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Health and Government Operations Committee



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THE MARYLAND HOUSE OF DELEGATES ANNAPOLIS, MARYLAND 21401

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Testimony in SUPPORT of HB 1232 - Health Occupations - Pharmacists - Administration of Vaccines

Summary: HB 1232 continues current practice in Maryland by making permanent what we have already authorized and seen implemented in our pharmacies since August of 2020 by continuing our current policy of allowing pharmacists to administer routine vaccinations to children ages 3 to 17.

Overview: During the Coronavirus pandemic, the federal government passed addendums to the <u>Public Readiness and Emergency Preparedness (PREP) Act</u> that, among other things, allowed licensed, trained pharmacists to administer FDA-approved vaccinations that follow the CDC's schedule of vaccines to children ages 3-17.

Since 2020, Marylanders have been able to bring their children to their pharmacist for routine childhood vaccinations. This provision of the PREP Act is set to expire May 1, however—HB 1232 merely makes this change permanent, as **43** other states have already done.

Many of these pharmacies are located with high social vulnerability—according to a report by the Government Accountability Office, <u>half of all pharmacies that partnered with them on COVID-19 vaccines were located in areas with high social vulnerability</u>; these pharmacies were able to deliver critical vaccines to these vulnerable populations to ensure they were protected from not only COVID-19, but other childhood illnesses that the schedule of <u>CDC schedule of vaccines</u> includes.

Furthermore, many rural counties have <u>low numbers of family physicians</u> that can be difficult to access depending on the distance and each individual's access to public transportation. In many areas, pharmacies are more easily accessible—<u>nearly 90% of the entire US population lives</u> <u>within 2 miles of a community pharmacy</u>.

Our constituents have now come to depend on this accessibility—and we are one of only <u>7</u> states who has not yet made this change permanent. Furthermore, according to a recent Morning Consult Poll, 85% of Marylanders support allowing pharmacists to provide routine vaccinations.

HB 1232 merely codifies this practice so that they can continue to have access to that care, which is set to expire in May with the ending of several pandemic revisions to the PREP Act.

Under this bill, pharmacists can only administer vaccines if they have completed at least 20 hours of training that includes treatment and recognition of adverse reactions to vaccines and hands-on injection techniques. They also must be certified in CPR.

Since 2010, pharmacists have been required to upload administered vaccine information into ImmuNet, <u>Maryland's HIPAA-compliant vaccine database</u>. Since 2019, other medical professionals providing immunizations must also do so to ensure all providers can see vaccine history.

The bill further protects the relationship between child patients and pediatricians by requiring pharmacists to speak with their parent or caretaker about the importance of well child visits and requiring them to refer them to a primary care physician if the child does not already have one.

According to 2022 data, only <u>46.2% of Maryland children have a medical home</u>—meaning that 53.8% of Maryland's children not only miss or delay these crucial vaccines, but the parents do not have a conversation about why they need to take their child for well visits.

HB 1232 will allow pharmacies to partner with primary care pediatricians so that parents can ensure their children receive crucial immunizations and are referred to a primary care provider who can continue their child's medical care.

Furthermore, the bill does **not** impede parental rights or change who can consent to a child's vaccination under the General Health Article §18–4A–01 through §18–4A–05.

Conclusion: HB 1232 merely continues a practice that our residents have already come to depend on by permanently allowing pharmacists to provide FDA-approved vaccines to children ages 3 to 17, ensuring that we can continue to protect our youngest residents from vaccine-preventable diseases.

Thank you for your consideration and I ask for a favorable report on HB 1232.