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Connecticut State Medical Society Testimony in opposition to
Senate Bill 262 An Act Concerning Collaborative Drug Therapy Management Agreements
Presented to the Public Health Committee

March 1, 2010

Senator Harris, Representative Ritter and Members of the Public Health Committee, my name is Ken Ferrucci, Vice President of Public Policy and Government affairs for the Connecticut State Medical Society (CSMS). On behalf of our more than 7,000 members, thank you for the opportunity to present this testimony to you today in opposition to Senate Bill 262 An Act Concerning Collaborative Drug Therapy Management Agreements.

In past session CSMS has worked closely with our pharmacist colleagues to investigate and identify appropriate ways to increase collaboration between pharmacists and physicians to assist our patients in the management of certain diseases. Throughout the process all concerns revolved around patient safety and the delivery of quality healthcare. However, at this time we must oppose this legislation.

Original legislation regarding collaborative drug management allowed for such agreements for patients receiving services in nursing facilities or outpatient hospital care. Such agreements were limited to services for diabetes, asthma, hypertension, hyperlipidemia, osteoporosis, congestive heart failure or smoking cessation. Public Act 05-217 subsequently created a 2 year pilot program through the Department of Consumer Protection (DCP) to extend the program to up to 10 community pharmacies with consistent limitations on disease states. The Public Act required the Commissioner of Consumer Protection and the Commission of Pharmacy to evaluate the program and report recommendations to the Committees on Public Health, General Law and Human Services by December 31, 2008. However, minutes of the December 17, 2008 Commission of Pharmacy includes the following:

“Status of Collaborative Practice Pilot Program – Commissioner Inguanti reported that there is insufficient information for to write a report on the pilot program. Commissioner Inguanti will write a notice explaining why no report can be made at this time.”

We understand the desire of our pharmacy colleagues to continue serving patients through collaborative drug management therapy. We welcome the opportunity to working with them to

review results of such agreements and identify ways to strengthen the program and serve patients appropriately. However, with no credible results of the two year pilot program we feel that certain steps must be taken prior to an expansion in the use of collaborate agreements. The language before you not only eliminates any reference to setting or location of the pharmacy or services to be provided, but it eliminates language limiting the disease for which such management may take place.

Due to the insufficient information of the pilot program established by PA 05-217 coupled with the significant changes to the underlying statute force us to ask for you opposition to Senate Bill 262