining three years of training and also in numerous community health screening and immunization events. Courses in oncology, contraception, reproductive pharmacology and women's health, and pediatrics are taught in the 3rd professional year. Education is provided throughout the four year professional curriculum on medication assessment and therapeutic recommendations via related laboratory tests and subjective/objective findings related to disease and drug therapy. A similar curriculum is presented in all U.S. accredited (ACPE) colleges of pharmacy.

The DKICP has also provided training to practicing pharmacists through their training program via the Hawai'i Pharmacists Association. Please note that all immunizing pharmacists and students pharmacists MUST be certified in BLS or Basic Life Support if they are immunizing. BLS allows for cardiopulmonary resuscitation (CPR) of adults, children and infants and also for intervention of choking. In addition, immediate access to epinephrine must be available at any site of vaccination.

There is recommended monitoring post-administration of observation for 15 minutes due to an adverse reaction of fainting. Via the Vaccine Adverse Events Reporting System (VAERS) there has only been one report of fainting reported in Hawai'i since the Gardasil 9 vaccine was released. VAERS allows for self-reporting, however, the

CDC and FDA state limitations to the VAERS system in that since it is a self-reporting system, there may be reporting bias and inconsistent data quality and completeness, and that report of an AE does not necessarily attribute causality to the vaccine. As well, the data base does not have a non-vaccinated portion for comparison.²

There is concern regarding the declining rate of uptake of the HPV vaccine. In a recent survey of incoming freshmen performed at UH Mānoa and UH Hilo campuses 22% and 5%, respectively, have been fully vaccinated.¹ Students who had not received at least one of three shot series were 69% and 78% respectively.¹ The recommended age of vaccination is at age 11-12 years of age.

A secondary issue that accompanies this age group is that due to cost of the vaccine, many physicians or provider offices will not carry the HPV vaccine, thus sending an 11-13 year old patient with a prescription to a pharmacy. Upon dispensing, the patient would need to return to the provider for administration. This may pose problems in the case of rural distances but more importantly that the proper transportation and storage of the HPV vaccine requires specific cold chain storage and verification of this cannot be assured once the vaccine leaves the pharmacy and is in the possession of the patient.

Statistics from APHA/NASPA State Immunization Laws/Rules (Jan. 2015) show that 23 states allow pharmacists to immunize in all ages for HPV. Pharmacists have in the last 20 years become the largest body of health professionals to make a significant impact on vaccination uptake. Given our training and accessibility, pharmacists can provide significant impact in the battle against this virus that may cause a number of cancers in both men and women.

Thank you for the opportunity to testify on behalf of HB 676 HD1.

¹ Corpuz, SA. Assessing Human Papillomavirus (HPV) & Human Papillomavirus Vaccination among University of Hawai'i at Manoa and University of Hawai'i at Hilo Freshmen. Office of Public Studies, University of Hawai'i at Manoa



Eric P. Douglas Senior Director, Government Affairs

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Eric.Douglas@CVSHealth.com

Representative Angus McKelvey, Chair Representative Linda Ichiyama, Vice Chair House Committee on Consumer Protection & Commerce

Thursday, February 23, 2017 Conference Room 329; 2:00 PM

RE: HB 676 HD1 - Relating to Health - In Support

Aloha Chair McKelvey, Vice Chair Ichiyama and members of the Committee:

CVS Health is in support of HB 676 HD1 which authorizes pharmacists to administer the human papillomavirus ("HPV"), meningococcal, influenza, or tetanus, diphtheria, and pertussis vaccines to persons between eleven and seventeen years of age pursuant to a prescription issued by the person's primary care provider.

The HPV vaccine prevents human papillomavirus, which is the most common sexually transmitted virus in the U.S. When administered prior to sexual contact (and therefore prior to risk of exposure to the HPV virus) the vaccine can prevent nearly 100% of diseases caused by the four types of HPV targeted by the vaccine, including the two known to cause approximately 70% of cervical cancers. Also, the other specified vaccines in this bill will help reduce incidence of infectious diseases.

CVS Health supports appropriate expansion of professionally licensed pharmacists' scope of practice as it relates to administering these vaccines. This is a legitimate health care need which can be met through Hawaii's licensed pharmacists. We therefore believe HB 676 HD1 has the potential to be a long-term positive for the people of Hawaii.

CVS Health operates as the largest pharmacy chain in Hawaii under our Longs Drugs banner. We are proud to offer our patients and clients in Hawaii a wide range of comprehensive, integrated pharmacy and health operations statewide including: Pharmacy Benefit Management (PBM) services (CVS Caremark), Specialty Pharmacy (CVS/specialty), Mail-Order and Retail Pharmacy (CVS/pharmacy/Longs Drugs), Retail Health Clinics (CVS/minute clinic) and a distribution center.

Thank you for the opportunity to submit testimony.

Respectfully,

w P. Doyla

Eric P. Douglas

From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, February 22, 2017 8:54 AM
То:	CPCtestimony
Cc:	hawaiipharm@gmail.com
Subject:	Submitted testimony for HB676 on Feb 23, 2017 14:00PM

Submitted on: 2/22/2017 Testimony for CPC on Feb 23, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Hiromi Saito	Hawaii Pharmacists Association	Support	No

Comments: Honorable Angus L.K. McKelvey, Chair and members of the Consumer Protection & Commerce Committee My name is Hiromi Saito, I am a registered pharmacist, President of Hawaii Pharmacists Association (HPhA). HPhA supports HB 676, HD1 Relating to Health. Pharmacists are gualified and trained to initiate and administer the human papilloma virus vaccine, meningococcal, influenza, or tetanus, diphtheria & pertussis vaccines to people between eleven and seventeen years of age. Those people who are age of 11 to 17 years are busy with schooling and sports. Pharmacies are open around the clock, including the weekends and holidays. Pharmacists will increase to the access to those vaccines to the younger age people without making special accommodation of their routine of daily life as well as their parents'. Pharmacists should meet all requirements of record keeping and reporting to all governmental agencies and primary care provides. Pharmacists should be allowed to initiate and administer epinephrine and diphenhydramine injectables in case of severe allergic reactions. HPhA supports HB 676, HD1 to improve our state's preventive health services. Thank you for your time Hiromi Saito, RPh, BCACP, CDE, AAHIVP President Hawaii Pharmacists Association

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.



Date: February 22, 2017

- To: The Honorable Angus L.K. McKelvey, Chair
 The Honorable Linda Ichiyama, Vice Chair
 Members of the House Committee on Consumer Protection & Commerce
- From: Jessica Yamauchi, Executive Director, Hawai'i Public Health Institute

Re: Support for HB 676, HD1 Relating to Health

Hrg: February 23, 2017 at 2:00 pm at Capitol Room 329

Thank you for the opportunity to offer testimony in support of HB 676, HD1, Relating to Health.

The Hawai'i Public Health Institute (HIPHI) supports and promotes policy efforts to create a healthy Hawai'i. HIPHI weaves silos into working relationships as an effective network, ensuring that we come together across sectors to advance collaboration and innovation in public health and work towards making Hawai'i the healthiest place on earth.

HB 676, HD1 will allow pharmacists to administer human papillomavirus (HPV) vaccine to persons between eleven and seventeen years of age. According to the Centers for Disease Control and Prevention (CDC), HPV infects approximately 79 million people in the United States with 14 million new cases each year. HPV is a very common virus that can cause cervical cancer in women; penile cancer in men, anal cancer, and cancer of the throat in men and women. The HPV vaccine protects against infection and the cancers caused by HPV. CDC recommends that preteen boys and girls receive the HPV vaccine at age eleven or twelve so they are protected prior to any exposure to the virus.

According to a CDC report in 2014, only 38% of girls and 30.9% of boys in Hawai'i are receiving the HPV vaccine.¹ Allowing pharmacists to administer this immunization will increase access. We ask that you protect our keiki and pass HB 676, HD1.

Thank you for the opportunity to provide testimony.

Jamauch

Jessica Yamauchi, MA Executive Director

¹ https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6429a3.htm



To:	Hawaii State House of Representatives Committee on Commerce and Consumer
	Protection
Hearing Date/Time:	Thursday, February 23, 2017, 2:00 p.m.
Place:	Hawaii State Capitol, Rm. 329
Re:	Testimony of Planned Parenthood Votes Northwest and Hawaii in support of H.B.
	676, HD1

Dear Chair McKelvey and Members of the Committee,

Planned Parenthood Votes Northwest and Hawaii ("PPVNH") writes in support of H.B. 676, HD1 which authorizes pharmacists to prescribe and administer the human papillomavirus ("HPV") vaccine to persons between eleven and seventeen years of age.

