

HB2631 HD1 SD1

Measure Title: RELATING TO THE ELECTRONIC PRESCRIPTION ACCOUNTABILITY SYSTEM.

Report Title: Electronic Prescription Accountability System; Opiates; Prescription Practices

Description: Enhances the electronic prescription accountability system to inform practitioners of the percentile ranking of their opiate prescription practices as compared to their peers. Takes effect on 7/1/2021. (SD1)

Companion:

Package: None

Current Referral: PSM, CPH

Introducer(s): MATSUMOTO, EVANS, FUKUMOTO, HAR, ICHIYAMA, ITO, MORIKAWA, OHNO, SAY, Learmont, Nakamura, Tupola

DAVID Y. IGE
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TESTIMONY ON HOUSE BILL 2631, HOUSE DRAFT 1, SENATE DRAFT 1
RELATING TO THE ELECTRONIC PRESCRIPTION
ACCOUNTABILITY SYSTEM

by
Nolan P. Espinda, Director
Department of Public Safety

Senate Committee on Commerce, Consumer Protection, and Health
Senator Rosalyn H. Baker, Chair
Senator Jill N. Tokuda, Vice Chair

Wednesday, March 28, 2018; 9:15 a.m.
State Capitol, Conference Room 229

Chair Baker, Vice Chair Tokuda, and Members of the Committee:

The Department of Public Safety (PSD) appreciates the intent of House Bill (HB) 2631, House Draft (HD) 1, Senate Draft (SD) 1, which would enhance the electronic prescription accountability system to inform prescribers of the percentile ranking of their opiate prescription practices as compared to their peers. PSD offers the following comments.

First, the Department notes that HB 2631, HD1, SD 1 would require PSD's Narcotics Enforcement Division (NED) to annually determine the mean and median quantity and the volume of prescriptions for opiates contained in Schedule II and Schedule III, as defined by the HRS. Furthermore, the measure would require that the mean and median quantities be determined within categories of practitioners of a similar specialty or practice type as determined by the Department. PSD contracts with a vendor to operate Hawaii's electronic prescription accountability system, commonly known as the Prescription Drug Monitoring Program (PDMP). According to our vendor, to meet the requirements proposed by HB 2631, HD1, SD1, our PDMP system would

have to be enhanced at the cost of at least \$30,000.00 per year, with the exact costs yet to be determined.

Second, in addition to these burdensome costs for which no appropriation has been made to sustain on a recurring basis or even to cover one time, it would be difficult for NED to report the data required by HB 2631, HD 1, SD 1, with regard to “practitioners of a similar specialty or practice type.” In NED’s experience, practitioners have wide discretion in how they self-identify their field of practice. For example, a psychiatrist by training might identify his/her practice as “pain management”, while a similarly trained psychiatrist with a similar practice might self-identify his/her practice as “clinical psychiatry.” Furthermore, NED does not collect data to identify a prescriber’s specialty or practice type. Instead, NED requires only that prescribers hold a professional vocational license in a field that has statutory prescriptive authority to prescribe controlled substances. Collection of this data would require enhancements to NED’s controlled substances registration system at additional cost, and would take at least a year to complete, based on the annual controlled substances registration cycle. These exact costs are yet to be determined.

Third, the bill would require that PSD NED coordinate with the respective boards of licensure to make resources available to prescribers regarding ways to change prescribing practices and incorporate alternate pain management options into a prescriber’s practice. PSD has been working closely and collaboratively with the Department of Health and other government and private stakeholders to assist with improvements and advancements in this area. These improvements and advancements are included in Hawaii’s Opioid Action Plan, which was published in late 2017.

Thank you for the opportunity to testify on this measure.

HB-2631-SD-1

Submitted on: 3/26/2018 9:19:32 PM

Testimony for CPH on 3/28/2018 9:15:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Melodie Aduja	Testifying for Oahu County Committee on Legislative Priorities of the Democratic Party of Hawai'i	Support	No

Comments:

To the Honorable Rosalyn H. Baker, Chair; the Honorable Jill N. Tokuda, Vice-Chair, and Members of the Committee on Commerce, Consumer Protection and Health:

Good morning, my name is Melodie Aduja. I serve as Chair of the Oahu County Committee ("OCC") on Legislative Priorities of the Democratic Party of Hawaii. Thank you for the opportunity to provide written testimony on **HB2631 HD1 SD1** relating to Electronic Prescription Accountability System; Opiates; and Prescription Practices.

The OCC on Legislative Priorities is in favor of **HB2631 HD1 SD1** and support its passage.

