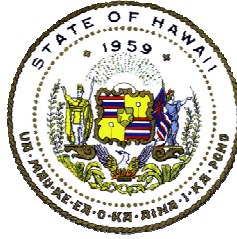


NEIL ABERCROMBIE
GOVERNOR



STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY
919 Ala Moana Blvd. 4th Floor
Honolulu, Hawaii 96813

TED SAKAI
INTERIM DIRECTOR

MARTHA TORNEY
Deputy Director
Administration

Deputy Director
Corrections

KEITH KAMITA
Deputy Director
Law Enforcement

No. _____

TESTIMONY ON SENATE BILL 650
A BILL FOR AN ACT RELATING TO HEALTH

By

Ted Sakai, Interim Director
Department of Public Safety

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

Senate Committee on Commerce and Consumer Protection
Senator Rosalyn H. Baker, Chair
Senator Brickwood Galuteria, Vice Chair

Friday, February 1, 2013, 1:45 p.m.
State Capitol, Room 229

Chairs Green and Baker, Vice Chair Galuteria, and Members of the Committee:

The Department of Public Safety (PSD) supports Senate Bill 650 which proposes to add a new chapter to the Hawaii Revised Statutes called the "Prescription Medication Safety Law." Senate Bill 650 proposes to prohibit physicians, nurses, and pharmacists from prescribing long-acting opioid painkillers in emergency rooms; prohibit physicians, nurses, and pharmacists in emergency rooms from prescribing more than a three-day supply of opioid painkillers; prohibit physicians, nurses, and pharmacists in emergency rooms from refilling prescriptions for opioid painkillers that have been lost, stolen, or destroyed.

The Department would like to recommend that the term “physician assistant” be added to the list of practitioners on page 1, lines 7, 12 and 16 to read as follows “...No physician, nurse, physician assistant, or pharmacist, in providing emergency services at any hospital in the State...”

Senate Bill 650, if passed, would help deter the pharmaceutical controlled substance abuser from visiting hospital emergency rooms in an attempt to fraudulently obtain large amounts of controlled substances yet allow the legitimate patient to obtain an adequate amount of pain medication till the patient can see his or her primary physician.

Thank you for the opportunity to testify on this matter.



The Honorable Josh B. Green, Chair
Senate Committee on Health
Hawaii State Capitol, Room 215

The Honorable Rosalyn H. Baker, Chair
Senate Committee on Commerce and Consumer Protection
Hawaii State Capitol, Room 230

S. B. 650, RELATING TO HEALTH
February 1, 2013, 1:45 p.m.

Thank you for the opportunity to provide testimony in opposition to on S.B. 650, Relating to Health. My name is Gerard Akaka, Vice President of Medical Affairs and Chief Medical Officer for The Queen's Medical Center.

The concept of this well-intentioned measure is to reduce prescription drug misuse and related accidental deaths. This bill is intended for those who abuse the system. There is little question that prescription painkillers are resulting in an increase in accidental deaths. According to a report by the Senate Caucus on International Narcotics Control, prescription painkillers accounted for 20,004 of the 26,450 overdose deaths in 2008, nationwide. This number represents more deaths caused by prescription drugs than by heroin and cocaine combined.

However, there is a basic medical practice premise that this measure infringes upon: physicians need to have the ability to address patient care on a case-by-case basis. The medical options that would be limited by this measure are exactly that: options. If a patient comes in to the Emergency Department with significant pain, a physician must retain the ability to respond to the needs of that patient.

This measure could have the unintended consequence of further congesting Emergency Departments. If a patient cannot follow up with their primary physician within three days, they may have to return to the ED. Furthermore, a significant number of patients who arrive to the ED utilize the ED as a first point of contact. Many patients do require follow-up care with primary care physicians or specialists. The Emergency Department physician will not know if or when patients will be able to secure timely follow-up appointments. Patients may suffer with unnecessary pain that could otherwise be mitigate with proper pain medications.

We welcome an opportunity to work with the committee on identifying other approaches to addressing this issue.



