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HEALTH CARE REPORT

Help in recognizing the warning signs of suicide

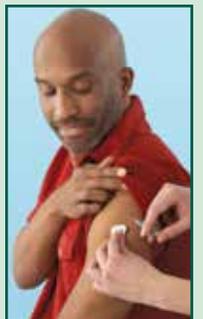
According to the National Institute of Mental Health, suicide takes nearly 40,000 Americans every year and is the 10th-leading cause of death for all ages in the United States. Veterans in particular are susceptible to suicide. In 2014, roughly 20 veterans a day committed suicide. That equates to 18 percent of all suicides, even though they only make up 9 percent of the population.

For every suicide death, there are 11 attempts. Many of those who attempt suicide never seek professional care.

A new law requires psychologists, social workers, therapists and counselors to have at least one hour of continuing education in the assessment, treatment and management of suicide. This doesn't increase the hours of training, but simply requires one of the hours to be suicide prevention training.

It's important to make sure our professionals have the skills to deal with suicide so they can intervene.

Better access to flu prevention



A new law gives a pharmacist – and licensed pharmacy interns under the direct supervision of a pharmacist – the authority to administer a flu shot to patients 9 years of age or older.

Currently, 40 states allow licensed pharmacy interns to administer vaccinations.

Pennsylvania's more than 6,600 certified pharmacist immunizers have been safely providing immunizations to adults for over 10 years. In 2013, pharmacists administered more than 940,000 immunizations in the Commonwealth. This allows parents to have another safe and convenient option to keep their children healthy.

Biosimilar substitutions under the Generic Equivalent Drug Law

Pennsylvania law permits the automatic substitution of a less expensive generic drug for a brand-name drug unless the physician indicates the brand is medically necessary. This new law creates a similar substitution for biosimilar products.

This law was needed because generic drugs and biosimilar medications have very different chemical make-ups, and the laws applicable to generics cannot be applied to biosimilar products. Generic drugs have identical active substances as their brand counterparts while biosimilars are only comparable and are not always "scientifically appropriate" for substitution.



Attacking allergic reactions

Last session, the General Assembly enacted a law to let schools carry epi pens for allergic reactions. As a result, over 2,645 Pennsylvania schools are now participating in a program to receive free epinephrine auto-injectors.

This session, there are plans to expand that law to let summer camps, colleges and universities, restaurants, amusement parks, sport facilities, daycare and other

facilities have non-patient-specific epinephrine auto-injectors for emergency situations if they wish to carry them. Training would be required, and there would be liability protection for the trained employee, as well.

Life-threatening food allergies are becoming a large and growing health problem, so access to life-saving medication makes sense.

Zika and West Nile prevention



West Nile virus is something everyone needs to watch out for when mosquitoes are around, but now there's also the Zika virus. There are similarities and differences between the two:

Differences

- Mosquitoes that spread Zika virus bite mostly during the daytime, while the mosquitoes that spread West Nile bite in the evening to morning.
- Mosquitoes that spread Zika also spread dengue and chikungunya viruses.
- Zika can be spread during sex by a man or woman infected with Zika to his or her sex partners.
- No cases of Zika in Pennsylvania have occurred from locally acquired infections; the only confirmed cases of Zika in Pennsylvania are in people who contracted the virus while visiting areas where the virus is actively spreading.

Similarities

- No vaccine exists to prevent Zika or West Nile.
- Both diseases are spread primarily through the bite of an infected mosquito.
- The best way to prevent the disease is to avoid being bitten by mosquitoes.

Prevention tips

- Use an EPA-registered insect repellent; most contain DEET.
- Wear light-colored, lightweight, loose-fitting clothing that covers hands, arms, legs and other exposed skin.
- Stay and sleep in air-conditioned or screened rooms or under a mosquito net when outdoors.
- Stay indoors when mosquitoes are most active.
- Empty standing water or turn over items in yards that hold water, such as tires, buckets, planters, pools, bird baths or trash containers.

The Department of Environmental Protection continues to monitor for the presence of mosquitoes associated with Zika transmission and will implement control measures when needed.

