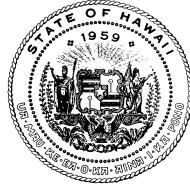


HTH HEARING

HB651

TESTIMONY



STATE OF HAWAII
DEPARTMENT OF HEALTH
P.O. Box 3378
HONOLULU, HAWAII 96801-3378

In reply, please refer to:
File:

Senate Committee on Health and the Senate Committee on Technology and the Arts

HB 0651, HD1, Relating to Electronic Prescriptions

Testimony of Loretta J. Fuddy, A.C.S.W., M.P.H.
Director of Health

March 15, 2013

Written Testimony Only

1 **Department's Position:** Support.

2 **Fiscal Implications:** None.

3 **Purpose and Justification:** The purpose of this measure is to update the Uniform Controlled
4 Substances Act in Chapter 329, Hawaii Revised Statutes, to allow for electronic controlled substance
5 prescriptions.

6 The Department of Health, Child and Adolescent Mental Health Division provides medication
7 management to youth with severe emotional and behavioral health challenges, as appropriate.
8 According to the Division's "Child and Adolescent Mental Health Performance Standards" (aka,
9 "Orange Book"), medication management includes reference and adherence to evidence-based
10 psychopharmacological practices, ongoing assessment of the young adult's or youth's response to
11 medication, symptom management, side effects, adjustment and/or change in medication and in
12 medication dosage. Medication management is provided by an American Board of Psychiatry and
13 Neurology Board Eligible/Certified Child Psychiatrist or a Licensed Advanced Practice Registered
14 Nurse with prescription privileges.

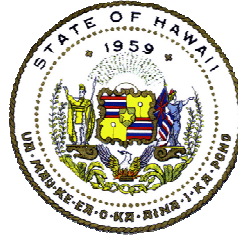
Promoting Lifelong Health and Wellness

1 The electronic transmittal of prescriptions will provide the Department of Health’s clinicians
2 with a safer, more secure, and timely means to prescribe medications. Neighbor island youth, in
3 particular, will benefit from this measure. Currently, prescriptions are handwritten on paper and then
4 mailed to the family. The prescriptions are valid for seven days, and cannot be post-dated. If the mail
5 is late or lost, the youth cannot get the needed prescription in a timely manner. Electronic prescriptions
6 will allow the prescriptions to be sent directly to the family’s pharmacy of choice.

7 The Child and Adolescent Mental Health Division’s electronic health record system, Resource
8 and Patient Management System (RPMS), has medication management capability. Should this measure
9 be passed and adopted, the Department of Health will be able to electronically transmit prescriptions in a
10 more secure and timely system. This measure will bring the State of Hawaii in alignment with President
11 Obama’s Healthcare Reform.

12 We thank you for the opportunity to testify.

NEIL ABERCROMBIE
GOVERNOR



STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY

919 Ala Moana Blvd. 4th Floor
Honolulu, Hawaii 96813

TED SAKAI
DIRECTOR

MARTHA TORNEY
Deputy Director
Administration

MAX OTANI
Deputy Director
Corrections

KEITH KAMITA
Deputy Director
Law Enforcement

No. _____

TESTIMONY ON HOUSE BILL 651 HD1
A BILL FOR AN ACT RELATING TO ELECTRONIC PRESCRIPTIONS

By

Ted Sakai, Director
Department of Public Safety

Senate Committee on Health
Senator Josh Green M.D., Chair
Senator Rosalyn H. Baker, Vice Chair

Senate Committee on Technology and the Arts
Senator Glenn Wakai, Chair
Senator Clarence K. Nishihara, Vice Chair

Friday, March 15, 2013, 1:30 PM
State Capitol, Room 229

Chairs Green and Wakai, Vice Chairs Baker and Nishihara, and Members of the Committees:

The Department of Public Safety (PSD) **supports** House Bill 651 HD1 which proposes to amend Hawaii's Uniform Controlled Substances Act in Chapter 329, Hawaii Revised Statutes, by adding definitions consistent with Federal law, clarifying the conditions for electronic transmittal of prescriptions, and adding and clarifying violations of prohibited acts. House Bill 651 HD1 would update Hawaii's controlled substance laws to allow for electronic controlled substance prescriptions. The amendments being proposed are consistent with that of Federal law under 21 CFR Parts 1300, 1304, 1306, and 1311 Electronic Prescriptions for controlled substances.