HAWAII MEDICAL ASSOCIATION

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Phone (808) 536-7702 Fax (808) 528-2376 www.hmaonline.net

Friday, February 1, 2013

1:45 p.m.

Conference Room 229

To: COMMITTEE ON HEALTH
Sen. Josh Green, Chair
Sen. Rosalyn H. Baker, Vice Chair

COMMITTEE ON COMMERCE AND CONSUMER PROTECTION
Sen. Rosalyn H. Baker, Chair
Sen. Brickwood Galuteria, 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: SB 650 RELATING TO HEALTH

In Opposition.

Chairs & Committee Members:

Hawaii Medical Association opposes this measure.

This measure prohibits doctors, nurses, and pharmacists from prescribing long-acting opioid painkillers in emergency rooms. It prohibits doctors, nurses, and pharmacists in emergency rooms from prescribing more than a three-day supply of opioid painkillers.

The HMA opposes any attempt to limit the practice of medicine by physicians. If a patient presents at an ER with a bone fracture and is unable to obtain a doctors appointment, due to the severe doctor shortage in Hawaii, to receive more pain medication the patient will either endure a terrible amount of pain or end up back at the ER. This measure may actually increase ER utilization and increase the cost of providing care for patients. Mahalo for the opportunity to provide this testimony.

OFFICERS

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January 31, 2013

Senate Committee on Health
State of Hawaii
Honolulu, HI

RE: SB650

Dear Senators:

On behalf of the American Academy of Pain Management, I wish to enter this testimony in opposition to SB650 into the record for the committee's consideration.

The Academy certainly agrees with what seems to be one intent of this legislation, i.e., that chronic pain should not be managed in the emergency room setting. We also believe that it is often the case that opioid pain relievers are over-prescribed in such settings, so do not have any serious concerns with the proposed 3-day limit on such prescriptions in this setting.

Our concern with this proposed legislation primarily has to do with the proposed exemptions to these restrictions. We believe that, if a patient is being treated for serious and/or life-limiting diseases, all of that patient's pain management needs should be directed by that patient's regular physician. If there is an emergent need for increased pain medication, it is permissible for the patient's physician to call a pharmacy to order an emergency supply of their medication, even Schedule II controlled substances, provided that such a phone call is followed with a written prescription. Thus, there should be no need to fragment the care of pain in these patient populations, as this legislation would permit.

Rather than instituting such limitations in legislation, we would much prefer that this topic be the subject of discussions among the state medical licensure board, state medical associations, and any state emergency medicine association that might exist. The states of Washington and Ohio have addressed this issue with guidelines issued from such collaboration, and we would much prefer to see that such a process be followed before legislating medical practice.

Sincerely,

Robert Twillman, PhD

Robert Twillman, PhD, FAPM
Director of Policy and Advocacy
American Academy of Pain Management
(913) 205-3746
btwillman@aapainmanage.org

Testimony of Phyllis Dendle

Before:

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

Senate Committee on Commerce and Consumer Protection
Senator Rosalyn H. Baker, Chair
Senator Brickwood Galuteria, Vice Chair

February 1, 2013
1:45 p.m.
Conference Room 229

SB 650 RELATING TO HEALTH

Chairs Green and Baker and committee members, thank you for this opportunity to provide testimony on SB650 regarding the prescribing of opioid painkiller in hospital emergency medicine departments.

Kaiser Permanente Hawaii supports the intent of this bill and requests some clarifying amendments.

Kaiser Permanente Hawaii supports the intent of this measure to reduce the abuse of prescription drugs. This goal is one that is shared by the federal government who has put out a number of recent regulations and reporting requirements for the same reason.

We request three amendments the bill to make it clearer.

First, in Hawaii pharmacists are not permitted to prescribe medications and so do not belong as placed in this bill on page one, lines 7, 12 and 16.

Second, having a more specific definition of long-acting opioid painkillers would be more useful than the "including but not limited to" language in the bill currently.
(page 1 line9)

And finally, on page 2 lines 3 & 4, it would be really helpful to have a definition of serious illness, disease or condition.

The penalties in the bill are severe and making a mistake based on misunderstanding would be disastrous. Thank you for your consideration.