Marriage and family therapist protections

Act 54 of 2016 protects the title of marriage and family therapists licensed by the State Board of Social Workers. This ensures that only those with a professional license are permitted to call themselves marriage and family therapists in the state.

Only marriage and family therapists are required to receive training in family therapy and family systems, and since they are required to undergo extensive education and training, this protects consumers against fraud and maintains the professionalism of these highly qualified mental health care providers.



Local police provide drug take-back services



Please be aware that police and law enforcement units throughout Westmoreland, Armstrong and Indiana counties provide locations where unwanted and unused prescription and over-the-counter medicines can be disposed of properly.

Local departments offering the service include:

- Latrobe Police Dept., 901 Jefferson St., Latrobe; 724-537-5526
- Washington Township Police Dept., 289 Pine Run Church Road, Apollo; 724-727-3410
- Saint Vincent College Dept. of Public Safety, 300 Fraser Purchase Road, Latrobe; 724-805-2186
- Vandergrift Police Dept., 109 Grant Ave., Vandergrift; 724-568-5507
- Apollo Borough Police Dept., 616 First St., Apollo; 724-478-4201
- Kiskiminetas Township Police Dept., 1222 Old State Road, Apollo; 724-478-3357
- Parks Township Police Dept., 26 Jackson St., Vandergrift; 724-567-5525
- Blairsville Borough Police Dept., 201 E. Market St., Blairsville; 724-459-7555

Some restrictions on hours might apply, so **calling first** is recommended.

More information about the Pennsylvania Prescription Drug Take-Back Program is available on the state Department of Drug and Alcohol Programs' website, www.ddap.pa.gov.

All pharmaceutical drugs being disposed of should be in a sealed container such as the original bottle or a sealed bag. Personal information should be removed or blotted out with a permanent marker.

Visiting team doctors can treat athletes

Many teams in Pennsylvania and around the country employ medical personnel who travel with the team and coaches to provide medical care. These team physicians have established medical relationships with the athletes and are well suited to provide care while teams are competing.

Laws have been enacted to allow out-of-state visiting athletic team physicians to treat athletes during athletic events without the need for a Pennsylvania medical license, provided they are licensed in their home state and have an agreement with a sports team to provide care for the team while traveling. There also are restrictions to the time these physicians can practice in Pennsylvania.

Pharmacy techs

Under a House bill awaiting action in the Senate, pharmacy technicians would have to register with the State Board of Pharmacy, which ensures they are trained and meet minimum standard requirements.

Comprehensive plan for fighting opioid addiction

Opioid abuse has reached crisis level in Pennsylvania. According to a 2014 state report on heroin, the accidental overdose death rates were much higher in Westmoreland and Armstrong counties, 15.9 and 13.4 deaths per 100,000 people, respectively, than the statewide average of 12.7 deaths per 100,000 people. And, it's only getting worse.

This crisis is also straining our prisons, and addictions are costing the nation more than \$50 billion annually.

I participated in a Westmoreland County roundtable earlier this summer at Saint Vincent College with Gov. Tom Wolf to discuss initiatives in fighting the scourge of opioid addiction and the challenges we face locally and as a state.

Some of us in the General Assembly have taken action on a number of fronts, from giving law enforcement and emergency responders the ability to administer naloxone, the life-saving drug that can reverse opioid overdoses, as well as "good Samaritan" immunity for those responding to and reporting overdoses, to creating a pilot grant program for addiction services at correctional facilities for post-release and relapse-prevention treatments.

In addition, a special session will be called in the fall to specifically address this issue and enact recommendations provided by a task force for easily accessible information; specific training; providing a multi-agency approach to substance abuse disorder services; stronger enforcement of insurance parity coverage for addiction treatment and rehabilitation; developing prescription "take-back" programs; and providing guidance for prescribers.

In Pennsylvania we are working hard to understand and fight the scourge of opioid prescription drug abuse, but much more needs to be done.

The following list is some of the legislation being worked on:

H.B. 1737 – Would provide for the proper disposal of unused prescriptions and over-the-counter medications to ensure the safety of drinking water and reduce prescription drug abuse. Passed the House, awaits Senate action.

