

ARIZONA HOUSE OF REPRESENTATIVES
Fifty-first Legislature – First Regular Session

COMMITTEE ON HEALTH

Minutes of Meeting
Wednesday, March 20, 2013
House Hearing Room 4 -- 9:30 a.m.

Vice-Chairman Boyer called the meeting to order at 9:37 a.m. and attendance was noted by the secretary.

Members Present

Mrs. Brophy McGee
Mrs. Gonzales
Mr. Lovas

Mr. Meyer
Ms. Steele
Ms. Townsend

Mr. Boyer, Vice-Chairman
Mrs. Carter, Chairman

Members Absent

None

Committee Action

SB1023 - DP (8-0-0-0)
SB1062 - DP (8-0-0-0)
SB1115 - DP (6-2-0-0)
SB1337 - NOT HEARD

SB1374 - DPA (7-1-0-0)
SB1404 - DP (8-0-0-0)
SB1440 - DP (7-0-0-1)
SB1442 - DP (7-0-0-1)

CONSIDERATION OF BILLS

SB1440 - medical marijuana; advertising; labeling - DO PASS

Alexander Maynard, Majority Staff Intern, explained that SB1440 requires the Department of Health Services (DHS) to revoke a registration certificate of a medical marijuana dispensary that dispenses packages that advertise in a way that misbrands or states that its use is for anything other than the intended medical use (Attachment 1).

Senator Kimberly Yee, sponsor, related that medical marijuana food products have recently been showing up on shelves with no label indicating that marijuana is contained in the products. This bill requires that the food products be labeled to indicate they are for medicinal use, similar to warning labels on cigarettes.

Kimberly MacEachern, Staff Attorney, Arizona Prosecuting Attorneys' Advisory Council, indicated that she is in support of SB1440 because of concerns about products in the marketplace that could be mistaken for food items or candy, posing a danger to children. It is appropriate to

require packaging of the materials the same as medicine. She showed a video of photos taken in a dispensary in Tucson where marijuana is included in food products such as lollipops, cookies, etc., so patients do not have to smoke the marijuana. She stated the current warning label required by DHS is not sufficient because a child will not be able to understand what the product is.

Mr. Meyer asked what changes a dispensary will have to make to comply with the bill. Ms. MacEachern replied that the bill requires the packaging to be white, opaque with labeling in black on a white background consistent with medicine so the product is not visible and children will not be attracted to the product.

Mr. Meyer asked about a potential amendment. Ms. MacEachern said she was asked to look at some language and provide comments, but nothing came of it. When the possible amendment was discussed, one of the concerns was whether the dispensary will be able to show the wares in the dispensary unpackaged and then package it and send it with the individual. That is not an issue, but when the product leaves the dispensary, it should be in a package as indicated in the bill. She related that when the bill was heard in another Committee, someone asked why it is needed instead of DHS passing a rule. At this point, undertaking additional rulemaking will take eight months to two years. Also, it is questionable if DHS has the authority to do that under the Arizona Medical Marijuana Act (AMMA).

Mark McClain, representing self, spoke in support of SB1440. He stated that he has been a law enforcement officer since 1989 and provided photos of medical edibles that have appeared in the past year in unlawful dispensaries (retail outlets and compassion clinics), such as Zonka bars.

Ms. MacEachern acknowledged that the photos were not from licensed dispensaries, but from individuals purported to be caregivers with five allowable patients; groups of caregivers got together and began producing these products. It is unclear whether or not these are operations contemplated under the AMMA, which is currently being litigated.

Discussion ensued about whether the evidence presented pertains to the bill.

Mr. McClain related that children have been told that medicine is in a yellow amber bottle, but the photos in the prior video show that the products are not packaged in an opaque yellow container with a safety cap. It appears that part of the cooking process involves extraction of tetrahydrocannabinol (THC), a psychoactive drug contained in marijuana, which creates a higher level of THC than traditional marijuana. In response to a question, he related that the compassion clinics are unlicensed, but he does not know how the name was obtained.

