

NPAF National Patient Advocate Foundation

The Patient's Voice | *since 1996*

Connecticut General Assembly General Law Committee Public Hearing February 7, 2013

Testimony concerning Proposed House Bills 5484 and 5906

Lesley Bennett—30 Soundview Drive Stamford, CT 06902

Member of the President's Council, **National Patient Advocate Foundation**

Good Afternoon. I would like to thank the members of the General Law Committee for this opportunity to speak to you about proposed HB 5484 (*An Act Prohibiting Generic Substitutions for Tamper-Resistant Formulations*) and HB 5906 (*An Act concerning Prescriptions for Controlled Substances*)

My name is Lesley Bennett—I am a Stamford resident and volunteer member of the President's Council for the National Patient Advocate Foundation. NPAF is a national non-profit organization that since 1996 has been the *patient's voice* in state/federal discussions about improving access to and the quality of care for patients cancer and chronic illness.

NPAF supports HB 5484. This Act is an important step in the effort to reduce prescription medication abuse by ensuring that pharmacies and insurance companies cannot routinely substitute a generic drug for a physician prescribed tamper resistant medication without the consent of the physician. Most of the drugs with the new tamper resistant technology are opiates or pain medications that when used as prescribed provide chronically ill patients with relief from moderate to severe pain. While providing patients with generic versions of opiates or pain medications that do not incorporate tamper resistant technology may seem to be less expensive, it may actually be more costly to the public. Prescription drug abuse is one of the fastest-growing problems in our nation. Recent data from the 2009 National Survey on Drug Use and Health showed that drug abusers as young as age 12 report that their addictions started with the nonmedical use of a prescription medication that did not incorporate tamper resistant technology. In online forums, it is easy for teenagers to learn how to crush Mom or Dad's prescription opiate and then inhale or inject this medication for an intense high. The new tamper resistant opiates incorporate technology that makes it much harder to crush these medications for inhalation, and when these tamper resistant medications are mixed with water, they turn into a gel making injection difficult. When a physician makes a decision that a tamper resistant medication is the best choice for a patient and patient's family, a pharmacy or insurance company should not be allowed to routinely substitute a generic medication without tamper resistant technology—the risk to the public are too great.

NPAF opposes HB 5906. While it is important for physicians to check the state prescription monitoring program (SPMP) before prescribing a controlled substance to a new patient, this bill appears to require that this be done every time a new prescription (even for the same drug) is issued to the patient. Due

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to the amount of time it takes for physicians to check the SPMP, we feel this bill as it is currently written will create an unnecessary burden for physicians and a backlog or delay for patients needing these medications. Any delay in obtaining a needed medication, could result in increased medical costs for the patient and the public due to hospitalizations or rescue therapies. Many patients such as my daughter, Kelly, will require controlled substances throughout their lives. Kelly is a patient who is not a high risk for drug abuse—she is a patient with a debilitating neurologic disorder that has left her bedridden and dependent on our family and her nurses for her care. Benzodiazepines (a class IV controlled substance) are the only medications that help control her disorder. Her medication use is closely monitored by her physicians and nurses. The last time there was a delay in obtaining her medication due to a backlog in the physician's office, she wound up in the hospital for 2 weeks.

Thanks you,

Lesley Bennett