

Waterbury Medical Association

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Statement concerning

Senate Bill 67 – An Act Concerning the Authority and Responsibilities of Advanced Practice Registered Nurses

and

House Bill 5129 – An Act Concerning the Administration of Vaccines by Pharmacists and Medical Assistants and the Listing of Certified Medical Assistants

**Public Health Committee
February 16, 2016**

This statement is submitted on behalf of the Waterbury Medical Association concerning House Bill 5129 – An Act Concerning the Administration of Vaccines by Pharmacists and Medical Assistants and the Listing of Certified Medical Assistants and Senate Bill 67 – An Act Concerning the Authority and Responsibilities of Advanced Practice Registered Nurses.

Senate Bill 67 makes several changes to the scope of practice for APRNs. We were surprised at the introduction of this bill as it seems as if it should have gone through the scope of practice process pursuant to CGS Sec. 19a-16d. This procedure was established within the Department of Public Health in order to thoroughly scrutinize changes to scope of practice. This process gives all sides the opportunity to introduce impact statements and evidence. Given the massive amount of changes Senate Bill 67 attempts to make, we feel that it must go through the proper process so that we have the time to completely examine the changes that are being proposed. We respectfully urge this committee to reject this bill so that it can go through the proper process and the proposed changes can be fully evaluated.

We would like to offer our support for some portions of House Bill 5129. House Bill 5129 would allow medical assistants (MAs) to administer vaccines and allow pharmacists to administer the flu vaccine to children. We support the delegation of administering vaccines to appropriately trained MAs who are adequately trained and educated and certified by a nationally accredited organization. This support is due to the fact that MAs are supervised and directed by an onsite physician. Allowing MAs to administer vaccines would allow physician offices to serve more patients in need of health care. Conversely though, we cannot support the administration of the flu vaccine to children by pharmacists. We understand that pharmacists are currently administering the flu vaccine to adults which we do not support and we do not now support it for children. Our primary concern is the fragmenting of children's health care. We do not believe that it makes sense for children to be taken to multiple providers for the same service that can be received by their primary care provider. This is already happening for adults who sometimes receive a vaccine from their family physician and then receive it again from their pharmacist. If the legislature does approve the ability for pharmacists to administer the flu vaccine to children, they must be required to notify the patient's primary care physician if they have one or process the information through the vaccine database for the kids.

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