HB2631 HD1 SD1 is in alignment with the Platform of the Democratic Party of Hawai'i ("DPH"), 2016, as it enhances the electronic prescription accountability system to inform practitioners of the percentile ranking of their opiate prescription practices as compared to their peers, effective on 7/1/2021.

The DPH Platform states that "[w]e support community health initiatives that provide opportunities for the overall health of communities through strategic projects and programs focusing on increased interaction and physical activities among all age groups, as well as on better nutrition.

We also support the establishment of adequate mental health and statewide drug rehabilitation programs set up in conjunction with policing policies aimed at enabling all that seek assistance to obtain whatever support assistance is needed to allow them to remain free of drug dependence.(Platform of the DPH, P. 7, Lines 378384 (2016)).

Given that **HB2631 HD1 SD1** enhances the electronic prescription accountability system to inform practitioners of the percentile ranking of their opiate prescription practices as compared to their peers, effective on 7/1/2021, it is the position of the OCC on Legislative Priorities to support this measure.

Thank you very much for your kind consideration.

Sincerely yours,

/s/ Melodie Aduja

Melodie Aduja, Chair, OCC on Legislative Priorities

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HB-2631-SD-1

Submitted on: 3/27/2018 10:31:19 AM

Testimony for CPH on 3/28/2018 9:15:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Andy Stenz	Individual	Support	No

Comments:

This seems to be a pretty common sense solution to letting docs know they are prescribing more than others. I appreciate that it's not a mandate but rather an informational based approach. It's directed at the people who make the decisions on the ground (not someone in some office somewhere) but gives options. I support this bill.

Mahalo, Andy Stenz

HB-2631-SD-1

Submitted on: 3/28/2018 9:14:50 AM

Testimony for CPH on 3/28/2018 9:15:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Nicholas Bronowski	Individual	Support	No

Comments:

Chair Nishihara of the Senate Committee on Public Safety, Intergovernmental, and Military Affairs

Subject: House Bill 2631 Relating to Electronic Prescription Accountability System

March 28, 2018

Mahalo for the opportunity to testify on this bill. My name is Dr. Nicholas Bronowski. I am a licensed physical therapist in the State of Hawaii, and I am testifying in strong support of H.B. 2631.

This bill will help the State of Hawaii for the following reasons:

As a physical therapist, I diagnose and treat patients that come to me with pain. The primary reason for seeking medical attention can be suggested due to being in pain. Our job as medical professionals is to figure out where that pain is coming from and provide the correct form of treatment with the least amount of harm to the patient to reduce such pain that can limit their daily function. The interesting thing I would like to point out is that this opioid abuse epidemic does NOT discriminate. The destructive power of drugs, often first prescribed to treat pain, has been seen to progressively get worse over the past couple of years regardless of public awareness and government awareness. The American Physical Therapy Association (APTA) has begun a national

campaign urging the public to consider physical therapy as a safe and evidence based effective treatment and alternative for pain management with #ChoosePT.

Over this past month, I was introduced to H.B. 2631 and the more I researched it, the more I strongly support it. I mentioned last time about a patient of mine who injured her ribs and has had a history of drug abuse but was still prescribed opioids. This time I would like to mention about a young man that I treated over the past few years here on Oahu. This man was injured in a motor vehicle accident and sustained vertebral fractures requiring surgery. Eventually, he was reliant on pain medications as he was considered to be permanently disabled and complained of pain on a constant basis prior to meeting with myself for physical therapy intervention. Eventually after completing PT and psychiatric therapy he was able to decrease the total amounts of opioids he consumed on a weekly to monthly basis. Not only was this excellent for his health but he also learned how to manage his pain to go from only walking with a walker, to now walking upright on his own with the use of two walking sticks. If it weren't for his persistence with seeking out physical therapy and continuation of care utilizing a medical gym he would not have been able to progress the way that he did.

I truly believe that patients such as these that are consumed by the opioid epidemic should have the choice of other forms of pain management such as PT when the risks seem to outweigh the reward with opioid treatment. Physical Therapists are Doctors in their field and are considered musculoskeletal specialists in the form of differential diagnosing and treatment. With the physician shortage that is still current in Hawaii today, PT's should be considered as a form of direct access or primary care for patients to utilize for pain symptoms and non-life threatening injuries.

Thank you again for the opportunity to testify in strong support on this matter of great importance for families across the state and the well being of the ever growing patient population of pain.

Dr. Nicholas Bronowski, PT

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