

ALASKA STATE LEGISLATURE
SENATE HEALTH AND SOCIAL SERVICES STANDING COMMITTEE

April 13, 2011

1:37 p.m.

MEMBERS PRESENT

Senator Bettye Davis, Chair
Senator Dennis Egan
Senator Johnny Ellis
Senator Kevin Meyer
Senator Fred Dyson

MEMBERS ABSENT

All members present

COMMITTEE CALENDAR

COMMITTEE SUBSTITUTE FOR HOUSE BILL NO. 15(JUD)

"An Act relating to prevention and evaluation of and liability for concussions in student athletes."

- MOVED CSHB 15(JUD) OUT OF COMMITTEE

CS FOR HOUSE CONCURRENT RESOLUTION NO. 5(HSS)

Relating to prevention of disease and to vitamin D.

- MOVED CSHCR 5(HSS) OUT OF COMMITTEE

PREVIOUS COMMITTEE ACTION

BILL: HCR 5

SHORT TITLE: VITAMIN D SUPPLEMENTS

SPONSOR(s): REPRESENTATIVE(s) SEATON

02/11/11	(H)	READ THE FIRST TIME - REFERRALS
02/11/11	(H)	HSS
03/10/11	(H)	HSS AT 3:00 PM CAPITOL 106
03/10/11	(H)	Heard & Held
03/10/11	(H)	MINUTE(HSS)
03/15/11	(H)	HSS AT 3:00 PM CAPITOL 106
03/15/11	(H)	Moved CSHCR 5(HSS) Out of Committee
03/15/11	(H)	MINUTE(HSS)
03/16/11	(H)	HSS RPT CS(HSS) 5DP
03/16/11	(H)	DP: DICK, SEATON, MILLER, HERRON, KELLER

04/11/11 (H) TRANSMITTED TO (S)
04/11/11 (H) VERSION: CSHCR 5(HSS)
04/12/11 (S) READ THE FIRST TIME - REFERRALS
04/12/11 (S) HSS
04/13/11 (S) HSS AT 1:30 PM BUTROVICH 205

BILL: HB 15

SHORT TITLE: STUDENT ATHLETE CONCUSSIONS

SPONSOR(S): REPRESENTATIVE(S) DOOGAN

01/18/11 (H) PREFILE RELEASED 1/7/11
01/18/11 (H) READ THE FIRST TIME - REFERRALS
01/18/11 (H) EDC, HSS
03/16/11 (H) EDC AT 8:00 AM CAPITOL 106
03/16/11 (H) Heard & Held
03/16/11 (H) MINUTE(EDC)
03/30/11 (H) EDC AT 8:00 AM CAPITOL 106
03/30/11 (H) Moved CSHB 15(EDC) Out of Committee
03/30/11 (H) MINUTE(EDC)
03/31/11 (H) EDC RPT CS(EDC) NT 4DP 2AM
03/31/11 (H) DP: PRUITT, SEATON, FEIGE, DICK
03/31/11 (H) AM: P.WILSON, KAWASAKI
03/31/11 (H) RECOMMEND JUD REFERRAL
03/31/11 (H) HSS REFERRAL REMOVED
03/31/11 (H) JUD REFERRAL ADDED AFTER EDC
04/11/11 (H) JUD RPT CS(JUD) NT 6DP 1NR
04/11/11 (H) DP: LYNN, GRUENBERG, THOMPSON, HOLMES,
PRUITT, GATTO
04/11/11 (H) NR: KELLER
04/11/11 (H) JUD AT 1:00 PM CAPITOL 120
04/11/11 (H) Moved CSHB 15(JUD) Out of Committee
04/11/11 (H) MINUTE(JUD)
04/12/11 (H) TRANSMITTED TO (S)
04/12/11 (H) VERSION: CSHB 15(JUD)
04/13/11 (S) HSS AT 1:30 PM BUTROVICH 205

WITNESS REGISTER

REPRESENTATIVE MIKE DOOGAN

Alaska State Legislature

Juneau, AK

POSITION STATEMENT: Sponsor of HB 15.

KENNETH EDMUNDS, Director of Government Relations

National Football League

POSITION STATEMENT: Testified in support of HB 15.

JILL HODGES, Executive Director
Alaska Brain Injury Network
Anchorage, AK

POSITION STATEMENT: Testified in support of HB 15.

GARY MATTHEWS, Executive Director
Alaska School Activities Association
Anchorage, AK

POSITION STATEMENT: Testified in support of HB 15.

REPRESENTATIVE PAUL SEATON
Alaska State Legislature
Juneau, AK

POSITION STATEMENT: Sponsor of HCR 5.

