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TESTIMONY OF
ATTORNEY GENERAL GEORGE JEPSEN
BEFORE THE PUBLIC HEALTH COMMITTEE
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Good morning Senator Gerratana, Representative Ritter and distinguished members of the Public Health Committee. I appreciate the opportunity to support House Bill 6856, *An Act Concerning Substance Abuse and Opioid Overdoses Prevention*. I am extremely grateful that Governor Malloy has proposed this bill and that the Committee has agreed to hear it.

House Bill 6856 seeks to address one of the most urgent public health issues facing our state and country. Prescription drug abuse is a problem of epidemic proportions in our country. Emergency room visits involving misuse or abuse of prescription drugs have more than doubled since 2004 and prescription drugs are now the most commonly abused drugs among 12 and 13 year olds. It is well documented that those who become addicted to prescription drugs often eventually switch to heroin, which has become a readily available and cheaper alternative in many of our communities. Connecticut is not immune from these disturbing trends. Connecticut has seen a rapid growth in opioid overdoses, with 307 deaths in 2014, growing from 257 in 2013 and 174 in 2012. Each year, countless lives are lost or ruined due to prescription drug abuse.

Thankfully, Connecticut already has taken important steps towards preventing substance abuse and overdose deaths. Implementation of the Connecticut Prescription Drug Monitoring Program ("PDMP"), which is administered by the Department of Consumer Protection, was a major step forward in the state's efforts to curb prescription drug abuse. To the credit of the Commissioner and his agency, Connecticut has a very high-functioning PDMP. In 2013, the legislature passed Public Act 13-172, which required all practitioners who distribute, administer or dispense any controlled substance to register for access to the PDMP. That law also required pharmacies and dispensers to report prescription drug information to the PDMP a weekly basis.

House Bill 6856 expands on these requirements in important ways. First, the bill requires real-time reporting of prescription drug information rather than bi-weekly reporting. Second, the proposal mandates that practitioners or their authorized designees check the PDMP before prescribing more than a 72-hour supply of a controlled substance. These changes will ensure that providers and pharmacists have at their disposal information about whether someone seeking to fill a prescription is abusing drugs. Similar measures are already in place in a number of other states.

The bill includes several other provisions that will help prevent and treat prescription drug abuse. It strengthens provider education about prescription drug abuse by requiring one hour of training or education, within existing continuing education requirements when possible,

in the prescribing of controlled substances and pain management for physicians, dentists, advanced practice registered nurses, and physician assistants. It has been widely reported that most health care providers and medical students currently receive only minimal training in how to recognize substance abuse in their patients.

Lastly, the bill seeks to increase access to naloxone and other life-saving opioid antagonists. In particular, the bill expands the scope of practice for pharmacists to include, after being certified and trained by DCP, prescribing these important drugs. It also clarifies that prescriptions for these drugs, when written by pharmacists, can be covered by health insurance. As noted above, drug overdose deaths have risen dramatically throughout Connecticut and the United States. Indeed, drug overdoses are now the leading cause of injury death in the United States. Increasing access to naloxone and similar drugs is an important and effective means of prevent needless and tragic drug overdose deaths.

Thank you once again for the opportunity to support this important proposal. Please feel free to contact me with any questions or concerns.