



Legislative Testimony  
Joint Committee on Public Health  
Bill No. 5626  
An Act Concerning Prescription Drugs for Psychiatric Patients

Senator Gerratana, Representative Ritter, Senator Crisco, Representative Riley, Senator Markley, Representative Srinivasan and members of the Joint Committee on Public Health, my name is Maureen Sullivan Dinnan. I am the executive director of the Health Assistance interVention Education Network for Connecticut Health Professionals, which was created in 2007 following the passage of Connecticut General Statute Section 19a-12a. HAVEN is the assistance program for healthcare professionals facing the challenges of physical illness, mental illness, chemical dependence, or emotional disorder. I thank you for the opportunity to present this written testimony in opposition to Bill No. 5626, An Act Concerning Prescription Drugs for Psychiatric Patients.

Proposed Bill No. 5626 prohibits health care providers from prescribing more than a one-month supply of a drug to treat a patient's psychiatric condition. This Bill discriminates against patients with psychiatric conditions without a rational basis. Most psychiatric medications are not subject to abuse and do not need to be limited to a one-month supply. The Bill unintentionally stigmatizes patients with psychiatric conditions and may inadvertently result in depriving patients of much needed chronic medication. If a patient must receive an antidepressant, such as Prozac, in a thirty day supply as opposed to the ninety day supply, the cost may be prohibitive, resulting in a declination of care.

In 2014, HAVEN provided support and direction into treatment to more than 370 professionals. Our nurses, physicians, veterinarians, dentists, and allied health professionals suffer from mental health and nervous conditions at the same rate as the general population. This means that 6.7% suffer from major depression which is the leading cause of disability in the United States for individuals ages 15 to 44; 2.6% suffer from bipolar disorder with a median age of onset of 25; and anxiety affects about 19 million adult Americans. Suicide for healthcare professionals exceeds that of the general population, with female physicians four times more likely than male counterparts to suicide. We must encourage all persons to access mental health care. This Bill discourages the same by implying that persons with psychiatric conditions are more likely to misuse prescription drugs.

If the Bill is attempting to limit the potential for prescription drug abuse, then HAVEN suggests that the Bill be revised to impose limits by the class of drug and not by the mental or physical health condition. Medications, including opiates, sedative-hypnotics, benzodiazepines (anti-anxiety medications) and stimulants are frequently subject of misuse and place the patient at risk when prescribed in large quantities. Often, these are

not used for psychiatric conditions. Too often a professional presents to HAVEN after his or her primary care provider prescribed a sleep aid or sedative-hypnotic for difficulty sleeping after working the night shift or on call and then the provider is prescribed a stimulant to help the professional wake or focus during the next shift. The professionals become physically and psychologically dependent on the medications. As framed, Bill 5626 would not address this problem.

In addition, while quantity of medications is part of the problem, the quality of prescribing is perhaps a greater part of the problem. Primary care providers, gynecologists, and other specialists will write prescriptions for conditions that require close monitoring and may benefit from referral to chronic pain specialists, addiction specialists, or psychiatrists. Access to such resources is essential. A person with a family history of substance abuse, or a personal history of substance abuse is more likely to misuse prescription drugs than a patient with a psychiatric condition.

HAVEN suggests the following revisions to Bill No. 5626:

That the general statutes be amended to prohibit prescribing more than a one-month supply of medications including opiates, sedative-hypnotics, and stimulants, and other addictive medication and that such medications shall only be prescribed by a provider within a legitimate provider-patient relationship and for a condition within the scope of the provider's practice.

I would like to again thank the Committee for allowing me to submit testimony on behalf of HAVEN, the health assistance program for Connecticut health professionals. Should you have any questions we would be happy to make ourselves available at your convenience.

Respectfully submitted:



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