PPVNH is dedicated to protecting and promoting the sexual and reproductive health of Hawaii's people and we support H.B. 676 because it will help to prevent HPV-related cancers. In our health centers, we see firsthand the sometimes devastating effects of HPV on our patients. Authorizing pharmacists to provide the HPV vaccination to 11-year-olds corresponds with the recommendations of the CDC and will help to reduce cervical and other cancer rates.

The CDC recommends routine vaccinations for all youth between the ages of 11 and 12. Yet, too few adolescents in Hawaii are receiving HPV vaccines, which results in more cases of HPV and cervical and other cancers and diseases. According to the Centers for Disease Control and Prevention, HPV infects approximately 79 million people in the United States with 14 million new cases each year. HPV is so common that nearly all sexually-active men and women will get at least one type of HPV at some point in their lives. There is no cure for HPV, only treatment for related health problems.

We can do better to protect their health and while we can't protect our youth from everything, we can help to protect them from cancer in the future by passing H.B. 676.

Sincerely, Laurie Field



American Cancer Society Cancer Action Network 2370 Nu`uanu Avenue Honolulu, Hawai`i 96817 808.432.9149 www.acscan.org



House Committee on Consumer Protection and Commerce Representative Angus McKelvey, Chair Representative Linda Ichiyama, Vice Chair Members of the Committee

HB 676 HD1 - RELATING TO HEALTH

Cory Chun, Government Relations Director – Hawaii Pacific American Cancer Society Cancer Action Network

Thank you for the opportunity to provide testimony in support of HB 676, HD1, which allows for a pharmacist to provide Advisory Committee on Immunization Practices (ACIP) recommended vaccines including the human papillomavirus (HPV) vaccine to individuals between the age of 11 to 17 with a valid prescription.

The American Cancer Society Cancer Action Network (ACS CAN) is the nation's leading cancer advocacy organization. ACS CAN works with federal, state, and local government bodies to support evidence-based policy and legislative solutions designed to eliminate cancer as a major health problem.

HPVs are a group of more than 150 related viruses. Each HPV virus in the group is given a number, which is called an HPV type. HPVs are called papilloma viruses because some of the HPV types cause warts or papillomas, which are non-cancerous tumors. But some types of HPV are known for causing cancer. HPV causes most cases of cervical cancer, as well as many vaginal, vulvar, anal, penile, and oropharyngeal cancers (cancers of the throat and tongue).

Some types of genital HPV can cause warts on or around the genitals and anus of both men and women. Women may also have warts on the cervix and in the vagina. Because these genital HPV types rarely cause cancer, they are called "low-risk" viruses. Other types of genital HPV have been linked to cancer in both men and women. These types are called "high-risk" because they can cause cancer. Doctors worry more about the cell changes and pre-cancers linked to these types, because they're more likely to grow into cancers over time. Common high-risk HPV types include HPV 16 and 18.

Infection with HPV is very common. In most people, the body is able to clear the infection on its own. But sometimes, the infection doesn't go away. Chronic, or long-

lasting infection, especially when it's caused by certain high-risk HPV types, can cause cancer over time.

Vaccines are available to help prevent infection by certain types of HPV and some of the cancers linked to those types. All HPV vaccines help prevent infection by HPV-16 and HPV-18. These 2 types cause about 70% of all cervical cancers and precancers, as well as many cancers of the anus, penis, vulva, vagina, and throat. Gardasil 9, which prevents nine different strains of HPV, is now the only vaccine available in the US. Together these types cause about 90% of cervical cancers. HPV vaccine produces the strongest immune response in preteens. To work best, the HPV vaccines should be given at age 11 or 12.

Despite the vaccine's ability to prevent most cervical, vaginal, vulvar, penile, anal, rectal, and oropharyngeal cancers, vaccination rates remain very low. Only 52 percent of girls and 36 percent of boys in Hawaii are fully vaccinated from HPV.

Thank you for the opportunity to provide testimony on this important issue.



From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, February 22, 2017 10:10 PM
То:	CPCtestimony
Cc:	wailua@aya.yale.edu
Subject:	*Submitted testimony for HB676 on Feb 23, 2017 14:00PM*

Submitted on: 2/22/2017 Testimony for CPC on Feb 23, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Wailua Brandman	Hawaii Assoc. of Professional Nurses	Support	No

Comments:

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.





Testimony of Hawaii Immunization Coalition (HIC)

Before: Committee on Consumer Protection & Commerce Rep. Angus L.K. McKelvey, Chair Rep. Linda Ichiyama, Vice Chair

> February 23, 2017 2:00 pm Conference Room 329

Re: HB676HD1 Relating to Health

Chair, Vice Chair, and committee members, thank you for this opportunity to provide testimony on HB 676HD1.

The Hawaii Immunization Coalition **supports this bill with amendments.** This bill would allow pharmacists to administer the human papillomavirus (HPV) vaccine to children between the ages of 11 to 17 years old. We support the bill's intent. It is important to increase the capacity of pharmacists to vaccinate Hawaii teens by expanding their vaccination administration from 14 years old and older to 11 years old and older.

The current CDC Advisory Committee on Immunization Practices (ACIP) recommendation states that the HPV vaccine should be administered at ages 11 or 12 years old. This recommendation is important because:

- For the HPV vaccine to be most effective, it must be given before sexual activity and by middle school, when 4% are already sexually active.
- Currently, Hawaii's HPV vaccination completion rates are 52% for girls and 36% for boys.
- The percentages are extremely low when compared to Hawaii's Tdap and meningococcal vaccination rates, which are at 80% for the same ages.

Our **amendments** suggest the inclusion of the Tdap (tetanus, diphtheria, and pertussis), meningococcal, and influenza (flu) shots, in addition to the HPV vaccine. The inclusion is necessary because:

- These four shots make up the "Adolescent Platform," a series of shots given to adolescents at ages 11 to 12 years old.
- The coalition wants to emphasize that the HPV vaccine should not be set apart from the other adolescent shots.
- Each is an important preventive measure to ensure our adolescents are protected from preventable diseases and some cancers.

Our pharmacists have the training and infrastructure to administer these shots.

- To vaccinate, they all face a rigorous curriculum and certification process.
- Pharmacy locations are ideal for adolescents in our rural communities to access because of convenient evening and weekend times, and flexible walk-in periods.
- Pharmacies are in a position to increase adolescent vaccination uptake in Hawaii.

The Hawaii Immunization Coalition (HIC) is a statewide, community-based non-profit 501(c) 3 coalition of public and private organizations and concerned individuals whose mission is to promote effective strategies to ensure that all Hawaii's families are appropriately vaccinated against vaccine-preventable diseases. Focus: Immunizations across the lifespan. The coalition has been active in Hawaii since the early 1980's and has more than four hundred immunization supporters. Thank you for your consideration.

The Hawaii Immunization Coalition (HIC) is a statewide, community-based 501C (3) non-profit organization working to ensure all of Hawaii's families are appropriately vaccinated against vaccine-preventable diseases www.immunizehawaii.org Tax ID #20-2164266





TO THE HOUSE COMMITTEE ON CONSUMER PROTECTION AND COMMERCE

FROM THE HAWAII PUBLIC HEALTH ASSOCIATION

TESTIMONY ON HOUSE BILL NO. 676, HD1, RELATING TO HEALTH

February 23, 2017, 2:00 PM

To the Honorable Chair McKelvey, Vice Chair Ichiyama, and members of the Committee:

The Hawaii Public Health Association fully supports HB676 HD1, which will allow registered pharmacists trained and certified in vaccine administration to administer the Human Papilloma Virus (HPV) vaccine as well as other adolescent vaccines, including the meningococcal vaccine, influenza vaccine, and the tetanus, diphtheria, and pertussis (Tdap) vaccine to patients 11-14 years of age.

HPV is associated with multiple cancers, including anogenital cancers (cervical, vaginal, vulvar, penile, and anal), oropharyngeal cancer (tonsils and base of the tongue), and genital warts. The HPV vaccination can protect future generations from these cancers which affect 30,800 men and women in the U.S. each year (CDC, U.S. Cancer Statistics, 2006-2010).

Per the latest data from the National Immunization Survey – Teen (CDC, 2015), HPV vaccine series completion rates for girls aged 13–15 years in Hawaii are estimated to be 44% (CI+11) and for males aged 13–15 years, 29% (CI+10). These rates are well below the Healthy People 2020 target of 80% coverage levels for males and females aged 13–15 years, and they trail Hawaii's vaccination rates for other adolescent vaccines, namely Tdap and meningococcal vaccines.