Thank you for the opportunity to testify on this matter.

Testimony of Phyllis Dendle

Before:

Senate Committee on Health
The Honorable Josh Green, M.D., Chair
The Honorable Rosalyn H. Baker, Vice Chair

Senate Committee on Technology and the Arts
The Honorable Glenn Wakai, Chair
The Honorable Clarence K. Nishihara, Vice Chair

March 15, 2013

1:30 pm

Conference Room 229

HB651 HD1 RELATING TO ELECTRONIC PRESCRIPTIONS

Chairs Green and Wakai and committee members thank you for this opportunity to provide testimony on HB651 HD1 which permits the use of electronic prescriptions for the dispensing of controlled substances.

Kaiser Permanente Hawaii supports this bill.

This bill allows another option for controlled substances prescriptions to arrive to pharmacies, in addition to the current "patient picks up prescription from their doctor and drops the prescription off at the pharmacy" option currently in use for most of these drugs. Besides making it more convenient and timely for doctors and patients, the electronic transmission of controlled substances prescriptions provides for safe and secure transfer of prescription information from prescriber to pharmacist. It eliminates the forgeries, lost prescription documents, and illegible handwriting, that contribute to medication errors, wasted time and increased frustration for patients who need these medicines. This bill also aligns the State Narcotics Enforcement Division with Federal Drug Enforcement Agency requirements to enable the electronic transmission of prescriptions for this category of drugs.

Thank you for your consideration.



The Honorable Josh Green, Chair
The Honorable Rosalyn Baker, Vice Chair
Senate Committee on Health

The Honorable Glenn Wakai, Chair
The Honorable Clarence Nishihara, Vice Chair
Senate Committee on Technology and the Arts

Friday, March 15, 2013; 1:30 p.m.
State Capitol; Conference Room 229

RE: HB 651 HD1 - Relating to Electronic Prescriptions- In Support

Chairs Green and Wakai, Vice Chairs Baker and Nishihara and members of the Committees:

My name is Todd Inafuku and I am testifying on behalf of CVS Caremark (CVS) in support of HB 651 HD1, Relating to Electronic Prescriptions. This bill will allow practitioners, who are registered and authorized to prescribe controlled substances, to electronically prescribe and electronically convey prescriptions for controlled substances listed in Schedules II, III, IV and V to a pharmacy of the patient's choice. The electronic conveyance of prescriptions will provide practitioners with a safer, more secure, and timely means to prescribe controlled substances in addition to the traditional method of providing the patient with a handwritten prescription for controlled substances listed in Schedules II, III, IV, and V, or orally ordering or conveying a fax of a written prescription to a pharmacy for controlled substances listed in Schedules III, IV and V.

Thank you for the opportunity to testify on this matter,

Todd K. Inafuku
Cell phone (808) 620-2288



HAWAII MEDICAL ASSOCIATION

1360 S. Beretania Street, Suite 200, Honolulu, Hawaii 96814
Phone (808) 536-7702 Fax (808) 528-2376 www.hmaonline.net

DATE: Friday, March 15, 2013
TIME: 1:30 p.m.
PLACE: Conference Room 229

TO:

COMMITTEE ON HEALTH
Senator Josh Green, Chair
Senator Rosalyn H. Baker, Vice Chair

COMMITTEE ON TECHNOLOGY AND THE ARTS
Senator Glenn Wakai, Chair
Senator Clarence K. Nishihara, Vice Chair

FROM: Hawaii Medical Association

Dr. Steven Kemble, MD, President
Dr. Linda Rasmussen, MD, Legislative Co-Chair
Dr. Joseph Zobian, MD, Legislative Co-Chair
Dr. Christopher Flanders, DO, Executive Director
Lauren Zirbel, Community and Government Relations