Chairman Carter assumed the Chair.

Richard Fitzpatrick, Cannabis Standards Institute, spoke in support of SB1440. He indicated that this legislation is an important step in the direction of having cannabis treated like medicine. It should be labeled so lawful patients have the same confidence as in an herbal supplement, non-prescription or prescription medication, which is what voters had in mind in Arizona and 17 other states. He added the Institute would like to see medical marijuana in a container that is sealed with a label providing the ingredients, where it was dispensed and contact information so a health professional will know who to call, which would help in tracking such products. He

related examples of individuals who became ill from accidentally consuming products that were not labeled and contained marijuana.

Kathleen Mayer, Deputy Pima County Attorney, Pima County Attorney's Office, spoke in favor of SB1440. She asked the Members not to dismiss the photos presented by the law enforcement officer. Currently, the County Attorney's Office is aware of one dispensary in the state that is making and packaging these edible products. Zonka bars and pixie sticks could be marketed in more than 100 dispensaries in the future so it is important to not only look at what is happening now, but what may be happening in the future. She opined that SB1440 is in furtherance of the AMMA because the voters passed a medical marijuana law, not a candy marijuana law.

Names of persons who signed up in support of SB1440 but did not speak:
Michele Brown, representing self

Vice-Chairman Boyer announced the names of those who signed up in opposition to SB1440 but did not speak:
Theresa Ulmer, Consultant, Arizona Dispensary Solutions, LLC

Vice-Chairman Boyer announced the names of those who signed up as neutral on SB1440 but did not speak:
Colby Bower, Director of Government Relations, Arizona Department of Health Services

Vice-Chairman Boyer moved that SB1440 do pass. The motion carried by a roll call vote of 7-0-0-1 (Attachment 2).

SB1442 - medical marijuana; child care facilities - DO PASS

Vice-Chairman Boyer moved that SB1442 do pass.

Maritza Heras, Majority Intern, explained that SB1442 transfers and renumbers current law that prohibits the use or possession of marijuana in a child care facility from the child care statutes to the medical marijuana statutes and contains a Proposition 105 clause (Attachment 3).

Senator Kimberly Yee, sponsor, stated last year, legislation was passed prohibiting marijuana in a child care facility, which was placed in the wrong section of statute; SB1442 corrects the error.

Kimberly MacEachern, Staff Attorney, Arizona Prosecuting Attorneys' Advisory Council, in support of SB1442, related that when the legislation from last year was analyzed, it became apparent that it was in the licensing statutes for the day care industry, which created confusion about what the actual consequence would be because it was on the same level as a licensing violation. It is pertinent to move it under the Arizona Medical Marijuana Act (AMMA) where it belongs.

Vice-Chairman Boyer announced the names of those who signed up in support of SB1442 but did not speak:
Michele Brown, representing self
Kathleen Mayer, Deputy Pima County Attorney, Pima County Attorney's Office

Vice-Chairman Boyer announced the names of those who signed up as neutral on SB1442 but did not speak:

Anjali Abraham, Public Policy Director, American Civil Liberties Union of Arizona
Colby Bower, Director of Government Relations, Arizona Department of Health Services

Question was called on the motion that SB1442 do pass. The motion carried by a roll call vote of 7-0-0-1 (Attachment 4).

SB1115 - direct pay prices; health care - DO PASS

Vice-Chairman Boyer moved that SB1115 do pass.

Ryan Sullivan, Majority Assistant Research Analyst, explained that SB1115 requires a health professional and facility to make the direct pay price available for a specified number of their most common services (Attachment 5).