In their 2014 report, the President's Cancer Panel estimated that 53,000 future cancer cases could be prevented if we as a nation were to achieve HPV vaccination rates of 80%. To realize this objective, the Panel recommended increasing the range of venues and providers for HPV vaccination, and specifically pointed to the need for state policies allowing pharmacists to administer vaccines to primary target populations for HPV vaccination; 11-12 year old boys and girls.

Lowering the age at which pharmacists are allowed to administer the HPV vaccine would expand access to this important vaccine because of the convenience and accessibility of pharmacies. With a pharmacy in nearly every community across the state, pharmacists can make a significant impact on our collective efforts to both educate parents and families about the HPV vaccine and increase HPV vaccination rates in Hawaii.

Mahalo for the opportunity to testify, and for your support of adolescent health.

SanHi Government Strategies

Gary M. Slovin Mihoko E. Ito R. Brian Tsujimura a limited liability law partnership c/o Ashford & Wriston • 999 Bishop Street, Suite 1400 Honolulu, Hawaii 96813 (808) 539-0400 governmentaffairs@awlaw.com



gslovin@awlaw.com mito@awlaw.com rtsujimura@awlaw.com

DATE: February 22, 2017

TO: Representative Angus McKelvey Chair, Committee on Consumer Protection and Commerce Submitted Via Capitol Website

RE: H.B. 676, HD1 – Relating to Health Hearing Date: February 23, 2017 at 2:00 pm Conference Room: 329

Dear Chair McKelvey and Members of the Committee on Consumer Protection and Commerce:

We submit this testimony on behalf of Walgreen Co. ("Walgreens"). Walgreens operates stores at more than 8,200 locations in all 50 states, the District of Columbia, and Puerto Rico. In Hawaii, Walgreens now has 20 stores on the islands of Oahu, Maui, and Hawaii.

Walgreens **supports** H.B. 676, HD1, which authorizes pharmacists to prescribe and administer the human papillomavirus vaccine, meningococcal vaccine, influenza vaccine, and tetanus, diphtheria, and pertussis vaccine to persons between eleven and seventeen years of age. Currently, the law permits pharmacists to administer vaccines to persons between the ages of fourteen and seventeen.

HPV infects approximately 20 million people in the United States each year, with approximately 6.2 million new cases diagnosed annually. The Centers for Disease Control and Prevention recommends the HPV vaccine be administered to preteen girls and boys. However, recent data released by the CDC shows that HPV vaccination rates trail behind other teen vaccines in part because the two-part vaccination requires a booster to complete the vaccination series. Lowering the age at which pharmacists are allowed to administer the HPV vaccine would expand access to this important vaccine because of the convenience and accessibility of pharmacies compared to physician offices.

Gary M. Slovin Mihoko E. Ito R. Brian Tsujimura C. Mike Kido Tiffany N. Yajima Matthew W. Tsujimura Page 2

In addition to the HPV vaccine, Walgreens supports the amendments made in the HD1 version of the bill, which added Tdap, meningococcal, and influenza shots as part of the permitted vaccines to be given by pharmacists. Grouping these vaccines together will help improve immunization rates in this age group and make it more convenient to obtain them.

Pharmacists are trained within the scope of their practice to provide injections and vaccinations to children as young as 3 years old. Due to this training, many states have lowered the age above which pharmacists can administer vaccines. Allowing pharmacists to provide this preventative vaccine would align with an already established standard of practice. Accordingly, we encourage this committee to pass the measure.

Thank you for the opportunity to submit testimony in support of this measure.

From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, February 22, 2017 8:34 AM
То:	CPCtestimony
Cc:	gemp2122@gmail.com
Subject:	*Submitted testimony for HB676 on Feb 23, 2017 14:00PM*

Submitted on: 2/22/2017 Testimony for CPC on Feb 23, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Geneve Chong	Individual	Oppose	No

Comments:

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, February 22, 2017 8:26 AM
То:	CPCtestimony
Cc:	rontthi@gmail.com
Subject:	*Submitted testimony for HB676 on Feb 23, 2017 14:00PM*

Submitted on: 2/22/2017 Testimony for CPC on Feb 23, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Ronald Taniguchi, Pharm.D.	Individual	Support	No

Comments:

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, February 22, 2017 7:47 AM
То:	CPCtestimony
Cc:	avaj@hawaiiantel.net
Subject:	Submitted testimony for HB676 on Feb 23, 2017 14:00PM

Submitted on: 2/22/2017 Testimony for CPC on Feb 23, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Avril Jenkins	Individual	Oppose	No

Comments: I don't believe it is within the pharmacist scope to administer medications.

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Feb 23, 2017 Conference Room 329

House Committee on Consumer Protection and Commerce

- To: Rep. Angus McKelvey, Chair Rep. Linda Ichiyama, Vice Chair
- From: Forrest Batz, PharmD Kea'au, HI fbatz@sonic.net

Re: Testimony in Support with Amendments, HB676 HDi, Relating to Health

Aloha Chair McKelvey, Vice Chair Ichiyama, and House Committee members,

Thank you for this opportunity to provide testimony in **support of HB676 HD1** with amendments.

This bill would allow pharmacists to administer the human papillomavirus (HPV) vaccine to children between the ages of 11 to 17 years old. I support the bill's intent to increase the capacity of pharmacists to vaccinate Hawai'i teens by expanding their vaccination administration from 14 years old and older to 11 years old and older.

The current CDC Advisory Committee on Immunization Practices (ACIP) recommendation states that the HPV vaccine should be administered at ages 11 or 12 years old. This recommendation is important because:

- For the HPV vaccine to be most effective, it must be given before sexual activity and by middle school, when 4% are already sexually active.
- Currently, Hawai'i's HPV vaccination completion rates are 52% for girls and 36% for boys.
- The percentages are extremely low when compared to Hawai'i's Tdap and meningococcal vaccination rates, which are at 80% for the same ages.

My **amendments** suggest the inclusion of the Tdap (tetanus, diphtheria, and pertussis), meningococcal, and influenza (flu) shots, in addition to the HPV vaccine. The inclusion is necessary because:

- These four shots make up the "Adolescent Platform," a series of shots given to adolescents at ages 11 to 12 years old.
- The coalition wants to emphasize that the HPV vaccine should not be set apart from the other adolescent shots.
- Each is an important preventive measure to ensure our adolescents are protected from preventable diseases and some cancers.

Our local pharmacists have the training and infrastructure to administer these shots.

- To vaccinate, they all face a rigorous curriculum and certification process.
- Pharmacy locations are ideal for adolescents in our rural communities to access because of convenient evening and weekend times, and flexible walk-in periods.
- Pharmacies are in a position to increase adolescent vaccination uptake in Hawai'i.

Thank you for the opportunity to provide this testimony, mahalo for your consideration.

Committee on Consumer Protection and Commerce Rep. Angus L.K. McKelvey, Chair Rep. Linda Ichiyama, Vice Chair

Rep. Henry J.C. AquinoRep. Chris ToddRep. Ken ItoRep. Ryan I. YamaneRep. Calvin K.Y. SayRep. Beth FukumotoRep. Gregg TakayamaRep. Beth Fukumoto

DATE:Thursday, February 23, 2017TIME:2:00 PMPLACE:Conference Room 329

Dear Chairman McKelvey and Committee Members,

First of all there is no safe vaccine. Why? Everyone's body type differs in reaction to the neuro toxins found in vaccine formulas. Vaccines should be an individual choice not a mandate or herd immunization process. Educational materials provided for the patient should be available and spelled out clearly, NOTING that the pharmaceutical company, the doctor, the pharmacist, health professional are not liable should anything should happen to the patient.

I STRONGLY OPPOSE HB 676 allowing pharmacists to administer vaccines, especially HPV/Gardasil. It is a known fact that HPV/GARDASIL has been banned in Japan, France and Denmark due to adverse reactions to the shot, even death. These governments choose to protect their citizens until the pharmaceuticals get it right. There are 2 known side effects: complex regional pain syndrome (CRPS),1 which causes sensory and motor dysfunction, including severe skin and bone pain; and postural orthostatic tachycardia syndrome (POTS)² which increases heart rate abnormally and causes dizziness, fainting, chest pain, headache and weakness. The third is death.

Spain and the UK have noted adverse reactions and are currently tracking the incidents with reservations.