CRYSTAL ROGERS, Staff to Representative Paul Seaton
Alaska State Legislature
Juneau, AK

POSITION STATEMENT: Presented information regarding HCR 5.

WARD HURLBURT, Director
Division of Public Health (DHP)
Department of Health and Social Services (DHSS)
Anchorage, AK

POSITION STATEMENT: Provided information and expressed concerns regarding HCR 5.

JILL LEWIS, Deputy Director
Division of Public Health
Department of Health and Social Services
Juneau, AK

POSITION STATEMENT: Answered questions regarding HCR 5.

ACTION NARRATIVE

[1:37:02 PM](#)

CHAIR BETTYE DAVIS called the Senate Health and Social Services Standing Committee meeting to order at 1:37 p.m. Present at the call to order were Senators Dyson, Egan, and Chair Davis.

HB 15-STUDENT ATHLETE CONCUSSIONS

CHAIR DAVIS announced the first order of business would be HB 15, relating to student athlete concussions. [CSHB 15 (JUD) was before the committee.]

[1:37:30 PM](#)

REPRESENTATIVE MIKE DOOGAN, sponsor of HB 15, noted the committee had already heard SB 22, the Senate companion bill. The two bills are essentially the same, with three minor changes in the Judiciary CS. First, on page 2, line 30, the House Judiciary Committee allowed the words "or electronically" after "in writing." The second change, page 3 line 2, the House Education Committee changed subsection 1 to say, "health care provider who is licensed in the state or exempt from licensure under state law." This relates to doctors from other states who may be temporarily working in rural communities. On page 3 at lines 12 and 13, the Judiciary Committee added the words "caused by a concussion" to clarify that the immunity in this bill does not apply to other kinds of injury.

[1:40:05 PM](#)

KENNETH EDMUNDS, Director of Government Relations, National Football league said the NFL is a strong supporter of this youth concussion education and prevention bill. HB 15 will help to prevent preventable brain injuries and make sports and recreational activities safer for Alaska's youth athletes. Children and teens are more likely to get a concussion and take longer to recover than adults. More than 40 percent of high school athletes return to participate in school athletics before they have fully recovered from these brain injuries.

That is why the NFL has undertaken a state level advocacy effort to promote youth concussion laws similar to the 2009 law in the state of Washington. Zachary Linstead survived but continues to face a long road of rehabilitation. HB 15 contains three core principles: concussion education, immediate removal of a youth athlete who appears to have suffered a concussion, and mandatory clearance by a licensed health care provider who is trained in the evaluation and management of concussions.

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This legislation allows a qualified person to clear a youth athlete. It will make sports and recreational activities better by making them safer. It also will help to reinforce the same rule governing NFL football fields; the medical decisions of health care professionals take precedence over the playing decisions of parents and coaches. The NFL believes that is a winning game plan.

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JILL HODGES, Executive Director, Alaska Brain Injury Network said she testified in support of HB 15 throughout the process.

She thanked the Senate HSS Committee for hearing the bill today, and she supports the changes made on the House side.

[1:46:00 PM](#)

GARY MATTHEWS, Executive Director, Alaska School Activities Association (ASAA), thanked the Senate HSS committee as well as Representative Doogan and his staff. ASAA is strongly in favor of this version and would like to see it enacted this session.

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CHAIR DAVIS closed public testimony. She said the bill before the committee is the CS from the House Judiciary committee, version I. She noted the Senate HSS committee had heard a similar bill and they also support this one.

[1:48:59 PM](#)

SENATOR EGAN moved to report CSHB 15(JUD) from Senate Health and Social Services Standing Committee with individual recommendations and attached fiscal note(s). There being no objection, it was so ordered.

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At-ease.

HCR 5-VITAMIN D SUPPLEMENTS

[1:50:25 PM](#)

CHAIR DAVIS announced the next order of business would be HCR 5, Vitamin D supplements. [HCR 5(HSS) was before the committee.]

REPRESENTATIVE PAUL SEATON, sponsor of HCR 5 thanked the committee for taking up the resolution. It asks the state to move to a prevention of disease model for health care. The governor's Choose Respect campaign is one example of trying to move on to the prevention side. There are multitudes of ways the state could be doing this.

[1:52:18 PM](#)

The resolution has numerous "Whereas" clauses. Each one refers to an individual study that has been published in peer review magazines; there is a large scientific body of evidence relating to the health of the body. We in Alaska require more vitamin D supplementation because of our geographic location in the northern latitude.

[1:53:26 PM](#)

SENATOR ELLIS joined the meeting.

