



**General Law Committee**

**February 7, 2013**

**American Cancer Society Cancer Action Network Testimony**

**HB 5906 - AAC Prescriptions For Controlled Substances And Use Of The Connecticut Prescription Monitoring And Reporting System.**

The Connecticut Prescription Monitoring Program (PMP) collects information on the prescribing of Schedule II through Schedule V drugs. The data is submitted by pharmacies at least twice a month and collected in the CT. Prescription Monitoring and Reporting System (CPMRS), a central database accessible to providers and pharmacists during patient treatment.

The purpose of the data is to present a complete history of controlled substance use by a patient in order to better prevent abuse, identify prescriptions from multiple sources as well as illicit prescribing and dispensing. Forty-three states have operational PMPs as of 2012.

HB 5906 attempts to strengthen the effectiveness of the PMP by requiring providers and pharmacists to review the CPMRS for a patient's prior history of controlled substance use before prescribing a controlled substance to the patient.

Curtailling illegal use and diversion of prescription drugs is an important public health and safety goal. While such efforts are necessary, they must be appropriately balanced to ensure prescription medications continue to be accessible and available to patients for legitimate medical use.

This bill, if enacted, would result in backlogs at all points in the process. On any given day in Connecticut, providers will issue hundreds of prescriptions for controlled substances to treat any number of legitimate medical issues and pharmacies may fill thousands of prescriptions across the state. Currently, even with the most efficient of circumstances, a PMP assessment takes a few minutes. The system will be overwhelmed and delays and less effective treatment may result.

Past studies have indicated that some health care professionals are already limiting or avoiding prescribing strong medications to avoid the PMP process for fear of being investigated. Facing additional backlogs and delays will result in ever increasing prescriptions for weaker, less effective pain medications for legitimate patients.

ACS CAN supports efforts to prevent illegal use of prescription pain medicines and works towards enacting balanced PMPs and other policies that promote pain control and responsible pain medicine prescribing practices to relieve suffering and improve quality of patient care. HB 5906 does not accomplish this goal.