In response to the pharmacists administering vaccines, I believe they do not have the facility or extensive training to react in case of CRPS or POTS. They will need to call an ambulance and that won't be good for business and may be too late for the patient. I believe a medical facility is the best place for shots to be administered. Let the pharmacist dispense medication and leave the shots to a well trained clinic.

As members of the Committee on Consumer Protection and Commerce you have responsibility to protect the people of Hawaii from known injurious products and services.

Please consider this testimony and my strong OPPPOSITION TO HB676.

Concerned for our Ohana,

Lois Young

From:	mailinglist@capitol.hawaii.gov
Sent:	Tuesday, February 21, 2017 7:47 PM
То:	CPCtestimony
Cc:	clareloprinzi@gmail.com
Subject:	Submitted testimony for HB676 on Feb 23, 2017 14:00PM

Submitted on: 2/21/2017 Testimony for CPC on Feb 23, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
clare loprinzi	Individual	Comments Only	No

Comments: This bill is so dangerous...this vaccine is so dangerous. It makes me wonder who is getting paid to put this bill out there. If you are a representative or senator it is your kuleana to be informed, to be educated. Listen to the experts, Dr. Susanne Humphries, Vaccines Revealed, Kennedy. How could you really be this paid off to do this to our children, line yourself up and go to a doctor if you want this vaccine. Just because the vaccine industry can not be sued for all the effects and deaths from this vaccine does not give you the right to vote for it. It is shameful. As practitioners we say no. It was unethical that Rep Bellatti did not put Dr. Creagons bill that would give educated people the choice to opt out. Wake up...you are paid to be awake. Stop taking corporate monies and killing us.

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

February 21, 2017

Honorable Angus L.K. McKelvey, Chair and members of the Consumer Protection & Commerce Committee

I support HB 676, HD1 Relating to Health. Pharmacists are qualified to initiate and administer the human papilloma virus (HPV) vaccine as well as meningoccal, influenza, or tetanus, diphtheria & pertussis vaccines to persons between eleven and seventeen years of age.

For safety, mandate facility upgrades in the pharmacy to accommodate the recipient should they need to sit or lay due to syncope. Acknowledge that the Pharmacist will require more time to prepare the recipient for immunization of the HPV vaccine. Also, allow the Pharmacist to initiate epinephrine or diphenhydramine by injection for treatment of severe allergic reactions.

The Pharmacist must comply with all state and federal record keeping and reporting requirements including providing documentation to the recipient's primary care provider and entering the information in the appropriate immunization registry.

HB 676, HD1 should also recognize that the Practice of Pharmacy is continually evolving and should declare that Pharmacists are health care Providers who have the authority to provide health care services.

Sincerely,

Ronald K. Okamura, PharmD 876 Curtis Street #3803 Honolulu, HI 96813

I am writing in support of HB 676, HD 1/SB514, which allows pharmacists to administer the human papillomavirus (HPV) vaccine to persons between eleven and seventeen years of age. Each year, approximately 30,700 men and women are diagnosed with cancers caused by HPV.

The HPV vaccine protects against infection and the cancers caused by HPV, which includes most cervical, vaginal, vulvar, penile, anal, rectal, and oropharyngeal cancers. Despite the vaccine's ability to prevent these cancers. vaccination rates remain very low. Only 42 percent of girls and 28 percent of boys in the US are fully vaccinated from HPV.

As an individual that wants to reduce the incidence of cancer in our state, I urge you to support HB 676, HD 1/SB514, which allows pharmacists to administer the human papillomavirus (HPV) vaccine to persons between eleven and seventeen years of age.

Meaghan Pocock Print Name

PEORI City, Hawaii 96782 City Zip Code

mpocock@hawaii.edu Email Address

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Margen Trube Print Nome

Hanolulu	, <u>Hawaii</u>	96813
City		Zip Code

Mtrubea my. hpuedu Email Address

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<u>Robbie Bickerton</u> Print Name <u>Honololu</u>, <u>Hawaii</u> 96816 <u>Zip Code</u>

Email Address

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Maile Heyer Print Name

Honolylu, Hawaii 46816 City Zip Code

mheyer 17@ punahou.edu

Email Address

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Liebreich nnah Print Name

HONOLULU, Hawaii <u>9681</u>0 Zip Code

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Chelsey Stewart Print Name

Honolulu, Hawaii 96817 City Zip Code

CHEWAA 240 gmail. com Email Address

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<u>Ashley Gandiza</u> Print Name Gandiza <u>Kapolei</u>, <u>Hawaii</u> <u>96707</u> Zip Code

<u>Qgandiza@yahoo.com</u> Email Address

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Maile Edwards

Print Name

waianae	, <u>Hawaii</u>	96792
City		Zip Code

maileedwards 2 Egmail.com

Email Address

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Kristy Washizaki

Print Name

HONOIMU,	<u>Hawaii</u>	96813
City		Zip Code

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Dawn Acyuz; Print Name

Honolula Hawaii <u>9682</u> City Zip Code

Acroyagi 100 gmail.com
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April Vidael Print Name

<u>Aailun</u>, <u>Hawaii</u> <u>96734</u> City Zip Code

<u>aprilvidade gmail.com</u> Email Address

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Kamalani Raquering - correa Print Name

Hond 1-4/4	, <u>Hawaii</u>	96815
City		Zip Code

KV bage hawaii edu

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<u>Sean T. Segundo</u> Print Name

Horrolulu, Hawaii <u>96822</u> City Zip Code

<u>Seanseg</u> hausii.edu Email Address

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Frin King

Honolulu, Hawaii <u>16826</u> City Zip Code

evin King @hauasi.edn Email Address

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Kaylee Rafol Print Name

Hovolulu, Hawaii <u>96822</u> City Zip Code

Kayleer 2 @ hawaii.edu (g11 lourcase) Email Address

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Avree Ito-Fijita Print Name

Honolulu, Hawaii 46 CD-City Zip Code

Wree Whanie &

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Elithe- Pete-

Print Name

<u>Flunululu</u>, <u>Hawaii</u> <u>96826</u> City Zip Code

<u>elitherpahawaji.edy</u> Email Address

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<u>Kyan Ell</u> Print Name

City Hawaii <u>96744</u> Zip Code City

RTan, el142@gmail.com Email Address

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Austin Choy Print Name

HONO(UU, Hawaii US21 City Zip Code

<u>acha/20 hawaii, Coly</u> Email Address

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Jorg Klingstiver Print Name

Handlulu, Hawaii 9(872

adorakahawari edu Email Address

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Rachel Davidson Print Name Honolulu, Hawaii 96827 City Zip Code

rd 2580 @ hawaii.edu Email Address

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VIII Chanthasunum

Print Name

 Image: Hawaii
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 City
 Zip Code

VILACO hANNII. Leu

Email Address

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Alva Mae Corpuz

<u>Mililani</u>, <u>Hawaii</u> <u>A6769</u> City Zip Code

avamaeufa nonnii-edu Email Address

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Jeff Charp Print Name

Husulu, Hawaii <u>76816</u> City Zip Code

jesafiriegna.l.com Email Address

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Kriszel Guiarg Print Name

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Kriszeing @ gmail.com Email Address

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Vanessa Medina

HONOLULU, Hawaii 16822 City Zip Code City

Vanlssa medina 95@ yahoo Email Address

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Jerciny L. Print Name

Horolu, Hawaii 96813 City Zip Code

deremyl:@hawaii.ædu Email Address

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Annglyn OlivOras Print Name

Aira	, <u>Hawaii</u>	9670
City		Zip Code

annalyno@hawail.odU Email Address

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Eunice Aponte Print Name

Mahlawa, Hawaii 96786 City Zip Code

<u>eunice.aponte @gmail.com</u> Email Address

From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, February 22, 2017 8:54 AM
То:	CPCtestimony
Cc:	stewart.brady@ymail.com
Subject:	Submitted testimony for HB676 on Feb 23, 2017 14:00PM

<u>HB676</u>

Submitted on: 2/22/2017 Testimony for CPC on Feb 23, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
brady stewart	Individual	Oppose	No

Comments: It is irresponsible and negligent for the government to pursue and press a vaccine known to kill teenagers to be freely administered for the sake of profit. You are aware of the vaccine ramifications yet ignore it for profit. You are making a law to kill innocent teens.