[1:53:37 PM](#)

REPRESENTATIVE SEATON noted Vitamin D is actually a pre-hormone. We make it on our skin but it is converted in our blood. Alaska has some of the lowest Vitamin D levels in the nation. If a person is lacking in vitamin D, children get rickets. Older people lose bone mass. Studies in Alaska show that many people have Vitamin D levels between 6 and 16, which is right at the level of rickets.

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Charts show the risk of colon cancer versus the person's vitamin D status. The lowest one-fifth has a risk of one for getting colon cancer; the highest one-fifth has a fifty percent less chance. Colon cancer is rampant in Alaska. Breast cancer risk is also lowered with vitamin D supplementation. He mentioned the great reduction in many diseases with Vitamin D supplementation.

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Seasonal Affective Disorder is a precursor for depression. Adequate vitamin D is better treatment than light therapy. This is based on clinical trials. You do not have to take it every day, because it is oil soluble. It can be given weekly or even monthly. Alaska has trouble tracking this kind of thing, but in Finland all of this is reported and all doctors follow the recommendation of 3,000 IUs four times a year for the first year of life. By tracking the children over time, they can see an eighty percent reduction in the incidence of type 1 diabetes after 30 years if people received adequate vitamin D in the first year of life.

[2:00:13 PM](#)

The incidence of multiple sclerosis is five times higher for the group with the lowest vitamin D levels compared to those with the highest levels.

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None of the drug companies are promoting Vitamin D because they don't make much money on it. He noted that our health care system is no longer providing flu vaccine; Japanese school children studied with 1200 IU per day of vitamin D and no flu shot, had a 70 percent reduction in flu and upper respiratory disease cases. There are ways to prevent the flu from spreading, and this is most effective. Flu vaccines cost \$30 per shot even when subsidized.

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CRYSTAL ROGERS, staff to Representative Paul Seaton, said he had covered all the information but she could answer any questions from committee members.

CHAIR DAVIS said Ward Hurlburt was on-line to testify.

2:05:00 PM

WARD HURLBURT, Director, Division of Public Health (DHP), DHSS, said they appreciated the commitment to prevention. There is a large body of evidence and he recognizes that Vitamin D is an essential component of the diet of every person. He did some research regarding recommendations for vitamin D. The administration does not have a position on the resolution. The CS included some changes that Representative Seaton accepted, but he does have ongoing concerns. There is a zero fiscal note but if the recommendations were implemented there would be a cost.

2:07:20 PM

The National Institute of Health (NIH) asked the Institute of Medicine (NIM) to do a review of the claims. Their conclusions were very different from the conclusions of those who believe it will have many benefits. It is clear that Vitamin D is needed and deficiencies can lead to problems such as osteoporosis. He also has concerns if the legislature is the best place to make clinical recommendations.

The example he used with House HSS was about using very high doses of chemotherapy for women with metastatic breast cancer such that bone marrow was essentially wiped out. Some legislatures around the country did mandate this kind of coverage. It was later determined that the information was not interpreted correctly, and many deaths were significantly hastened by this treatment that was believed in at the time.

There were times when Vitamin E was seen as an answer to many health problems. Vitamin C was also given a lot of credit. Those are all essential substances, but that high level of enthusiasm did wane.

2:10:58 PM

There is no disagreement that low vitamin D levels can be associated with certain conditions. Those taking cortisone type drugs need more. Conclusions of NIM say there is not enough evidence to conclude it lowers the risk of MS. They said standard doses might help with MS, but it was ineffective for breast cancer, hypertension, heart disease, high cholesterol,

and colorectal cancer. The NIM also felt there were some risks with taking high levels with some other medications.

Evidence says that at high enough levels Vitamin D can be toxic. NIM recommends no more than 2,000 units per day and prenatal supplements in excess of that may be a risk to the fetus. He is not saying it is not essential, but the recommended levels and dose were increased to 800 IU a day for older people; less for younger people. That applies to people all over North America, not specifically Alaska. He applauds the efforts toward prevention. NIM does come to a different conclusion. He is particularly concerned about the use of Vitamin D to prevent seasonal flu. Alaska did the best job in the whole US of immunizing our senior population; that truly saves lives. Part of the cost in the fiscal note would relate to the cost of a comparison study. He is concerned if some did not receive vaccine, for comparison purposes, we could be putting them at jeopardy.

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JILL LEWIS, Deputy Director, Division of Public Health, DHSS, said there is a zero fiscal note because this is a resolution only. Since it urges the department to take certain steps, the division has prepared a hypothetical fiscal note of the costs to implement the recommendations, which is found on page 2 of the fiscal note.

CHAIR DAVIS said she had missed that part.