Senator Nancy Barto, sponsor, said the health care system continues to be too costly and difficult to navigate for the majority of patients and families. In order to deal with these costs, more and more employers and employees are choosing tax-free spending accounts and high-deductible health plans, etc., which means patients are spending their own money first. Patients without insurance who want to pay for non-emergency health care services have difficulty obtaining a price for a service, which can vary widely from facility to facility. This bill requires providers to make the direct pay price available for the most common services and procedures at the time of service. Complicated or non-standard variations of services and procedures are exempt. In response to questions, she related the following information:

- SB1115 bill includes individuals with high-deductible insurance.
- SB1115 does not demand that the direct pay price has to stay at a certain level; it depends on whether the patient has complications.
- Hospitals are moving in the direction of providing transparency, but the missing element is that a direct pay price is not available when a person wants to pay for services.
- When health care facilities provide basic prices for services, they will find ways to bundle and make arrangements with each patient.

Dr. Eric Novack, representing self, testified in support of SB1115. He related that people should not be discriminated against based on price and insurance status. He was told by hospital personnel that the average payment for a knee replacement, if someone has insurance, is \$24,000, but if someone pays cash, the average payment is \$19,000. The difference is in location of the facility; hospital administrators indicated their prices are 60 percent higher than a hospital five miles away, which is a good reason to request that the prices be made available.

Mr. Meyer indicated that many hospitals have sliding scales for patients without insurance; the charitable branch of hospitals helps fund their care, based on income.

Barbara Fanning, Legislative Liaison, Arizona Hospital and Healthcare Association, testified in opposition to SB1115. She stated that while hospitals support transparency, this can be done voluntarily as opposed to a mandate. Over the past year, the Association has worked with billing

experts from the hospital community to develop an industry-led, quality transparency website that offers meaningful information to consumers. The hospitals offered amendment language to SB1115 that was not accepted. In response to questions, Ms. Fanning provided the following information:

- The proposed amendment offered by hospitals included clarifying provisions, but the most notable was an exemption for Indian Health Service (IHS) and Veterans' Administration (VA) hospitals since they are not open to the general public. A facility that could also be added is the Arizona State Hospital (ASH).
- The Association, through its website, was able to have hospitals post an average charge for procedures but it does not take into account the individual situation of each patient.

Mr. Meyer remarked that every patient is different, which makes it challenging to provide an average price. A law was passed requiring emergency room (ER) physicians to see every patient, regardless of whether the patient can pay or not. This bill will place all ER physicians in the state at risk of being fined by the federal government and other potential penalties. Ms. Fanning answered that hospitals are also concerned about the impact of SB1115 on the Emergency Medical Treatment and Active Labor Act (EMTALA).

Mr. Lovas asked if someone who has a knee replacement with complications is exempt from SB1115. Senator Barto agreed, noting that the bill only requires availability of basic codes deemed as the most common health care services provided by the hospital or health care professional. There is no penalty in the bill.

Chairman Carter stated that hospitals as one unit, and not individual departments, must provide direct pay prices, to which Senator Barto agreed.

Vice-Chairman Boyer announced the names of those who signed up in support of SB1115 but did not speak:

Henry Grosjean, representing self
Steve Twist, Vice President and General Counsel, Service Group of America
Meghaen Duger, U.S. Health Coalition
Scot Mussi, Free Enterprise Club

Vice-Chairman Boyer announced the names of those who signed up in opposition to SB1115 but did not speak:

Ryan Harper, Triadvocates LLC, Vanguard Health Systems
Amanda Weaver, Executive Director, Arizona Osteopathic Medical Association
Michelle Pabis, Executive Director, Government and Public Affairs, Scottsdale Healthcare
Stuart Goodman, Lobbyist, Dignity Health of Arizona
Laura Hahn, Executive Vice President, Arizona Academy of Family Physicians
Emily Law, representing self
Jason Bezozo, Senior Program Director, Government Relations, Banner Health
Kyra Carpenter, representing self

Vice-Chairman Boyer announced the names of those who signed up as neutral on SB1115 but did not speak:

Wendy Briggs, Cigna

Heather Bernacki Wilkey, Director, Government Affairs, Arizona Physical Therapy Association, neutral on SB1115, stated that the sponsor made some improvements to the bill in the Senate. She noted that some physical therapists are already working with patients with respect to providing direct pay prices.