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, February 22, 2017 8:55 AM
То:	CPCtestimony
Cc:	mooninfusion@gmail.com
Subject:	Submitted testimony for HB676 on Feb 23, 2017 14:00PM

<u>HB676</u>

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February 22, 2017

To: Representative Angus McKelvey (Chair of House Consumer Protection & Commerce Committee), Representative Linda Ichiyama (Vice Chair of House CPC Committee) and House CPC Committee members

From: Cheryl Toyofuku

Re: Opposition to HB 676 – Authorizing pharmacists to administer the HPV, meningococcal, influenza, diphtheria, pertussis and tetanus vaccines to ages 11 to 17 **Hearing**: Thursday, February 23, 2017 at 2:00 pm, State Capitol, Room 329

I am a mother, grandmother, registered nurse and health advocate and I strongly oppose HB 676. Here are my reasons:

On the HPV (human papillomavirus) and the HPV vaccine:

- HPV (human papillomavirus) is a commonly sexually transmitted infection and there are more than 100 known HPV types, the majority of which are not harmful. HPV is naturally cleared from the body within 2 years by more than 90 percent of those who become infected.
- The HPV vaccine contains 3 horrific ingredients with potential for long term, serious health consequences: polysorbate 80 (known to cause infertility in mice, anaphylactic-like reactions and immune system problems in humans), aluminum (neuro-toxin) and sodium borate (also known as borax found in rat poison, pesticides, flame retardants and laundry detergent; interferes with sperm production & male fertility when given to animals at high doses). CDC lists the ingredients, but does not list what each ingredient does. This site explains: http://www.offtheradar.co.nz/vaccines/52-gardasil-ingredients.html
- After Gardasil was licensed and three doses recommended for 11-12 year old girls and young women, there were thousands of reports of sudden collapse with unconsciousness within 24 hours: seizures; muscle pain and weakness; disabling fatigue; Guillain Barre Syndrome (GBS); facial paralysis; brain inflammation; rheumatoid arthritis; lupus; blood clots; optic neuritis; multiple sclerosis; strokes; heart and other serious health problems, including death, following receipt of Gardasil vaccine. Using the MedAlerts search engine, as of Sept. 30, 2015, there were a total of <u>37,474</u> vaccine reaction reports made to the federal Vaccine Adverse Events Reporting System (VAERS) associated with Gardasil vaccinations, including <u>209</u> deaths. http://www.nvic.org/Vaccines-and-Diseases/HPV.aspx
- The HPV vaccine may increase the risk of cervical cancer and pre-cancerous lesions in girls who may already have one of the 9 HPV viruses in the vaccine. To clarify, the vaccine actually raises the risk of cervical cancer for anyone exposed to the virus before they were vaccinated. Yet, there are no plans to screen patients to determine if they already have the virus prior to vaccination.
- The vaccine has not been proven to prevent cervical cancer. There are many strains of HPV and the Gardasil HPV vaccine has 9 types. The prescribing information states, "Gardasil-9 has not been demonstrated to protect against disease from vaccine and non-vaccine HPV types to which a person has been previously been exposed through sexual activity." It is also unknown how long the HPV vaccine protection lasts. Consequently, youth entering adulthood, along with their parents are lulled into a false sense of security.
- The HPV vaccine has not been researched and tested in children under 15 years old, yet it is being required for children as young as 11 years old or those entering 7th grade. It is marketed aggressively to preteens and their parents by the vaccine manufacturer, including the lobbying of state legislators to require it for young children to get another vaccine "just in case" in order to prevent cervical cancer. Cervical cancer is most prevalent at 40 years of age or older. Does giving a HPV vaccine to an eleven year old child really lower the incidence of cervical cancer

much later in their lives, when it is unknown how long the vaccine protection lasts? This vaccine is completely unnecessary with serious safety and effectiveness concerns and definitely should not be a school requirement.

On the Diptheria, and Tetanus Toxoids and Acellular Pertussis Vaccine (DTaP):

- The Tripedia DTaP vaccine contains the diphtheria & tetanus toxoids and Petussis antigens, also mercury, aluminum, formaldehyde, gelatin and polysorbate 80.
- According to the product insert, adverse events include idiopathic thrombocytopenic purpura, SIDS, anaphylactic reaction, cellulitis, autism, convulsion/grand mal convulsion, encephalopathy, hypotonia, neuropathy, somnolence, apnea, brachial neuritis and Guillaiin-Barre Syndrome.

On pharmacists prescribing and administering the HPV vaccine to children ages 11 to 17:

- The decision to vaccinate or NOT to vaccinate against HPV is a private medical matter requiring adequate informed consent, accurate education on HPV and the vaccine side effects, benefit & risk information, counseling and follow-up. This is the same for the other vaccines.
- The busy retail setting of many pharmacies will not provide the care and attention during and after vaccine administration compared to a medical office or clinic and without appropriate personnel and equipment to monitor any subsequent vaccine emergency. Busy chains, like CVS can fill several hundreds of prescriptions daily, with potential vaccine administration errors endangering the health of a child, simply for the sake of convenience. This is not quality health care to any of our keiki.
- In the package insert of the HPV-9 vaccine, the manufacturer acknowledges the most common and immediate side effects following the administration of an HPV vaccine: "Because vaccines may develop syncope, sometimes resulting in falling with injury, observation for 15 minutes after administration is recommended. Syncope, sometimes associated with tonic-clonic movements and other seizure-like activity, has been reported following HPV vaccination. When syncope is associated with tonic-clonic movements, the activity is usually transient and typically responds to restoring cerebral perfusion by maintaining a supine or Trendelenberg position." This can cause chaos, liability issues and a potential for a child's life-time of disability.
- The extent of ACPE Immunization training for pharmacists includes: a 20 hour in-home course, two practice injections, barely addresses emergency scenarios or the reporting of adverse reactions to VAERS which is the national database collection of adverse reactions. This should be alarming to pharmacists who have deep concerns regarding the safety and effectiveness of vaccines, especially the new HPV-9 vaccine.

Please **DO NOT pass HB 676** out of your committee and protect our keiki from these questionable vaccinations, especially in a pharmacy setting that is inadequate for the health and well-being of our young children. The increasing vaccine schedule is profitable for the vaccine manufacturers, pediatric associations and its members, pharmacies, etc., but not for our children. Concerns about vaccine safety and effectiveness has escalated over the years, especially since manufacturers and those administering vaccines were freed from all liability resulting from vaccine injury and death.

From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, February 22, 2017 8:59 AM
То:	CPCtestimony
Cc:	tediousmonkey@gmail.com
Subject:	Submitted testimony for HB676 on Feb 23, 2017 14:00PM

<u>HB676</u>

Submitted on: 2/22/2017 Testimony for CPC on Feb 23, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Thaddeus Pham	Individual	Support	No

Comments: Chair McKelvey, Vice Chair Ichiyama, and House Committee members, thank you for this opportunity to provide testimony on HB676 HD1. I support this bill with amendments. This bill would allow pharmacists to administer the human papillomavirus (HPV) vaccine to children between the ages of 11 to 17 years old. I support the bill's intent to to increase the capacity of pharmacists to vaccinate Hawai'i teens by expanding their vaccination administration from 14 years old and older to 11 years old and older. The current CDC Advisory Committee on Immunization Practices (ACIP) recommendation states that the HPV vaccine should be administered at ages 11 or 12 years old. This recommendation is important because: • For the HPV vaccine to be most effective, it must be given before sexual activity and by middle school, when 4% are already sexually active. • Currently, Hawai'i's HPV vaccination completion rates are 52% for girls and 36% for boys. • The percentages are extremely low when compared to Hawai'i's Tdap and meningococcal vaccination rates, which are at 80% for the same ages. My amendments suggest the inclusion of the Tdap (tetanus, diphtheria, and pertussis), meningococcal, and influenza (flu) shots, in addition to the HPV vaccine. The inclusion is necessary because: • These four shots make up the "Adolescent Platform," a series of shots given to adolescents at ages 11 to 12 years old. • The coalition wants to emphasize that the HPV vaccine should not be set apart from the other adolescent shots. • Each is an important preventive measure to ensure our adolescents are protected from preventable diseases and some cancers. Our local pharmacists have the training and infrastructure to administer these shots. • To vaccinate, they all face a rigorous curriculum and certification process. • Pharmacy locations are ideal for adolescents in our rural communities to access because of convenient evening and weekend times, and flexible walk-in periods. • Pharmacies are in a position to increase adolescent vaccination uptake in Hawai'i. Thank you for your consideration.

