

STATE OF HAWAII  
DEPARTMENT OF HEALTH  
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**Testimony COMMENTING on H.B. 2531, HD1  
RELATING TO PRESCRIPTION DRUGS**

REPRESENTATIVE ROY M. TAKUMI, CHAIR  
HOUSE COMMITTEE ON CONSUMER PROTECTION & COMMERCE

Hearing Date: February 12, 2018

Room Number: 329

1 **Fiscal Implications:** Undetermined

2 **Department Testimony:** The Department of Health (DOH) supports this bill to require  
3 prescribers to use the electronic prescription accountability system also known as the Prescripion  
4 Drug Monitoring Program of the Department of Public Safety (PSD) before writing prescriptions  
5 for certain narcotics.

6 This measure aligns with the following prescriber education and pain management practice  
7 objectives of the Hawaii Opioid Action Plan, developed by the Governor's Opioid and Substance  
8 Misuse Initiative:

- 9 • Objective 2-1: By December 2018, increase primary care provider PMP registration rates  
10 by twenty-five percent by providing training to prescribers;  
11 • Objective 2-1a: By December 2018, increase prescriber PMP utilization rates by ten  
12 percent; and  
13 • Objective 3-2: By September 2018, develop a standardized framework for the collection,  
14 synthesis, and dissemination of data.

15 The DOH also respectfully submits the following statistics:

- 16 • 49 states have an operational PDMP.  
17 • 36 states have laws in place to require use of state PDMP.  
18 • 44 states have laws in place that allow delegates to use the PDMP.

19 Despite evidence showing the effectiveness of PDMPs in reducing prescription drug related

1 death and injury (Patrick, Fry, Jones, & Buntin, 2014). PDMPs remain underutilized leaving  
2 states unable to reap the full benefits of this system. A national survey conducted in 2014  
3 found that while 72% of primary care physicians were aware of the state's PDMP system,  
4 only 53% of those surveyed reported using it (Rutkow et al., 2015). The CDC highlights  
5 examples from Florida, New York, and Tennessee to illustrate the association between the  
6 enactment of state-level PDMP policy enactments and changes in prescribing  
7 behavior. <https://www.cdc.gov/drugoverdose/policy/successes.html>

8 Florida

- 9 • 2010 Action: Regulated pain clinics and stopped health care providers from  
10 dispensing prescription opioid pain relievers from their offices, in combination with  
11 establishing a PDMP.
- 12 • 2012 Result: Saw more than 50% decrease in oxycodone overdose deaths.  
13 These changes might represent the first documented substantial decline in  
14 drug overdose mortality in any state during the previous ten years.

15 New York

- 16 • 2012 Action: Required prescribers to check the state's PDMP before prescribing opioids.
- 17 • 2013 Result: Saw a 75% drop in patients' seeing multiple prescribers for the same drugs.

18 Tennessee

- 19 • 2012 Action: Required prescribers to check the state's PDMP before prescribing  
20 painkillers.
- 21 • 2013 Result: Saw a 36% decline in patients' seeing multiple prescribers for the same  
22 drugs.

23 The DOH is aware that while mandates are less preferable to voluntary compliance, this  
24 measure will nonetheless achieve the results of Objectives 2-1 and 2-1a of the Opioid Plan and as  
25 noted above have had compelling positive impact in other states.

26 The DOH also defers to the PSD on the regulation and implementation of the proposed  
27 amendments to the Hawaii Uniform Controlled Substances Act.

28 Thank you for the opportunity to provide testimony.



An Independent Licensee of the Blue Cross and Blue Shield Association

February 12, 2018

The Honorable Roy M. Takumi, Chair  
The Honorable Linda Ichiyama, Vice Chair  
House Committee on Consumer Protection and Commerce

Re: HB 2531, HD1 – Relating to Prescription Drugs

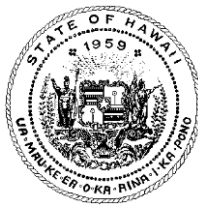
Dear Chair Takumi, Vice Chair Ichiyama, and Committee Members:

The Hawaii Medical Service Association (HMSA) appreciates the opportunity to testify on HB 2531, HD1, which requires prescribers of certain controlled substances to consult the electronic prescription accountability system before issuing a prescription for the controlled substance. HMSA supports the intent of this Bill, to reduce the access of the public to potentially addictive substances.

Thank you for the opportunity to testify in support of this measure.

Sincerely,

Jennifer Diesman  
Senior Vice-President-Government Relations



STATE OF HAWAII  
**DEPARTMENT OF PUBLIC SAFETY**

919 Ala Moana Boulevard, 4th Floor  
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No. \_\_\_\_\_

TESTIMONY ON HOUSE BILL 2531, HOUSE DRAFT 1  
RELATING TO PRESCRIPTION DRUGS

by

Nolan P. Espinda, Director  
Department of Public Safety

House Committee on Consumer Protection and Commerce  
Representative Roy M. Takumi, Chair  
Representative Linda Ichiyama, Vice Chair

Monday, February 12, 2018; 2:00 p.m.  
State Capitol, Conference Room 329

Chair Takumi, Vice Chair Ichiyama, and Members of the Committee:

The Department of Public Safety (PSD) **supports** House Bill (HB) 2531, House Draft (HD) 1, which would require prescribers of certain controlled substances to consult the electronic prescription monitoring accountability system before issuing a prescription for a controlled substance. PSD offers the following comments.

First, PSD has collaborated closely with the Department of Health (DOH) and other government and private stakeholders to create Hawai'i's Opioid Action Plan. One of the plan's goals is to increase the number of practitioners who use the electronic prescription accountability system, otherwise known as the Prescription Drug Monitoring Program (PDMP). PSD supports HB 2531, HD1, as this would significantly increase the number of PDMP users.

Second, PSD is aware of several states that have mandated use of the PDMP before the prescription of controlled substances. According to information from the DOH, 36 states currently have laws in place requiring the use of the PDMP. Those states have significantly reduced the effects of opioids.

Thank you for the opportunity to testify on this measure.