Mrs. Brophy McGee asked how the bill addresses services that go wrong, especially emergency procedures where the health of the patient is unknown. Dr. Novack replied that the bill relates to treatments for standardized diagnoses not exceptional treatment. An advantage to encouraging health care providers to consider direct pay prices is that institutions and organizations, in conjunction with providers, will come up with innovative ways to provide better, more comprehensive services to patients so when someone has a knee replaced, for example, the patient can work with the physical therapist ahead of time to determine what the entire package will cost. He related that the bill does not apply to ASH and VA facilities. As to EMTALA, current statute requires the Director of the Department of Health Services (DHS) to publish a brochure semiannually on charges and provide enough copies to ERs.

Jeff Deiley, representing self, in support of SB1115, said this bill also pertains to private practitioners. Families spend a lot of money on health care by taking their child to the doctor to see why they are sick, which is a normal, regular procedure, so this bill is very important to families. He indicated he does not trust the medical industry; it is important that prices be made available so people can make wise choices. SB1115 asks for the price, and if there are complications, those will be addressed later.

Chairman Carter remarked that she disagrees that the medical industry cannot be trusted.

Names of persons who signed up in support of SB1374 but did not speak:

Jeff Deiley, representing self

Gordon Gray, Governing Board Member, Arizona Counselors Association

Jeremy Arp, Social Worker, NASW Arizona

Emily Jenkins, President/CEO, Arizona Council of Human Service Providers

Tara Plese, Arizona Association of Community Health Centers; Arizona Alliance for Community Health Centers

Bahney Dedolph, Arizona Council of Human Service Providers

Tomas Leon, CEO, People of Color Network, Inc.

Michele Brown, representing self

Shirley Thomas, representing self

Gretchen Jacobs, Attorney, TERROS

Sue Gilbertson, representing self

Steve Johnson, Clinical Director, Encompass Health Services

Beth Rosenberg, Lobbyist, Children's Action Alliance

Elizabeth Forsyth, Board Member, Arizona Counselors Association

Susan Cannata, Maricopa Consumers Advocates and Providers

Barbara Fanning, Legislative Liaison, Arizona Hospital and Healthcare Association

Jennifer Brummet, Clinical Director, YETC

Richard Brubaker, Special Projects Director, representing self
Brianna Rabago, Social Worker, representing self

Question was called on the motion that SB1115 do pass. The motion carried by a roll call vote of 6-2-0-0 (Attachment 6).

SB1374 - behavioral health examiners board - DO PASS AMENDED

Chairman Carter commented that an exceptional amount of time was dedicated to studying this issue so testimony will be limited.

Vice-Chairman Boyer moved that SB1374 do pass.

Vice-Chairman Boyer moved that the Carter three-page amendment to SB1374 dated 3/15/2013 (Attachment 7) be adopted.

Ingrid Garvey, Senior Majority Research Analyst, explained that SB1374 continues the Arizona Board of Behavioral Health Examiners for four years, makes a variety of changes to the Board's statutes related to licensing, Board membership, duties of the Director, eliminates Credentialing Committees and establishes Academic Review Committees (ARC) (Attachment 8). The Carter three-page amendment to SB1374 dated 3/15/2013 (Attachment 7) contains the following provisions:

- Revises the definition of *indirect client service* and *psychotherapy*.
- Specifies that for the four professions, by rule, the Board may prescribe the number of hours required for functions related to direct client contact and indirect client services.
- Clarifies language in the Factors for Review section that allows rather than requires the Board, if requested by an applicant, to not base a decision solely on a finding that an applicant had a license refused on the grounds of unprofessional conduct or a license revoked as a result of a final order of the Board that was not the result of a consent agreement or surrender of license after July 1, 2004.
- Allows the Board to conduct a de novo hearing and consider evidence presented at the time of the original denial or revocation or any new evidence presented on behalf of the applicant.
- Adds two new members to the task force to be appointed by the Director of the Department of Health Services (DHS).