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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> Robyn Rector 1105 Kahoa Rd Hilo, HI 96720

HB 676 - Relating to Health

Chair McKelvey, Vice Chair Ichiyama and Members of the committee:

I am writing to offer **strong support** of HB 676 that will allow pharmacists to administer the Human Papilloma Virus vaccine in 11-14 year olds under a prescription issued by the patient's primary care provider.

Pharmacists are vaccination certified via the ACPE approved program sponsored by the American Pharmacists Association (APHA). Immunization administration is considered a basic skill of registered pharmacists. All immunizing pharmacists and student pharmacists must also be concurrently certified in Basic Life Support (BLS) which allows for cardiopulmonary resuscitation (CPR) for adults, children and infants.

Pharmacists continue to be the most accessible health professional to the public via their availability in community pharmacies and are also educators and immunization advocators. In the last 20 years, pharmacists have made the largest impact on vaccination uptake.

By Patricia Jusczak

HB 676 - Relating to Health

Chair McKelvey, Vice Chair Ichiyama and Members of the committee:

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By Christopher J. Diaz

HB 676 - Relating to Health

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> By Nicholas A. Tsoi

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Pharmacists continue to be the most accessible health professional to the public via their availability in community pharmacies and are also educators and immunization advocators. In the last 20 years, pharmacists have made the largest impact on vaccination uptake.

By Dr. Chad Kawakami

HB 676 - Relating to Health

Chair McKelvey, Vice Chair Ichiyama and Members of the committee:

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Pharmacists continue to be the most accessible health professional to the public via their availability in community pharmacies and are also educators and immunization advocators. In the last 20 years, pharmacists have made the largest impact on vaccination uptake.

Chad K Kowakon 2/22/2017

CPCtestimony

From: Sent: To: Subject: Rise Doi on behalf of Rep. Linda Ichiyama Wednesday, February 22, 2017 10:33 AM ichiyama2 - Brandon FW: Testimony in support of HB676

From: Ashlyn Tom [mailto:atom2@jhu.edu] Sent: Wednesday, February 22, 2017 9:49 AM To: Rep. Angus McKelvey ; Rep. Linda Ichiyama Subject: Testimony in support of HB676

Aloha Chair McKelvey, Vice Chair Ichiyama, and House Committee members,

Thank you for this opportunity to provide testimony on HB676 HD1.

I support this bill with amendments. This bill would allow pharmacists to administer the human papillomavirus (HPV) vaccine to children between the ages of 11 to 17 years old. I support the bill's intent to to increase the capacity of pharmacists to vaccinate Hawai'i teens by expanding their vaccination administration from 14 years old and older to 11 years old and older.

Studies have suggested that allowing vaccination through pharmacies may improve opportunities for children to obtain needed vaccination. Recent research I assisted with at the University of Hawaii Cancer Center which was sponsored by the NCI and found that one of the major barriers to vaccination for physicians were the multiple dose schedule in HPV vaccination. This burden can be improved by expanding pharmacists' rights to administer vaccination.

The current CDC Advisory Committee on Immunization Practices (ACIP) recommendation states that the HPV vaccine should be administered at ages 11 or 12 years old. This recommendation is important because:

- For the HPV vaccine to be most effective, it must be given before sexual activity and by middle school, when 4% are already sexually active.
- Currently, Hawai'i's HPV vaccination completion rates are 52% for girls and 36% for boys.
- The percentages are extremely low when compared to Hawai'i's Tdap and meningococcal vaccination rates, which are at 80% for the same ages.

My amendments suggest the inclusion of the Tdap (tetanus, diphtheria, and pertussis), meningococcal, and influenza (flu) shots, in addition to the HPV vaccine. The inclusion is necessary because:

- These four shots make up the "Adolescent Platform," a series of shots given to adolescents at ages 11 to 12 years old.
- Each is an important preventive measure to ensure our adolescents are protected from preventable diseases and some cancers.

Our local pharmacists have the training and infrastructure to administer these shots.

- To vaccinate, they all face a rigorous curriculum and certification process.
- Pharmacy locations are ideal for adolescents in our rural communities to access because of convenient evening and weekend times, and flexible walk-in periods.
- Pharmacies are in a position to increase adolescent vaccination uptake in Hawai'i.

Thank you for your consideration.

Mahalo,

Ashlyn Tom

MPH Candidate Class of 2017 Johns Hopkins Bloomberg School of Public Health Member of the Hawaii Vaccine Preventable Cancers Workgroup E-mail: <u>atom2@jhu.edu</u> Tel: 808-392-5938

CPCtestimony

From: Sent: To: Subject: Rise Doi on behalf of Rep. Linda Ichiyama Wednesday, February 22, 2017 10:33 AM ichiyama2 - Brandon FW: HB 676

From: Celeste Baldwin [mailto:cbaldwin@hawaii.edu] Sent: Wednesday, February 22, 2017 10:05 AM To: Rep. Linda Ichiyama Subject: HB 676

Chair McKelvey, Vice Chair Ichiyama, and House Committee members, thank you for this opportunity to provide testimony on HB676 HD1.

Aloha Committee Members,

I support this bill with amendments. This bill would allow pharmacists to administer the human papillomavirus (HPV) vaccine to children between the ages of 11 to 17 years old. I support the bill's intent to to increase the capacity of pharmacists to vaccinate Hawai'i teens by expanding their vaccination administration from 14 years old and older to 11 years old and older.

As a Pediatric Advanced Practice RN and Nursing Instructor in the UH system, I find this bill to be a tremendous asset to preventing cervical cancer in our youth. These HPV vaccines, now only require two shots. They should be given between 9-12 in order for them to work. The older the child is the less effect the shots will have in preventing HPV from causing cervical, tonsillar, and rectal cancers.

The current CDC Advisory Committee on Immunization Practices (ACIP) recommendation states that the HPV vaccine should be administered at ages 11 or 12 years old. This recommendation is important because:

- For the HPV vaccine to be most effective, it must be given before sexual activity and by middle school, when 4% are already sexually active.
- Currently, Hawai'i's HPV vaccination completion rates are 52% for girls and 36% for boys.
- The percentages are extremely low when compared to Hawai'i's Tdap and meningococcal vaccination rates, which are at 80% for the same ages.

My amendments suggest the inclusion of the Tdap (tetanus, diphtheria, and pertussis), meningococcal, and influenza (flu) shots, in addition to the HPV vaccine. The inclusion is necessary because:

- These four shots make up the "Adolescent Platform," a series of shots given to adolescents at ages 11 to 12 years old.
- The coalition wants to emphasize that the HPV vaccine should not be set apart from the other adolescent shots.
- Each is an important preventive measure to ensure our adolescents are protected from preventable diseases and some cancers.

Our local pharmacists have the training and infrastructure to administer these shots.

- To vaccinate, they all face a rigorous curriculum and certification process.
- Pharmacy locations are ideal for adolescents in our rural communities to access because of convenient evening and weekend times, and flexible walk-in periods.
- Pharmacies are in a position to increase adolescent vaccination uptake in Hawai'i.

Thank you for your consideration. Mahalo, Celeste

From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, February 22, 2017 10:47 AM
То:	CPCtestimony
Cc:	michael.r.hamilton@kp.org
Subject:	*Submitted testimony for HB676 on Feb 23, 2017 14:00PM*

<u>HB676</u>

Submitted on: 2/22/2017 Testimony for CPC on Feb 23, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Michael Hamilton	Individual	Support	No

Comments:

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> <mark>By</mark> Wilson I. Datario

HB 676 - Relating to Health

Chair McKelvey, Vice Chair Ichiyama and Members of the committee:

I am writing to offer **strong support** of HB 676 that will allow pharmacists to administer the Human Papilloma Virus vaccine in 11-14 year olds under a prescription issued by the patient's primary care provider.

Pharmacists are vaccination certified via the ACPE approved program sponsored by the American Pharmacists Association (APHA). Immunization administration is considered a basic skill of registered pharmacists. All immunizing pharmacists and student pharmacists must also be concurrently certified in Basic Life Support (BLS) which allows for cardio-pulmonary resuscitation (CPR) for adults, children and infants.

Pharmacists continue to be the most accessible health professional to the public via their availability in community pharmacies and are also educators and immunization advocators. In the last 20 years, pharmacists have made the largest impact on vaccination uptake.


From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, February 22, 2017 11:59 AM
То:	CPCtestimony
Cc:	zchisty@hotmail.com
Subject:	Submitted testimony for HB676 on Feb 23, 2017 14:00PM

Submitted on: 2/22/2017 Testimony for CPC on Feb 23, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
zeshan chisty	Individual	Support	No

Comments: I support this bill

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.