H.B. 1698 – Would require insurance plans to provide access to abuse-deterrent opioid drugs, such as drugs designed to be harder to crush, cut, dissolve or inject. Passed the House, awaits Senate action.

H.B. 1699 – Would prohibit emergency providers from prescribing long-acting opioid painkillers in emergency rooms and place a limit on discharge prescriptions. Passed the House, awaits Senate action.

H.B. 1805 – Would require doctors and pharmacists to attend three hours of opioid- and addiction-related training before obtaining licenses and two hours of ongoing training every renewal period. Passed the House, awaits Senate action.

H.B. 1601 – Would restore mandatory minimum sentences for drug-trafficking. Passed the House, awaits Senate action.

H.B. 988 – Would increase penalties for drug-trafficking offenses. Currently before the House Judiciary Committee.

H.B. 1294 – Would require prescribers to check the Prescription Monitoring Database before writing a prescription for buprenorphine. Currently before the House Health Committee.

H.B. 1511 – Would create an emergency addiction treatment fund by taxing the sale of opioids in the state. Currently before the House Human Services Committee.

H.B. 1568 – Would require protective services workers to receive training in addiction and how to make referrals for assessment and treatment. Currently before the House Children and Youth Committee.

H.B. 1692 – Would set involuntary treatment requirements and procedures for people suffering from alcohol and drug abuse. Currently before the House Human Services Committee.

H.B. 1748 – Would establish requirements for a course of study on drug and alcohol abuse for K-12, and training for instructors to better recognize drug abuse. Currently before the House Education Committee.



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Prostate cancer task force

The Prostate Cancer Surveillance, Education, Detection and Treatment Act became law at the end of 2015.

It is designed to provide the public with information and education to create greater public awareness of the prevalence of and measures available to detect, diagnose and treat prostate cancer and related chronic prostate conditions.

A 19-member task force was created, whose job it is to help ensure that:

- Medical professionals, insurers, patients and governmental agencies are equally knowledgeable about screening, diagnosis and treatment options;
- Medical professionals provide patients with sufficient information about treatment options to enable patients to make an informed choice as part of informed consent and to respect the autonomy of choice; and
- Pennsylvania government agencies provide unbiased information regarding multiple standards of care.

Prostate cancer is the most common type of cancer diagnosed in Pennsylvania men. Prostate cancer in Pennsylvania has similar incidence and mortality numbers as breast cancer. African-American men are 61 percent more likely than Caucasian men to be diagnosed with prostate cancer and twice as likely to die from it.

Creating opportunities with telemedicine

With my support, the House passed a bill that would allow Pennsylvania to join the Interstate Medical Licensure Compact. The compact is designed to allow eligible licensed physicians in one state to treat patients in other states via telemedicine.

Joining the compact would increase medical access for Pennsylvanians in underserved areas and connect people with serious illness to specialists.

The following states are members of this compact: Montana, Idaho, Wyoming, Nevada, Utah, Colorado, Arizona, Kansas, South Dakota, Minnesota, Iowa, Wisconsin, Illinois, Mississippi, Alabama, West Virginia and New Hampshire.

Protecting children's eyesight

The National Institutes of Health reports that many children's vision problems develop before they reach school age. However, less than 15 percent of all preschool children receive an eye exam, and less than 22 percent of preschool children receive some type of vision screening. Early recognition of eye disorders and disease results in more effective treatment, resulting in saving sight and lives.

I supported a bill (H.B. 484) that would require the Health Department to establish an Early Childhood Vision Care Education Program. The bill passed the House and is before the Senate for review.



Screening for Hep C

Hepatitis C is the most common blood-borne disease in the U.S. and the leading cause of liver cancer and liver transplants. Unfortunately, Pennsylvania has one of the highest rates of Hepatitis C in the nation.

A new law I voted for requires health care practitioners to offer those born between 1945 and 1965 a Hepatitis C test when receiving services in a hospital or physician's office. The age range is because the Centers for Disease Control has recommended that anyone born during this 20-year timespan should get tested because 75 percent of those with Hepatitis C do not know it.