



CCM 2015 Testimony

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PUBLIC HEALTH COMMITTEE

March 18, 2015

My name is Barbara Henry, First Selectman for the Town of Roxbury and CCM Board Member.

I am testifying on behalf of the Connecticut Conference of Municipalities (CCM), Connecticut's statewide association of towns and cities. Our members represent 156 towns and cities, representing over 95 percent of Connecticut's population. We appreciate the opportunity to testify on bills of interest to towns and cities.

HB 6856 "An Act Concerning Substance Abuse and Opioid Overdose Prevention"

CCM *supports* the Governor's comprehensive proposal to address drug abuse prevention in Connecticut.

The bill would, among other things: (1) require particular health care providers to undergo training on prescribing controlled substance and pain management as part of their continuing education; (2) require, by July 2016, pharmacies to update prescription data into the Prescription Monitoring Program (PMP) immediately upon dispensing a controlled substance, rather than weekly; (3) require any health care provider prescribing more than 72 hour supply of a controlled substance to review the PMP prior to prescribing; and (4) allow pharmacies to dispense an opioid antagonist (such as Narcan).

Rep. Arthur O'Neill's bill, *HB-6265 An Act Concerning Prescription Drug Monitoring* was heard at a Public Hearing before your Committee, but it is worth repeating the support for that bill as it addresses the practice of consulting with multiple health providers in an effort to obtain a large supply of prescription medication either for oneself or for resale.

The Governor's bill aligns with a series of proposals that CCM developed in December of 2014 after convening a working group comprised of municipal CEOs – from urban, rural and suburban communities - health professionals, community health providers, educators and law enforcement officials to examine the drug abuse epidemic affecting our communities. I was fortunate enough to take part of this working group where we met with various state agencies including Department of Mental Health and Addiction Services, Department of Consumer Protection, Department of Public Health, and Department of Children and Families to discuss how the state and local efforts could enhance drug abuse prevention in the State.

The CCM Working Group learned that proper education of health care providers regarding proper pain management and the risks associated with over-prescribing are essential to curb the trend that is occurring in Connecticut. CCM supports the provision in the bill that would require particular health care providers to undergo

training on prescribing controlled substance and pain management as part of their continuing education to enhance a health care provider's knowledge of the growing trend of over-prescribing of controlled substances.

Along with providing the necessary education for prescribers, the bill would also equip health care providers with tools to help address and prevent over-prescribing of particular narcotics. Among the tools that prescribers can be used is the registration and use of the PMP. This is a tool available to prescribers today. However, this underutilization is due to the lack of knowledge about the PMP and the benefits it has for both patients and prescribers. As of October of 2013, approximately 20% of all prescribers (that are required to register with the PMP) in Connecticut had registered with the PMP.

To further enhance the effectiveness of these proposals, CCM recommends initiatives to require continuing education, registration and utilization of the PMP as criteria for re-licensure to prescribe controlled substances.

The PMP can be a vital tool to help combat the growing trend of controlled substance abuse, however as stated, it is apparently underutilized. Therefore, CCM supports the provision that would require pharmacists to update prescription data into the PMP daily, rather than weekly. As well, support that prescribers consult the registry prior to prescribing any controlled substance being prescribed greater than 72 hours. Other states that have implemented this requirement, such as New York, saw a dramatic decrease in their prescription abuse rate.

CCM also supports the provision in the bill that would allow pharmacies to dispense Narcan, or another opioid antagonist. This would be a natural progression from last year's Public Act 14-61, which provides civil and criminal immunity to anyone administering an opiate antagonist prescription drug such as Narcan. Allowing pharmacists to dispense this type of medication for family, friends, partners and others that have loved ones that suffer from opioid drug abuse (heroin and certain prescription pain killers) will help reduce the number of untimely deaths in Connecticut. Not only as an EMT in my community but as a First Selectman who listens to the dispatch radio during the day, I can attest to the increased number of opioid overdoses our emergency services and police in mutual aid towns deal with on a daily basis. Currently, a physician's prescription is required to obtain Narcan (or other opioid antagonist). Some pharmacies in Rhode Island are able to do this through a Collaborative Practice Agreement. Their experience may serve as a guide on how Connecticut can implement this effectively.

Make no mistake, it is imperative to have strong prevention and education to combat drug abuse. In addition, allowing greater access to opioid antagonist medications -- as a critical life-saving measure -- should be instituted to coincide with such a comprehensive approach to address substance abuse in Connecticut.

CCM and the Town of Roxbury urge the Committee to ***favorably report HB 6856.***

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If you have any questions, please contact Mike Muszynski, Senior Legislative Associate of CCM at mmuszynski@ccm-ct.org or (203) 500-7556.