Testimony in SUPPORT of HB676, HD1 Committee on Consumer Protection & Commerce February 23, 2017 Conference Room 329, 2:00 PM

> Submitted by: Kate Bryant-Greenwood 847 19th Avenue Honolulu, HI 96816

I am in support of H.B. 676 as it seeks to improve human papillomavirus (HPV) vaccination rates in Hawaii by increasing overall access to the HPV vaccine and potentially increasing available vaccine supply for the pediatric population. Increasing HPV vaccination rates in Hawaii will reduce the incidence of devastating HPV-related cancers.

According to the Centers for Disease Control, HPV is a group of more than 150 related viruses. Some HPV types can lead to cancer of the mouth/throat, anus/rectum, penis, as well as cervical, vaginal, and vulvar HPV cancers. These cancers are devastating to both men and women are 100% preventable.

I was diagnosed with HPV-related invasive cervical cancer in 2007 at the age of 30. The HPV vaccine was not available to me as it was only on the market in 2006 and I was too old to receive it. I was in graduate school, engaged to be married and had not yet had children. I had had regular yearly cervical cancer screenings (Pap tests) every year since I turned 18. My life was turned upside down with multiple surgeries, scans, and the fear of having to undergo chemotherapy and radiation treatments. The invasive cancer was surgically removed and thankfully the margins were clear, however, this surgical treatment left me with little to no cervix. The cervix plays an important role in conceiving and carrying a baby to full term. Due to this HPV-related invasive cancer I had to undergo a major surgery to reinforce my cervix and underwent 2 years of fertility treatment. The fertility treatments alone involved 4 attempts at artificial insemination, multiple hormone stimulating drugs, and a round of intensive in-vitro fertilization. My husband and I were blessed with conceiving and carrying to full term a beautiful baby girl. I then elected to have a radical hysterectomy to ensure the HPV-related cervical cancer would not return.

Luckily my story had a happy ending. There are many others who do not have such a happy ending after being diagnosed with an HPV-related cancer. There are those women whose cervical cancers are diagnosed at a later stage and they require chemotherapy and radiation treatments which cause multiple, often devastating long-term side effects. The cancer treatments cause infertility or patients must opt to have complete hysterectomies in order to survive. Those patients diagnosed with head and neck cancers (oropharyngeal cancers) must undergo brutal radiation treatments that leave them with major live-changing taste, saliva, and speech problems. There are also the patients whose HPV-related cancers do not respond to multiple lines of therapy and they die from these cancers.

As these HPV-related diseases are now wholly preventable and the HPV vaccination rates in Hawaii need significant improvement, I fully support this bill. We need to vaccinate our children so they do not suffer needlessly from these destructive cancers as adults.



From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, February 22, 2017 12:48 PM
То:	CPCtestimony
Cc:	michael.r.hamilton@kp.org
Subject:	Submitted testimony for HB676 on Feb 23, 2017 14:00PM

Submitted on: 2/22/2017 Testimony for CPC on Feb 23, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Michael Hamilton	Individual	Support	No

Comments: I support this bill with amendments. This bill would allow pharmacists to administer the human papillomavirus (HPV) vaccine to children between the ages of 11 to 17 years old. I support the bill's intent to to increase the capacity of pharmacists to vaccinate Hawai'i teens by expanding their vaccination administration from 14 years old and older to 11 years old and older.

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Testimony Presented Before the House Committee On Consumer Protection and Commerce (CPC) Thursday, Feb. 23, 2017 at 2 pm

> By Anne H. Tanouye PO Box 1045 Keaau, HI 96749 annetano@hawaii.edu

HB 676 - Relating to Health

Chair McKelvey, Vice Chair Ichiyama and Members of the committee:

I am writing to offer **strong support** of HB 676 that will allow pharmacists to administer the Human Papilloma Virus vaccine in 11-14 year olds under a prescription issued by the patient's primary care provider.

Pharmacists are vaccination certified via the ACPE approved program sponsored by the American Pharmacists Association (APHA). Immunization administration is considered a basic skill of registered pharmacists. All immunizing pharmacists and student pharmacists must also be concurrently certified in Basic Life Support (BLS) which allows for cardio-pulmonary resuscitation (CPR) for adults, children and infants.

Pharmacists continue to be the most accessible health professional to the public via their availability in community pharmacies and are also educators and immunization advocators. In the last 20 years, pharmacists have made the largest impact on vaccination uptake.

Thank you for allowing me to testify.



From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, February 22, 2017 3:07 PM
То:	CPCtestimony
Cc:	foodsovereigntynow@gmail.com
Subject:	Submitted testimony for HB676 on Feb 23, 2017 14:00PM

Submitted on: 2/22/2017 Testimony for CPC on Feb 23, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Mitsuko Hayakawa	Individual	Oppose	No

Comments: I am a mother of three children and I am deeply concerned about the safety of the HPV vaccine. Currently in Japan, there is a class action lawsuit against the Japanese government and the manufacturers of the HPV vaccines. Thousands of young women claim this vaccines has caused serious side effects here in the United States as well. Before we allow this vaccine to be administered more freely, please take the side of caution and limit its use. I urge you to OPPOSE HB676. Mahalo. Mitsuko Hayakawa Pearl City Resident

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From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, February 22, 2017 2:47 PM
То:	CPCtestimony
Cc:	leivoss@gmail.com
Subject:	Submitted testimony for HB676 on Feb 23, 2017 14:00PM

Submitted on: 2/22/2017 Testimony for CPC on Feb 23, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Sidney Voss	Individual	Oppose	No

Comments: HB676 Health; Authorizes Pharmacists to administer the Human Papillomavirus Vaccine, meningococcal, influenza, or tetanus, diphtheria, and pertussis vaccines to children between eleven and seventeen years of age. I strongly oppose HB676. Doctors hold an M.D. (Doctor of Medicine) are experts in the diagnosis and treatment of human illnesses. Pharmacists have a Doctor of Pharmacy degree. Pharmacists are experts in dispensing and managing medications. They teach people about the proper use of their medication and its potential side effects. The ability to authorize pharmacists to prescribe and ADMINISTER the HPV to persons between eleven and seventeen is SCARY!!! How in the world is it okay for an individual to get vaccinated without an expert in the diagnosis of human illness that can address any life threatening complications? I recently was informed at my child's pediatricians office that due to the possible side effects of receiving the Human Papillomavirus Vaccine that my 11 year old child would need to sit for 20 minutes following the vaccination. That there was a risk for fainting, seizures, or other complications to occur. How can a pharmacists address the serious needs of the child that faints, has seizures, or any other complication? This bill is completely unsafe!!!. I am concerned about the public health and safety of the members of our community, especially our Keiki! There are MANY proven studies that show the toxic ingredients in vaccines. Sidney Voss

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From:	mailinglist@capitol.hawaii.gov	
Sent:	Thursday, February 23, 2017 7:50 AM	
То:	CPCtestimony	
Cc:	nakoam@aol.com	
Subject:	*Submitted testimony for HB676 on Feb 23, 2017 14:00PM*	

Submitted on: 2/23/2017 Testimony for CPC on Feb 23, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Maly Nakoa	Individual	Oppose	No

Comments:

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Testimony Presented Before the House Committee On Consumer Protection and Commerce (CPC) Thursday, Feb. 23, 2017 at 2 pm

Wesley Sumida, Pharmacist

HB 676 - Relating to Health

Chair McKelvey, Vice Chair Ichiyama and Members of the Committee:

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Pharmacists continue to be the most accessible health professional to the public via their availability in community pharmacies and are also educators and immunization advocators. In the last 20 years, pharmacists have made the largest impact on vaccination uptake.

Thank you for allowing me to testify.

LATE

- To: The House Committee on Consumer Protection and Commerce February 23, 2017, Capitol Room 329 at 2pm
- RE: Testimony to Strongly OPPOSE HB676 HD 1

SAFETY, SAFETY, SAFETY.

This should first and foremost, be this House Committee on Consumer Protection and Commerce's main concern. I practice pharmacy in a retail setting and have done so for many years. I am sure all of the pharmacy businesses testifying here today are appreciative of the high reimbursement rates they receive per year. It is a multimillion dollar business. However, with the lowering of the age groups to 11 years old, AND by adding more vaccines for pharmacists' administration, the risk for vaccine injury and emergency scenarios in the pharmacy greatly increases liability. Most importantly, it puts the safety and well-being of the child most at risk, all for the sake of a little convenience.