WILDA LOUGHLIN, Legislative Liaison, DHSS, said the CS made changes which lowered the hypothetical cost.

CHAIR DAVIS said Mr. Hurlburt had mentioned the changes. She would like to know what they are.

[2:19:18 PM](#)

REPRESENTATIVE SEATON said this was an interactive process. They made changes based on comments from DHSS. He said in the IMO study, it was specifically for healthy individuals and was related mainly to bone health. The NIM basically ignored population based studies. Most of the studies he relied on were population studies. The NIM likes to see clinical trials, which only give information about a small group of people. In trying to prevent disease, they would not want to deprive people of Vitamin D.

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SENATOR MEYER joined the meeting.

[2:23:07 PM](#)

REPRESENTATIVE SEATON said with the Vitamin C awareness, it was Linus Pauling. All of this evidence is independently reported in the journals. The cost of Vitamin D supplements is roughly \$8 for one year. If we look at Canada, it has been estimated they could lower the death rate by 37,000 people a year if they had adequate Vitamin D intake.

[2:24:54 PM](#)

He said there would be cost savings in the US health care system if people had sufficient Vitamin D. They are asking the state to do specific research looking at the data for Alaska, instead of looking at a single dose. Also, the IMO did raise the limit and said it could be toxic above 10,000 IUs a day. People should monitor their blood levels, because people have different responses and might need more or less. They should take the supplements for six weeks and then have their level tested.

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SENATOR EGAN commented that he applauded the representative for bringing the resolution forward. In 1976 he went blind in his left eye. Doctors at the University of Washington hospital told him he should start taking vitamin D. In 1982 he was diagnosed with MS, sensory MS. The doctors upped his dose of vitamin D to 1,000 IUs. After triple bypass surgery his heart surgeon recommended 3,000 IUs of vitamin D 3. So he now takes 3,000 a day. Due to our lack of sunlight, vitamin D is more important in Alaska.

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CHAIR DAVIS asked about the last further resolved; if that was eliminated would it remove most of what he wanted.

[2:29:34 PM](#)

REPRESENTATIVE SEATON answered they were hoping to go to a prevention model of health care. Data shows that many chronic issues can be prevented in elderly people with Vitamin D supplementation. They have data and individual studies that show an increase in C sections from lack of Vitamin D; also studies on Vitamin D supplementation during pregnancy. This lowered incidence of Type 1 diabetes. He feels these are all very important and is hoping that state will investigate or promote Vitamin D supplementation. It would be good for the legislature to request that our Division of Public Health (DPH) investigate. The only one he heard a problem with was the influenza vaccine.

Since the state has taken a public policy of no longer subsidizing influenza shots for the general population, he really feels they need to look for alternatives that the state will promote.

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It is not one or the other, flu shots or vitamin D; he does both. If we don't give flu shots because of the cost, should we not be looking at providing vitamin D as a way to prevent the spread of influenza? DHSS should at least investigate.

[2:32:25 PM](#)

CHAIR DAVIS said she had no problem with investigation; her concern was with the resolve "to promote." This could be taken care of in resolve the above, which tells DHSS to increase attention to blood testing and to promote awareness of potential long-term health benefits.

[2:33:12 PM](#)

REPRESENTATIVE SEATON replied that previously they said provide, and replaced it with promote.

CHAIR DAVIS so it doesn't necessarily mean you will actually give it.

REPRESENTATIVE SEATON responded that is correct. This is more educational. Senior health is important and costly. Data show that increased vitamin D will prevent broken bones in the elderly. Promote means to educate. If studies agree, they can save the state a lot of money by making sure seniors have adequate Vitamin D. This resolution does not require that.

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CHAIR DAVIS said this is a resolution; there is a possible fiscal note, but that would depend if it passed. Then the legislature would have to appropriate funds. Passing this doesn't mean it has to be appropriated.

REPRESENTATIVE SEATON answered that is correct. The hypothetical amount is if the state decides they should provide it, how much it would cost. This would be especially important for low-income seniors.

[2:36:02 PM](#)

SENATOR DYSON suggested it was appropriate to write the DHSS and ask for a report on what the state is doing on prevention and promoting prevention.

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CHAIR DAVIS said that was ongoing, but it had nothing to do with the resolution. She asked if the members felt comfortable enough to advance it. She noted there was not enough time to consider the resolution at another meeting.

SENATOR EGAN moved to report CSHCR 5(HSS) from the Senate Health and Social Services Standing Committee with individual recommendations and attached fiscal note(s). Without objection, it was so ordered.

[2:38:42 PM](#)

There being no further business to come before the committee, Chair Davis adjourned the meeting at 2:38 p.m.