Senator Nancy Barto, sponsor, said SB1374 is a comprehensive reform of the Board. The changes address major issues that arose from an Auditor General's report and the Committee of Reference (COR) hearing in the fall where numerous testimony was given about an ill-functioning Board that has plagued licensees and potential licensees for years. She reviewed the provisions of the bill and indicated that the amendment is the product of many stakeholder meetings relating to appropriate education standards and supervision hours licensees must abide by, as well as other provisions to enable the Board to implement the reforms. She added she is still working on language regarding the look-back provision.

Chairman Carter stated that she will work with Senator Barto on the look-back provision, but the bill needs to move forward.

Mrs. Brophy McGee stated there is a disconnection with the COR and this bill should have been heard in the Commerce Committee. She expressed concern about combining reforms in a continuation bill. Senator Barto indicated she has seen continuation bills go through separately and with policy changes, but she is not opposed to removing the continuation portion if it is a problem.

Vice-Chairman Boyer assumed the Chair.

Vice-Chairman Boyer asked about a funding mechanism for the Board. Senator Barto responded that the cost of implementation is considerable at different stages of the reforms, so she asked the Board for appropriate figures to accomplish each step, although she has not seen their latest fiscal note. It is not a General Fund appropriation but a general appropriation for the Board to spend its money.

Ms. Steele encouraged Senator Barto to continue working on the look-back provision because she would not like to see someone who truly did not deserve to have their license reinstated due to unprofessional conduct slip through because the standards are not high enough. Senator Barto answered that she will ensure the look-back provision is appropriate because some harm has been done to potential licensees and current licensees.

Vice-Chairman Boyer pointed out that the bill adds two members to the Board, noting that it has been difficult to obtain a quorum. Senator Barto said she has not heard that is a barrier in moving the bill forward. Part of the reason for that change is due to the movement away from Credentialing Committees; adding two new members to the Board will make up the difference.

Linda Scott, Vice President, Jewish Family and Children's Service; Board Chair, Arizona Council of Human Service Providers, spoke in support of SB1374. She indicated that there are many levels of staff that can, do and should provide services to clients in the public behavioral health system, who all have to be supervised by licensed clinicians. That need is expected to grow as health insurance exchanges are implemented, which will create a greater influx of people with behavioral health coverage. For private insurance and Medicare payments, the service provider almost always has to be a licensed clinician, which is difficult to find, mostly because of the obstacles, barriers and issues that have been going on for the last several years as a result of the dysfunction of the Board. Arizona residents deserve a fair and clear process for professional development and licensing, and employers are dependent on licensed professionals to carry out contracts and provide safe and expert service to the public.

Teresa Stanzier, Registered Nurse/Attorney, in support of SB1374, said she had the opportunity to observe and compare the practices of this Board with other regulatory agencies and there are a few issues that these statutory changes will address. The first is fundamental fairness and due process and the second is providing an opportunity for licensees with chemical dependency and substance abuse issues to access a diversion program that is confidential, anonymous and will allow the licensee to be rehabilitated.

Dr. Sharon Robinson Kurpius, Professor, Arizona State University (ASU); Liaison and Site Visitor, Council for Accreditation of Counseling and Related Educational Programs (CACREP), spoke in support of SB1374. She indicated she is not only representing ASU, but colleagues at the University of Phoenix, Northern Arizona University and other programs in Arizona that train counselors. The stakeholders and Senator Barto created a bill that will be much more equitable and fair, and the content of the training programs is in line with CACREP. If a school is not CACREP-accredited, it can apply to have its program reviewed so students can move through the process in an efficient way, which is a tremendous step forward.

Ms. Steele said the level of education and standards is very high to be CACREP-accredited. It is unfair to go through the process only to be treated unfairly by the Board. The members may not be fair, but perhaps the system the members follow is unfair.

