Brief*

HB 2455 would add the treatment of Binge Eating Disorder (BED) to the list of permissible purposes for which a person licensed to practice medicine or surgery could order, prescribe, dispense, administer, sell, supply, or give amphetamine or sympathomimetic amine designated in Schedule II, III, or IV under the Uniform Controlled Substances Act. The bill also would allow a mid-level practitioner to prescribe, administer, supply, or give amphetamine or sympathomimetic amine for the treatment of BED.

The Committee made a technical change to the bill that would update the term Hyperkinesis to Attention Deficit Hyperactivity Disorder.

Background

A representative from the pharmaceutical company Shire requested the House Committee on Health and Human Services introduce the bill. At the House Committee hearing, two representatives from Shire testified in favor of the bill stating in January 2015, the U.S. Food and Drug Administration approved Vyvanse, a drug developed by Shire, to be used for the treatment of moderate to severe BED in adults. The representatives further stated Vyvanse is allowed to be prescribed for BED in 45 states and in August 2015, the Kansas State Board of Healing Arts approved a

*Supplemental notes are prepared by the Legislative Research Department and do not express legislative intent. The supplemental note and fiscal note for this bill may be accessed on the Internet at http://www.kslegislature.org
petition filed by a Johnson County psychiatrist seeking approval to prescribe the drug.

Representatives of the Kansas Association of Osteopathic Medicine, the Kansas Psychiatric Society, and the National Alliance on Mental Illness provided written proponent testimony, and a representative of the Kansas State Board of Healing Arts provided written neutral testimony. There was no opponent testimony.

The fiscal note prepared by the Division of the Budget indicates the Board of Pharmacy states additional treatment uses for Schedule II, III, and IV controlled substances could increase the frequency of prescribing, which could affect revenues and expenditures in the State Employee Health Plan and Medicaid, but there would be no fiscal effect on the Board of Pharmacy. The fiscal note also notes the Kansas State Board of Healing Arts states passage of the bill could result in the need for promulgating additional rules and regulations by the Kansas State Board of Healing Arts’ staff and could result in an increase in the number of complaints and investigations, but the Board could not estimate the potential costs. Any fiscal effect associated with the bill is not reflected in The FY 2017 Governor’s Budget Report.