RE: HB 651 RELATING TO ELECTRONIC PRESCRIPTIONS

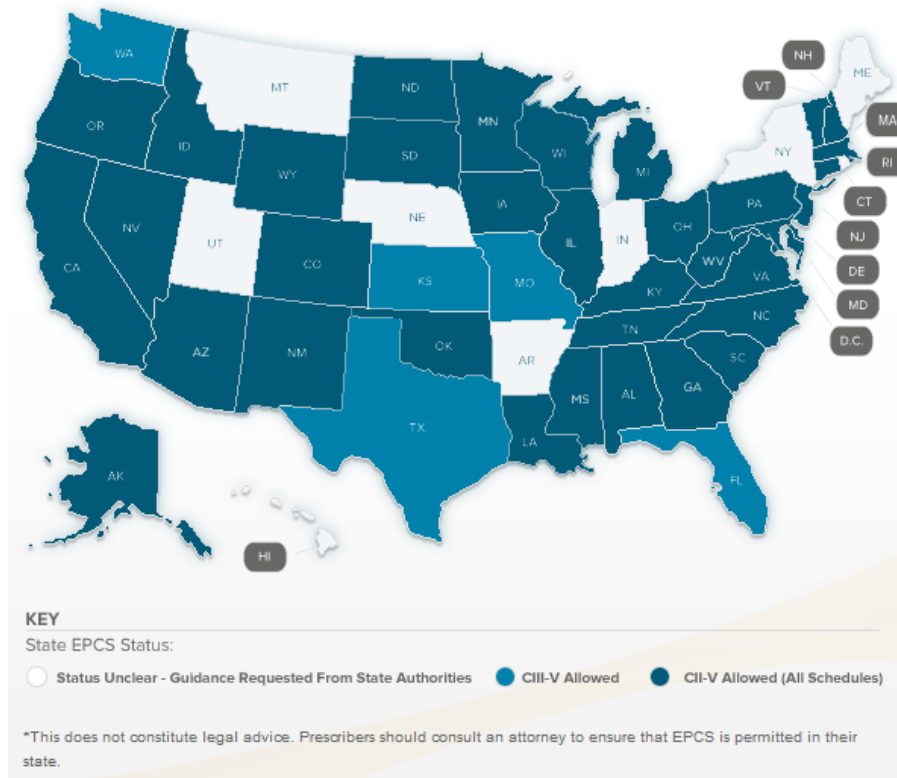
The Hawaii Medical Association is submitting testimony in strong support of this measure.

On March 31, 2010 the federal Drug Enforcement Administration (DEA) published its interim final rule on "Electronic Prescribing for Controlled Substances," revising DEA regulations and allowing pharmacies, hospitals, and practitioners to securely and safely utilize modern technology systems to electronically prescribe (e-prescribe) schedule II through V drugs (controlled substances). Since the DEA's rule went into effect in June 2010, many states have aligned their policies and regulations to facilitate e-prescribing of controlled substances; 41 states now permit e-prescribing of controlled substances and only nine states, including Hawaii, do not. [States' status relative to e-prescribing of controlled substances is depicted in the map below.]¹

¹ Surescripts. "E-Prescribing of Controlled Substances." <http://www.surescripts.com/about-e-prescribing/e-prescribing-of-controlled-substances.aspx>. Accessed on January 30, 2013.

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HB 651 proposes to amend Hawaii’s current Uniform Controlled Substances Act in chapter 329 to allow for e-prescribing of schedules II through V controlled substances. It is critical that Hawaii align with federal regulations for several reasons.

First, the federal requirements ensure that e-prescribing of controlled substances is secure and safe, to protect both the prescriber and the patient. The DEA requires that prescribers must: use e-prescribing software that is audited and certified for the purposes of e-prescribing of controlled substances; complete identity-proofing; and use a secure, two-factor authentication process to sign e-prescriptions for controlled substances. These privacy and security requirements protect the prescriber from the misuse of his/her credentials. It should also be noted that prescribers have the same obligations when e-prescribing controlled substances as they do when issuing traditional prescriptions orally or on paper.