In considering HB676 HD1, this committee must decide whether the safety of our children is more or less important than the convenience and access that this bill offers. Of course, parents and children can appreciate the ease of access and elimination of a doctor's appointment when getting a vaccination at the pharmacy after hours. However, the pharmacy setting is a BUSINESS. It is filled with noise, chaos and people in a public place. It is not designed to accommodate an emergency especially if the pharmacists are minimally experienced in dealing with emergencies in this type of setting. Physician's offices, on the other hand, have medical staff available, a physician, emergency equipment available and medication for emergencies.

CMS, the Centers for Medicare and Medicaid Services, requires its providers provide Quality of Care and offer incentives for varying degrees of quality provided. Administering a vaccine is a medical billable service, however, HB 676HD1 offers convenience and access without regard to quality or care to the child. Pharmacies are not the child's medical home. Pharmacists do not know the health or medical history of the child or the medication list. The pharmacist does not know anything about the child, yet HB 676 HD1 proposes that a medical procedure, i.e. a vaccination be performed with little to no information about the child.

This activity borders on negligence.

As you review the testimonies for this bill, all of the proponents ONLY emphasize convenience and access to vaccines through pharmacists' administration. Yet, not one single testimony, not even from the Department of Health, mentions any concerns about the safety for our children in terms of potential adverse reactions that may occur in the pharmacy or emergency situations that such as syncope, or fainting, from the HPV vaccine, which is common.

ACPE IMMUNIZATION TRAINING:

HB676 HD 1 is based on the premise that all pharmacists have the basic knowledge and skills when administering vaccines. I can tell you this is not true. Most pharmacists are taught basic immunology, however, very few are aware of the adverse reactions of vaccines they administer other than what is printed on the Vaccine Information Statement (VIS).

Even fewer pharmacists are aware of the side effects of the inactive ingredients that are INJECTED into

your child including aluminum, mercury, fetal cells, insect cell proteins, egg proteins, chick embryo culture, human lung fibroblasts, formaldehyde, cow extract, monkey kidney cells, detergent, MSG, and E.coli.¹

Antigens such as recombinant DNA, viral or bacterial can cause an immune response as well as the protein types of inactive ingredients. However no one can predict your child's reaction to any particular protein, which may cause mild eczema, rash or severe debilitating auto-immune disease.

Testimony from the UH Hilo Pharmacy school stated that they "provide training in immunization administration" via the certified American Pharmacists Association, (APhA). However, this is the equivalent of teaching first year pharmacy students how to read CDC's immunization charts on administration of the vaccine.²

APhA provides ACPE Immunization training as a 12 hour in-home course and one live 8 hour session that glosses over the in-home materials. During this live class, only TWO practice injections, one subcutaneous and one intramuscular, are required to receive credit for the ACPE training in addition to passing an in-home online test. This is the extent of the immunization training.

The training minimally reviews the adverse reporting events to VAERS, the national database collecting adverse reactions. Every vaccine product just as every drug comes with a risk. However, the 1986 National Childhood Vaccine Injury Act gives all vaccine manufacturers immunity from any civil litigation from any vaccine injury. Patients cannot sue the manufacturer, or anyone else for a faulty vaccine product resulting in a vaccine injury. No other industry in the United States, except for the vaccine manufacturers, is indemnified by the US government against any vaccine injury claims related to vaccine products.

Also, ACPE Immunization training barely addresses emergency scenarios or any proper procedures for any adverse event, only that Epi-pens should be available for patients experiencing anaphylaxis. Yet, despite minimal CPR and OHSA training requirements, pharmacists in retail settings are not equipped to address adverse reactions or emergency situations because their primary practice does NOT normally involve emergencies.

Dangers of HPV:

After receiving the Gardasil vaccine, 11-12 year old girls and young women who received 3 doses can suddenly collapse, and become unconsciousness within 24 hours, have seizures; muscle pain and weakness; disabling fatigue; Guillain-Barre Syndrome (GBS); facial paralysis; brain inflammation; rheumatoid arthritis; lupus; blood clots; optic neuritis; multiple sclerosis; strokes; heart and other serious health problems, including death following vaccination.³

Merck, the HPV-9 vaccine manufacturer, acknowledges in its package insert the most common and immediate side effects following the administration of an HPV vaccine is syncope, sometimes resulting in falling with injury. Syncope, sometimes associated with tonic-clonic movements and other seizure-like activity, has been reported following HPV vaccination.⁴

To be honest, working in a busy pharmacy, most likely, I would not be able to give your child the attention he or she deserves especially when I have to multi-task, answer the phones, fill prescriptions,

counsel patients, answer questions, while at the same time keeping an eye on your child for any type of anaphylactic reaction or worse yet, passing out on the floor due to syncope from an HPV vaccination.

If a child faints as a result of syncope in a retail setting, the minimal training and lack of emergency care experience does not support the concept of child safety, and well-being. A retail setting is not the ideal place for any vaccination. One emergency is one too many!

Lack of Transparency:

Last year, SB2316⁵, a bill related to mandatory vaccination for all children between the ages of 11 and 14 with at least 1 dose of HPV before entering the 7th grade, authorizing a pharmacist to do this for this age group.

The Department of Health's, (DOH) testimony⁶ dated Feb 2, 2016, **OPPOSED** the HPV vaccinations for 11 to 14 year olds for two reasons,

- 1) SB 2316 was not aligned with HAR 11-157¹ related to 7th grade immunization requirements because it conflicted with the CDC recommendations, and,
- 2) The DOH had concerns about the "potential adverse effect it may have on the medical home for children in the 11 to 13 year-old age group and instead recommended for a discussion between family physician organizations and pharmacists to "most effectively preserve the child's medical home."⁷

It is obvious why the DOH opposed SB2316 for its conflicts with HAR 11-157. However, it is unclear why the DOH's concerns in 2016 bill related to the "potential adverse effect" on the child's medical home is no longer an issue in 2017. The language is the same in both bills as well as the proposed process. This year the focus is on vaccination rates and opportunities. Again, there is NO concern for the safety and well-being of the child receiving vaccinations in the pharmacy setting.

At the February 7, 2017 hearing, the Chair of the House Committee on Health, Rep. Belatti unilaterally, amended HB 676 to include vaccinations for Tdap, MCV4 and influenza in addition to the HPV for 11 to 14 year olds. There was no public discussion or testimony on these vaccines prior to voting. No one testified to this as an amendment nor was it included in any written testimony. This is not how these bills should be passed. It is completely irresponsible and a gross disservice to the children of this state.

Forcing Pharmacists to vaccinate young children, for whom there is no medical or health related information, HB676 HD 1, is an unconscionable and irresponsible bill. I do not support HB676 HD 1. I have a duty and a conscience to do what is right for all children, including those who are not mine.

HB676 HD 1 is not right for any child in any pharmacy.

Thank you,

Teresa Ocampo, RPh, MBA

⁴ CBER/FDA (2016) *HIGHLIGHTS OF PRESCRIBING INFORMATION* for Gardasil 9, Human Papillomavirus 9-Valent Vaccine, Available at: http://www.fda.gov/downloads/BiologicsBloodVaccines/Vaccines/ApprovedProducts/UCM426457.pdf (Accessed: 5 February 2017).

⁵ https://legiscan.com/HI/bill/SB2316/2016

7 Ibid.

¹ https://www.cdc.gov/vaccines/pubs/pinkbook/index.html

² https://www.cdc.gov/vaccines/schedules/downloads/child/0-18yrs-combined-schedule-bw.pdf

³ Human Papillomavirus (HPV) information - diseases and vaccines (2012) Available at: http://www.nvic.org/Vaccines-and-Diseases/HPV.aspx (Accessed: 5 February 2017).

⁶ http://www.capitol.hawaii.gov/Session2016/Testimony/SB2316 TESTIMONY CPH 02-02-16.PDF, p.2.



From:	mailinglist@capitol.hawaii.gov
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Cc:	kalma.keiko@gmail.com
Subject:	Submitted testimony for HB676 on Feb 23, 2017 14:00PM

Submitted on: 2/22/2017 Testimony for CPC on Feb 23, 2017 14:00PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Kalma Wong	Individual	Oppose	No

Comments: The retail pharmacy is an inappropriate location to administer vaccines. It is impossible for the employees of a retail pharmacy to know a person's medical history. It is also very difficult (and impossible during busy periods in the store) to properly monitor the person for reactions after the vaccine is given. Although the bill may increase access to vaccines, it does not increase access to care. In fact, it does just the opposite.

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.