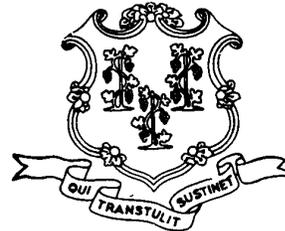


Department of Consumer Protection



Testimony of Jonathan A. Harris Commissioner of Consumer Protection

Public Health Committee Public Hearing
March 18, 2015

House Bill 6856, "AN ACT CONCERNING SUBSTANCE ABUSE AND OPIOID OVERDOSE PREVENTION"

Sen. Gerratana, Rep. Ritter, Sen. Markley, Rep. Srinivasan and honorable members of the Public Health Committee, thank you for the opportunity to offer testimony in support of Governor's Bill HB 6856 "AN ACT CONCERNING SUBSTANCE ABUSE AND OPIOID OVERDOSE PREVENTION."

As you know, Connecticut is not immune from the scourge of drug abuse, addiction and death that is sweeping across our country. Whether from street drugs like heroin, to prescription pain pills, many of our family members, friends and neighbors, from all corners of the state and from every socio-economic background are falling victim to this epidemic. Dramatic steps must be taken to find ways to reduce the number of people struggling from addiction, and to save the lives of individuals who are in the grips of this menace.

In order to address these important issues, Governor Malloy has made combating this abuse a top priority this legislative session. Working with anti-addiction advocates and the healthcare industry, the administration has assembled a comprehensive legislative proposal that will be effective in combating this crisis, reducing addiction, and saving lives. HB 6856 is the product of the work of many talented and dedicated people, and I am proud to be here today to offer my total support for this legislation.

The bill before you contains a number of proposals, each of which could improve our ability to reduce incidences of addiction and save lives. However, when combined together in this comprehensive package, the effects on crushing this epidemic will truly be greater than the sum of its parts. With that said, I'd like to speak briefly in support of several of the provisions, and then speak in greater detail about proposed enhancements in programs over which my agency has direct oversight.

First, I strongly support the Governor's proposal to increase practitioners' awareness of proper pain management and their role in prescribing controlled substances through statutory changes in their continuing education requirements. By including a mandatory training or educational component in proper pain management in their continuing education, we are demonstrating the importance of this issue in the prescribers' care of their patients.

I also support the bill's proposal of reconstituting and strengthening the Alcohol and Drug Policy Council, and transferring the administration of the Council to the Department of Mental Health and Addiction Services. I believe this re-invigorated body will keep this critical issue on the front burner where it belongs.

I am especially pleased to support efforts to increase the access to Naloxone, and other opioid antagonists, to the community at large. Specifically, this bill includes a provision to allow pharmacists to prescribe as well as dispense Naloxone, by expanding the scope of pharmacists' practice under the law. The Department of Consumer Protection, which currently has oversight of pharmacists, will train and then certify those

pharmacists who choose to participate in this program. The goal is to make it much easier for family members, partners, and friends of high-risk drug dependent individuals to acquire Naloxone and be prepared to save the life of a person who has overdosed. I can't overstate the importance of this proposal in increasing access to this life-saving drug. Think how simple it is for any of us to walk into a pharmacy, go to the pharmacy counter, and to walk out minutes later with a potentially life-saving drug in pocket that could be used to revive a loved one. Today, the lack of easy access to this drug is wrong, and it must be changed.

Also critically important in confronting the prescription drug epidemic while also improving patient care are the changes proposed to the Prescription Drug Monitoring Program (PMP) in this bill. As committee members know, DCP administers this program, which currently requires pharmacists and other prescribers who *dispense* controlled drugs to report those prescriptions using the PMP on a weekly basis. This information provides a record of all controlled substances prescribed to a patient and is able to be viewed by pharmacists and dispensers. This tool makes it fairly easy to observe cases of over-dependence and doctor shopping for prescription painkillers by individuals. Changes proposed in this bill make important improvements to the PMP. First it will require "real-time reporting," rather than weekly reporting of this information to ensure that if a patient is doctor-shopping that information will be immediately available for doctors and pharmacists to see. It also mandates that a practitioner, or that practitioner's delegate (who must be a licensed health care professional) must check the PMP to view that patient's controlled drug record, before deciding to prescribe more than a 72-hour supply of a controlled substance.

Together, these changes to the PMP will give a much more accurate picture of the controlled substance history of the patient and ensure that doctors and other prescribers are armed with needed information before deciding to dispense additional prescription painkillers.

In closing, I am delighted to speak in support of this comprehensive proposal to help reduce the drug abuse and addiction epidemic we are facing. And I am proud that my agency has played a role in administering a program that helps both doctors and patients and that we are prepared to do even more when this bill becomes law. I enthusiastically support this proposal and respectfully ask the committee members to join me in supporting this bill.

I am happy to respond to any questions you may have.

Following that, please feel free to contact me or DCP's Legislative Program Manager Gary Berner if you have any additional questions or comments.