Second, providers who are not able to e-prescribe controlled substances are forced to maintain separate workflows in their prescribing process – an electronic workflow for non-controlled substances and a paper process for controlled substances. The maintenance of two workflows is both disruptive and burdensome to the provider; controlled substances account for 10 to 11% of total prescriptions written in the United States.² The workflow disruptions and hassle caused by switching between paper and electronic prescribing are enough to make some physicians choose not to e-prescribe at all.

² Drug Enforcement Administration. “Electronic Prescriptions for Controlled Substances.” Interim Final Rule with Request for Comment. March 31, 2010. http://www.deadiversion.usdoj.gov/fed_regs/rules/2010/fr0331.htm. Accessed on January 30, 2013.

Third, the benefits of e-prescribing have been documented for patients, providers, and pharmacists. Major benefits include:

- **Enhanced patient safety and quality of care:** A 2010 study found 37 errors for every 100 handwritten prescriptions, compared to 7 errors for every 100 electronic prescriptions.³ It was estimated that about 7% of these errors have the potential to do harm.
- **Lower costs across the healthcare system:** E-prescribing systems help prescribers select medications covered by a patient's health plan formulary that are both cost effective and therapeutically appropriate. A 2012 study estimated that e-prescribing could lead to between \$140 billion and \$240 billion in savings and improve health outcomes over the next ten years.⁴
- **Increases patient convenience and medication compliance:** A recent study reported a 10% increase in patients' filling or picking up of new prescriptions.⁵ E-prescribing removes the "waiting" time from the traditional prescription filling process so that patients can easily fill medications without encountering significant wait times at the pharmacy.
- **Saves time and money for pharmacies and providers:** The National Association of Chain Drug Stores estimated that pharmacy staff make upwards of 150 million calls annually to clarify prescriptions or discuss possible errors with prescribers. This equates to as much as \$20,000 annually per physician practice that could otherwise be redirected to patient care.⁶

As of 2011, Hawaii ranked 39th among states in Surescripts Safe-Rx rankings due to its low adoption of e-prescribing. Hawaii prescribers, pharmacists, and patients are disadvantaged when it comes to health care quality and costs as prescribers are forced to retain two prescribing workflows. This impacts prescribers' abilities to adopt e-prescribing and, as a result, prescribers, patients and pharmacies do not receive e-prescribing's cost and safety benefits. Aligning Hawaii's laws to be consistent with DEA regulations is a critical important next step to moving Hawaii forward and supporting improved quality of care and reduced costs.

Mahalo for the opportunity to submit testimony on this important issue.

³ Kaushal, R., Kern, L., Barron, Y., Quaresimo, J., Abramson, E. "Electronic Prescribing Improves Medication Safety in Community-Based Office Practices." *Journal of General Internal Medicine*. June 2010.

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2869410/?tool=pubmed>. Accessed on January 30, 2013.

⁴Surescripts. "Study: E-Prescribing Shown to Improve Outcomes and Save U.S. Healthcare System Billions of Dollars." February 1, 2012. http://www.surescripts.com/news-and-events/press-releases/2012/february/212_eprescribing.aspx. Accessed on January 30, 2013.

⁵ Ibid.

⁶ Medical Group Management Association. "Analyzing the Cost of Administrative Complexity." September 2004. <http://www.mgma.com/about/default.aspx?id=280>. Accessed on January 30, 2013.

From: mailinglist@capitol.hawaii.gov
To: [HTHTestimony](#)
Cc: rontthi@gmail.com
Subject: *Submitted testimony for HB651 on Mar 15, 2013 13:30PM*
Date: Tuesday, March 12, 2013 3:00:09 PM

HB651

Submitted on: 3/12/2013

Testimony for HTH/TEC on Mar 15, 2013 13:30PM in Conference Room 229

Submitted By	Organization	Testifier Position	Present at Hearing
Ronald Taniguchi, Pharm.D.	Individual	Support	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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