Richard Poppy, Vice President, Therapeutic Practitioners Alliance of Arizona; licensed substance abuse counselor; Owner, Desert Star Addiction Recovery Center, spoke in support of SB1374. He noted that the Alliance is mostly made up of counselors from all four disciplines in Pima and Maricopa counties who have been in practice for a long time. It was recognized in 2004 that there was some difficulty with the rules that govern their profession and the structural formation of the Board, so over the last nine years, the members attempted to institute some changes and are responsible for ensuring there was a five-year sunset review instead of ten years. One of the functions of the American Association of State Credentialing Boards is to have uniform standards from state to state so the intent is to have board procedures and functions resemble boards in other states. Time was also spent on the cost of licensing professionals; the national average is about \$250; the Board is in the top five percent, which has been a concern.

Rory Hays, Council of Human Service Providers, in support of SB1374, noted that people with expertise were asked to help develop standards that will preserve public safety and fairness for applicants. Every effort was made to be sensitive to the Board's concerns about implementation problems, which is reflected in the Carter amendment and will probably be the basis for additional amendments. One concern is whether there will be enough time for people to be appointed to avoid quorum problems, which can be addressed by adding 60 days. Also, there have been concerns about the look-back provision that will be addressed, as well as the issue of continuation and substantive provisions in one bill. She added that it is vital for the Board to have authorization to spend its money for implementation of the provisions in SB1374.

Stuart Goodman, Arizona Board of Behavioral Health Examiners, neutral on SB1374, said the Board has always taken the position that the professions should dictate their governance model and standards by which they practice. It was not until the last few years that the desire for peer review by Credentialing Committees became less of a concern than it was in 1989, so as the professions evolved, the need for the current regulatory structure has changed. The Board is working toward resolving issues in the most collaborative way possible. He noted the following:

- There is a slight disagreement whether the standards are being lowered.
- The ability for individuals to reapply after revocation or a denial exists in statute; there is an opportunity to strengthen those statutes as opposed to the approach that is being taken with the look-back provision.

- With expansion to 12 members, appointments may not be made in a timely manner and quorum issues could occur.
- Definitions placed in statute are tied to sections that are delayed until November 15, 2013, which needs to be worked out to avoid unintended consequences in regard to how supervision hours are accounted.

Mr. Goodman added that major structural changes have been appropriately delayed until November 15, 2013, in some circumstances, to allow for an orderly transition which will not happen overnight, so the Members will probably receive letters and emails. In the last three years, about 3,300 applicants were received by the Board and 671 were denied; 247 of those denials were individuals who refused or did not pass the required examinations, which is something the Board cannot control.

Vice-Chairman Boyer asked if there is a mechanism for appropriation for immediate implementation. Mr. Goodman answered that one solution would be to place an appropriation on the bill. The second would be a supplemental appropriation through the appropriations process to add about \$160,000 for fiscal year (FY) 2014.

A brief discussion ensued about separation of the continuation portion from the policy changes.

Mrs. Gonzales expressed concern about the de novo hearings and asked how easy or difficult it is to have a license revoked. Mr. Goodman answered that the most highly scrutinized efforts are used in the process for revocation, which is not taken lightly. The majority of disciplinary cases do not relate to revocation. A serious violation has to occur to have a license revoked; boards do not want to deny someone their livelihood and, at the same time, want to protect the public.

Question was called on the motion that the Carter three-page amendment to SB1374 dated 3/15/2013 (Attachment 7) be adopted. The motion carried.

Vice-Chairman Boyer moved that SB1374 as amended do pass. The motion carried by a roll call vote of 7-1-0-0 (Attachment 9).

THE MEETING RECESSED AT 12:07 P.M. TO 1:00 P.M.

THE MEETING RECONVENED AT 1:02 P.M. WITH ALL MEMBERS PRESENT.

SB1404 - licensing eligibility; authorized presence(now: food handler card; authorized presence - DO PASS

Vice-Chairman Boyer moved that SB1404 do pass.

Maritza Heras, Majority Intern, explained that SB1404 clarifies that a volunteer food handler card is not considered a license and may not be used for purposes of employment (Attachment 10).

