

Department of Legislative Services
Maryland General Assembly
2012 Session

FISCAL AND POLICY NOTE

Senate Bill 408 (Senator Dyson)
Education, Health, and Environmental Affairs

Pharmacists - Administration of Vaccinations - Expanded Authority

This bill expands the authorization for pharmacists to administer vaccinations to individuals who are at least nine years old to include a vaccination listed in the U.S. Centers for Disease Control and Prevention's (CDC) recommended immunization schedule or recommended in the CDC's *Health Information for International Travel*. Vaccinations must be administered in accordance with regulations adopted by the State Board of Pharmacy, in consultation with the Department of Health and Mental Hygiene (DHMH).

Fiscal Summary

State Effect: Any revision of State Board of Pharmacy regulations can be handled with existing budgeted resources.

Local Effect: None.

Small Business Effect: Meaningful to small business pharmacies from additional reimbursement for administration of vaccinations.

Analysis

Current Law: The practice of pharmacy includes administering vaccinations in specified circumstances. Per Chapter 559 of 2011, licensed pharmacists may administer an influenza vaccination to an individual who is at least nine years old, provided the vaccination is administered in accordance with regulations adopted by the State Board of Pharmacy in consultation with DHMH. A pharmacist must report any influenza

vaccination administered to an individual age 9 to 18 to the Maryland Immunization Registry.

Pharmacists may administer to adults (with a prescription from a physician) a vaccination for pneumococcal pneumonia, herpes zoster, or any other vaccination that has been determined by the State Board of Pharmacy, with the agreement of the State Board of Physicians and the State Board of Nursing, to be in the best health interests of the community.

To qualify to administer vaccinations, a pharmacist must submit a registration form to the State Board of Pharmacy that verifies that the pharmacist has successfully completed a certification course approved by the board that included instruction in the guidelines and recommendations of the CDC regarding vaccinations and be certified in basic cardiopulmonary resuscitation through in-person classroom instruction.

The State Board of Pharmacy, the State Board of Physicians, and the State Board of Nursing must meet annually to jointly develop, adopt, and review regulations to provide for patient safety regarding vaccinations administered by pharmacists. The State Board of Pharmacy must set reasonable fees for the administration of vaccinations.

Background: As of December 2011, 2,727 pharmacists were approved by the State Board of Pharmacy to administer vaccinations.

CDC's *Recommended Immunization Schedule for Persons Aged 7 Through 18 Years – United States, 2012* includes tetanus, diphtheria, and pertussis (Tdap); human papillomavirus vaccine (HPV); meningococcal; influenza; pneumococcal; Hepatitis A; Hepatitis B; inactivated poliovirus; measles, mumps, and rubella (MMR); and varicella (chicken pox). CDC's *Recommended Adult Immunization Schedule – United States, 2012* includes influenza; Tdap; varicella; HPV; zoster; MMR; pneumococcal; meningococcal; Hepatitis A; and Hepatitis B.

According to CDC, only two vaccinations are *required* for travel – yellow fever for travel to certain countries in sub-Saharan Africa and tropical South America and meningococcal vaccination for travel to Saudi Arabia during the Hajj (or pilgrimage to Mecca). Other vaccinations are recommended by CDC in its publication *Health Information for International Travel* (commonly known as *The Yellow Book*) to protect international travelers from illness and prevent the importation of infectious diseases across international borders. The specific vaccinations recommended depend on the traveler's destination and other factors. The most common vaccines considered for travelers include Hepatitis A, Hepatitis B, Japanese encephalitis (JE), meningococcal, polio (adult booster), rabies, typhoid fever, and yellow fever.

Additional Information

Prior Introductions: None.

Cross File: HB 561 (Delegate Hubbard, *et al.*) – Health and Government Operations.

Information Source(s): U.S. Centers for Disease Control and Prevention, Department of Health and Mental Hygiene, Department of Legislative Services

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