





FEBRUARY 4, 2013

TO: SENATE COMMITTEE ON HEALTH CARE AND HUMAN

SERVICES

FROM: OREGON STATE PHARMACY ASSOCIATION & OREGON SOCIETY OF HEALTH-SYSTEM PHAMRACISTS

RE: STATEMENT IN OPPOSITION TO SB 8

Good afternoon. My name is Bill Cross and I represent the Oregon State Pharmacy Association and the Oregon Society of Health-System Pharmacists. We urge your **opposition** to **SB 8** which would remove the current statutory restriction that limits the authority of nurse practitioners (NPs) to dispense drugs to only practice areas where there is a lack of readily available access to pharmacy services.

If approved, SB 8 will allow NPs throughout the state to dispense narcotic drugs. Pharmacists recognize that NPs are advanced practice nurses who provide high-quality health care services and must graduate with a master's, post master's or doctoral level degree. However, NPs are not trained as pharmacologists with the in-depth knowledge to identify and understand potentially fatal drug interactions or to recognize a more appropriate drug therapy in a given situation. Because of significant health care access issues in principally rural areas, the Legislature approved allowing NPs in areas that lack readily available access to pharmacy services to dispense drugs.

Granting NPs universal dispensing authority through the adoption of SB 8 is not needed as there are pharmacies easily accessible in urban areas. Further, it will decrease patient safety because NPs will not have the benefit of the pharmacy's systematic double-checking and Drug Use Review to assure patients receive the highest level of safety when picking up prescriptions. For this reason, few physicians exercise their privilege to dispense prescription medications. In essence, SB 8 allows NPs to become pharmacists and their clinics to become pharmacies without regulatory oversight from the Board of Pharmacy.

SB 8 violates the historic checks on dispensing pharmaceuticals

The bill would allow the same individuals prescribing the drugs to have the authority to dispense them. Currently, pharmacists participate in the drug utilization review, which is the process they use to screen for potential drug interactions, appropriate medication dosing, duplicate current therapy, determine age appropriateness, establish patient adherence, and other drug related issues that pharmacists have expertise in detecting. SB 8 will dilute the drug utilization review because NPs do not have the advanced training nor will they be subject to the same level of review and oversight by the Board of Pharmacy.

Below is a list of issues that will affect patient safety if SB 8 is passed:

- Loss of double check on prescription by trained pharmacists
- Decreased selection of drugs because NPs can only carry a limited number of medication bottles and may simply choose to use what is on hand
- NPs may not have an accurate record of all other medications the patient is on from other practitioners
- NPs are not the experts on drug interactions
- Lack of drug storage, preparation and labeling regulations, whereas pharmacies and pharmacists have strict standards they must comply with to assure patient safety
- Directly dispensed controlled prescriptions by NPs are not subject to reporting to the Prescription Drug Monitoring Program (PDMP) as are pharmacy dispensed prescriptions. The PDMP was established by the Legislature to support the appropriate use of prescription drugs. The information is intended to help people work with their healthcare providers and pharmacists to determine what medications are best for them. This program is a critical part of reducing inadvertent overdoses of prescription drugs.

SB 8 threatens patient safety

The Oregon State Pharmacy Association and Oregon Society of Health-System Pharmacists' primary concern is patient safety. Every healthcare professional is required to attain a degree specific to their practice, but that degree alone does not allow them to practice. These professionals must also pass a national examination, such as pharmacists passing the NAPLEX, and the disciplines law exam to demonstrate that they understand the information and have the ability to put their knowledge into practice. As professionals cross the threshold into other disciplines, such as NPs and PAs into pharmacy, the regulating board for the cross-over discipline should have regulatory control over them in this area. Therefore, the Board of Pharmacy (BOP) should have the regulatory control over the disbursement of pharmaceuticals.

In the 2012 session, the Legislature adopted just such a policy when it approved legislation allowing a supervising physician or a supervising physician organization to apply for dispensing authority from the Oregon Medical Board for a PA. The Legislature recognized the need for the Board of Pharmacy to have regulatory authority of the dispensing of drugs by including the following provision:

A supervising physician or supervising physician organization that supervises a physician assistant with dispensing authority shall comply with rules adopted by the Board of Pharmacy relating to registration, acquisition, storage, integrity, security, access, dispensing and disposal of drugs, record keeping and consultation with pharmacists.

Since the passage of that law, the Board of Pharmacy has adopted rules similar to other regulated drug outlets addressing acquisition, storage, integrity, security, access, dispensing, record keeping, and disposal of drugs and consultation with a pharmacist. The Board of Pharmacy's regulatory authority is restricted to the dispensing outlets and not to the physician assistants which remain under the regulatory authority of the Oregon Medical Board.

Should the Legislature consider adoption of this proposal, we believe that this same regulatory framework should be applied to the dispensing outlets of NPs that choose to dispense drugs and urge the Committee to adopt such a provision.

Equally important, SB 8 should require that any directly dispensed controlled prescriptions by NPs be subject to reporting to the PDMP as are pharmacy dispensed prescriptions. This program is a critical part of reducing inadvertent overdoses of prescription drugs and omission of those narcotic drugs dispensed by NPs would be counterproductive to the Oregon's efforts to reduce drug prescription abuse.

The Oregon State Pharmacy Association and the Oregon Society of Health-System Pharmacists urge your **opposition** to **SB 8** because it further erodes the historic checks on dispensing pharmaceuticals, diminishes oversight of dispensaries and creates a critical hole in our Prescription Drug Monitoring Program...all at the cost of patient safety.