Senator Katie Hobbs, sponsor, stated that under current statute, any professional license requires proof of authorized presence. It came to her attention that some people in the state legally who

volunteer are not able to obtain food handling cards, the majority of whom are “snowbirds” and Canadians. SB1404 will allow these people to obtain volunteer food handling cards. She noted this was Representative John Kavanagh’s bill that passed in 2011 and she has been working with him on this bill. She will check with him on this language before the bill goes to the Floor and make any changes that are necessary.

Question was called on the motion that SB1404 do pass. The motion carried by a roll call vote of 8-0-0-0 (Attachment 11).

Names of persons who signed up in support of SB1404 but did not speak:
Richard Bohan, Director of Government Relations, Maricopa County; Maricopa County Board of Supervisors

SB1062 - technical correction; boating rules(now: adoption subsidy; behavioral health services) - DO PASS

Vice-Chairman Boyer moved that SB1062 do pass.

Ingrid Garvey, Senior Majority Research Analyst, explained that SB1062 provides that a child who was in the custody of the Arizona Department of Economic Security (DES) and a ward of the court at the time of adoption is eligible for behavioral health services as though the services are specifically authorized in an adoption subsidy agreement, even if the agreement does not specify behavioral health coverage or a subsidy agreement is not enforced for that child (Attachment 12).

Mrs. Brophy McGee stated that the sponsor, Senator Rick Murphy, sent an email indicating that many adoptive parents of children in the foster care system have barriers to obtaining timely, appropriate behavioral health care. He sponsored SB1062 to address these problems by cutting bureaucratic steps out of the process for families that do not specifically have behavioral health care listed in their adoption subsidy agreement and for those who do not have a subsidy agreement. As a foster and adoptive parent, he knows that most of these children have counseling needs that are not always apparent at the time of adoption. The amendment is from DES to address concerns about wording; he will work with stakeholders to ensure the final wording achieves the intended goal.

Question was called on the motion that SB1062 do pass. The motion carried by a roll call vote of 8-0-0-0 (Attachment 13).

Names of persons who signed up in support of SB1062 but did not speak:
Michele Brown, representing self

Names of persons who signed up as neutral on SB1062 but did not speak:
Kathy Ber, Director of Legislative Services, DES

SB1023 - technical correction; dentistry; permit(now: optometry board; continuation - DO PASS

Vice-Chairman Boyer moved that SB1023 do pass.

Ryan Sullivan, Majority Assistant Research Analyst, explained that during the 2012 interim, the Committee of Reference met and recommended continuing the State Board of Optometry for ten years. SB1023 continues the Board for 10 years until July 1, 2023 (Attachment 14).

Chairman Carter remarked that a meeting was held the previous week with optometrists and ophthalmologists that was very contentious. She is concerned about having the continuation and Board changes in SB1433 - optometry board, so this bill only contains the continuation portion. She indicated that ophthalmologists suggested retaining an ophthalmologist on the Board as a non-voting member; currently it can be any doctor. She is not sure if optometrists had a chance to review that proposal, but since this is the last week to hear bills, she wants both bills to move forward.

Names of persons who signed up in support of SB1023 but did not speak:

Trish Hart, Lobbyist, Arizona Ophthalmological Society

Margaret Whelan, Executive Director, Arizona State Board of Optometry

Don Isaacson, Arizona Optometric Association

John Mangum, Arizona Ophthalmological Society

Norman Moore, Attorney, Arizona Optometric Association

Dr. Annette Hanian, Arizona Optometric Association

Stacey Meier, Optometrist, Arizona Optometric Association

Question was called on the motion that SB1023 do pass. The motion carried by a roll call vote of 8-0-0-0 (Attachment 15).

Without objection, the meeting adjourned at 1:15 p.m.

Linda Taylor, Committee Secretary
April 8, 2013

(Original minutes, attachments and audio on file in the Chief Clerk's Office; video archives available at <http://www.azleg.gov>)