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February 28, 2013

The Honorable Senator Laurie Monnes Anderson, Chair The Honorable Senator Jeff Kruse, Vice-Chair Senate Committee on Health Care and Human Services 900 Court Street NE 453, State Capitol Salem, OR 97301-4048

Chair Monnes Anderson, Vice-Chair Kruse and members of the Committee, I am here today to testify on SB 470 with the dash-1, dash-3, and dash-7 amendments.

The Oregon Prescription Drug Monitoring Program (PDMP) was passed by the legislature in the 2009 legislative session. Since the passage of the implementing legislation the Oregon Health Authority (OHA) has built the PDMP. It started collecting data on June 1, 2011 and the first prescribers began to review the data on September 1, 2011. As of December 2012 more than 9.3 million prescriptions have been reported into the system and more than 5,200 providers and pharmacists have queried the system almost 295,000 times.

Now that the system is up and operating we have identified a number of areas where the system needs to be improved and SB 470 will give OHA the authority to improve the system.

Specifically the bill will:

- Add additional data points needed for health care practice, including days supply dispensed; number of refills authorized; refill number; prescription number; sex of the patient and source of payment for the prescription.
- Allow authorized system users to delegate use of their account to persons within the prescriber's office. The prescriber remains responsible for overseeing the activity of delegates.
- Remove the prohibition against the use of program data by the state and local public health authorities.
- Protect all data in the program from public records requests.
- Allow health care providers to look up prescriptions dispensed under their own DEA numbers.
- Allow pathologists with the State Medical Examiners Office to access to data for autopsies and medical investigations

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There are three amendments that I would like to discuss:

- Dash-1 allows the Board of Pharmacy to develop a list of additional drugs that have a high potential for misuse and for the PDMP to begin to collect data on those drugs.
- Dash-3 authorizes the PDMP to send out notices to providers when dispensing to patients surpasses certain thresholds.
- Dash-7 authorizes prescribers in the states of Washington, Idaho and California
 who treat patients who are Oregonians to request accounts to access the Oregon
 PDMP. Given the ability of people to easily move across state boarders for health
 care, prescribers in neighboring states are seeing Oregon patients. If the
 prescriber cannot review the Oregon PDMP data on their patient they cannot
 provide the appropriate health care.

The PDMP is functioning exactly as you had hoped with you passed the enabling legislation in 2009. It is providing information to prescribers to help the prescriber provide the best and most appropriate health care to their patients.

I ask you to improve the OPDP system with SB 470 and the dash-1, dash-3, and dash-7 amendments.

Sincerely,

Thomas A. Burns

Director of Pharmacy Programs

Oregon Health Authority