



**Testimony Before the Insurance and Real Estate Committee
March 3, 2020**

Regarding

**HB 5366 AN ACT CONCERNING THE COST
OF PRESCRIPTION DRUGS**

Senator Lesser, Representative Scanlon and members of the Committee:

Thank you for this opportunity to provide testimony regarding HB 5366. The Connecticut Pharmacists Association represents more than 1,000 pharmacists, technicians, and students across all sectors of the pharmacy profession in Connecticut.

Among other initiatives, this bill establishes a scheme to import certain prescription drugs from Canada. Unfortunately, this is not a safe way to attempt to reduce drug prices and it puts Connecticut's patients at risk.

The bill identifies who could participate in the program, which drugs would be excluded, and labeling, track and trace, testing, and other compliance requirements, all of which add to the ultimate cost of the imported drugs. The program would undermine the safeguards that are in place to ensure that prescription drugs are manufactured, stored, shipped and dispensed in a safe manner. This would have a negative effect on patient confidence in the safety of their medications. CPA must therefore oppose HB 5366.

Importation jeopardizes patient safety.

Decades of federal and state laws have created patient safety and drug supply chain protections to ensure that the drugs that we provide to patients are safe. The proposed program would bypass these protections and create supply chain vulnerabilities. Counterfeit or unsafe drugs could be introduced in these gaps in the supply chain, putting patients at an increased risk.

Importation undermines the Drug Supply Chain Security Act (DSCSA), also known as “the track-and-trace law.”

Pharmacists and other drug supply chain stakeholders have been working for years to implement DSCSA, which creates a closed supply chain to track and trace prescription drugs as they move from manufacturer to distributor to pharmacist. These same safeguards do not exist in Canada. Importation creates a patchwork of interim supply chain measures that introduce gaps and loopholes in the supply chain as drugs are distributed from Canada into the U.S. Pharmacies

have invested time and money to put DSCSA systems in place, and the proposal creates a disincentive for further investment and compliance.

Importation would create pharmacy operation disruptions that could introduce barriers to access that may compromise patient safety.

If HB 5366 were enacted, FDA-approved and Canadian versions of the same drug would be commingled in the marketplace. With already limited shelf space, and time spent on managing inventory, introducing these foreign products onto Connecticut's pharmacy shelves would interfere with pharmacy operations. Further, the proposed program would create product selection confusion, with questionable interchangeability between products, and the pharmacist may not know which version of the drug to dispense to patients. Access to medication could be limited if a patient's plan dictates dispensing one version and a pharmacy only has the other. It would also complicate insurance coverage and reimbursement at the pharmacy.

Importation would fail to produce significant cost savings to Connecticut consumers.

As a result of additional steps in the supply chain, such as relabeling and laboratory testing requirements, it is highly unlikely that there will be a significant cost savings to Connecticut consumers. The need for additional track-and-trace, recall, and adverse event reporting systems will further increase costs associated with the importation program. The lack of clarity around unknown, unproven cost savings does not justify jeopardizing Connecticut's supply chain integrity and patient safety.

In conclusion, we urge you not to move HB 5366 forward. The risk to patient safety, combined with the lack of cost savings, makes importation from Canada an unworkable solution for pharmacy patients and for Connecticut's consumers in general.

Thank you for your time and consideration.