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Testimony before the
Human Services Committee Committees
Monday
March, 2, 2009

Re: HB 5172, SB 990, 992, 1046, 1048, 1049

Good Afternoon Senator Doyle and Representative Walker. My name is Margherita Giuliano. I am a pharmacist and Executive Vice President of the Connecticut Pharmacists Association. The Connecticut Pharmacists Association is a professional organization representing approximately 1000 pharmacists in the state. I am submitting testimony today on several bills before you.

HB 5172: AN ACT ESTABLISHING THE CONNECTICUT HEALTHY STEPS PROGRAM. (INS) Section 2 of this bill establishes a permanent Health Care Reform Commission that is charged to design health benefit plans that are affordable. As we know, a critical part of any health care plan is a prescription drug benefit. Pharmacists can provide valuable input in the design of an affordable plan not only from the drug distribution perspective but also from the pharmacist services perspective. Pharmacists have an emerging role working with primary care providers to improve the quality of care provided to patients. I urge you to amend this bill to include appointing a pharmacist as a member of this Commission.

SB 990: AN ACT CONCERNING EXPANDING THE HUSKY FORMULARY
The Connecticut Pharmacists Association supports expanding the husky formulary to include mental health medications with the appropriate process to allow prior authorizations. As pharmacists, we recognize that it can be challenging to find the right medication or combination of medications to treat mental illness. To take a person who has been stabilized on their medication regimen and arbitrarily change them to a drug on the preferred drug list could be more costly to the health care system. However, significant savings can be realized by having these medications on the preferred drug list. I am sure the members of the Pharmacy and Therapeutics Committee will weigh these options carefully.

SB 992: AN ACT CONCERNING LOWERING PHARMACEUTICAL COSTS
The Connecticut Pharmacists Association is not opposed to lowering pharmaceutical costs to businesses and consumers as long as it occurs in a reasonable way. Pharmacies in the state are not the cause of high drug costs. Many of our daily tasks help to lower drug costs through formulary management. We look forward to working with the Commissioners of Social Services and Public Health to offer ideas and to be part of the solution.

SB 1046: AN ACT CONCERNING RESTRICTED ACCESS TO PRESCRIPTION DRUG INFORMATION

Nobody's personal health information should be sold or shared for reasons other than the care of the patient. Personal health information should not be used by pharmacy benefit managers (PBMs) to market to patients for any reason. Pharmacy benefit managers that are owned by pharmacies should clearly demonstrate that they do not share personal health information between the PBM and their pharmacy. A firewall should exist. The CPA remains neutral on the issue of pharmaceutical companies getting de-identified patient information on prescribing habits of practitioners.

SB 1048: AN ACT CONCERNING BULK PURCHASING OF PRESCRIPTION DRUGS.

The Connecticut Pharmacists Association is not opposed to the state investigating the bulk purchasing of prescription drugs for the population noted in this proposed bill. Since pharmacies are the primary way we distribute medications to this population, we ask that we be involved in the development of such a plan to analyze the impact this might have on access to medications for the residents of our state.

SB 1049: AN ACT PROHIBITING CERTAIN GIFTS FROM PHARMACEUTICAL AND MEDICAL DEVICE COMPANIES TO HEALTH CARE PROVIDERS.

The Connecticut Pharmacists Association opposes SB 1049 because the industry has already set guidelines to self regulate. As an accredited provider of continuing education for pharmacists through the Accreditation Council for Pharmacy Education (ACPE) we have specific criterion and guidelines we must comply with or risk loss of accreditation. Criterion 17 deals with Non-commercialism. Programs must be presented in a fair and unbiased manner. Any decisions regarding programming must be done independently of commercial interest. In order to get funding for programs, most pharmaceutical companies have set up websites that are monitored by an independent third party to answer grant requests. There is also a complete separation between marketing and education. The industry has responded to the public outrage of the "perks" offered to prescribers. When we have pharmaceutical companies exhibit at our conferences now, they no longer hand out pens or other marketing materials. This legislation is not needed and I'm sure it would be costly to enforce. I suggest that the committee look into the guidelines that have been implemented over the past couple of years before moving forward with this legislation.