



February 28, 2013

Members of the Senate Health Care and Human Services Committee,

My name is Cory Huot and I am representing the Oregon Pharmacy Coalition. I am here today to support the changes and amendments to the Prescription Drug Monitoring Program proposed by SB 470.

The pharmacists of Oregon have been willing supporters and users of the PDMP (with 15% of system accounts) and helped to fund the program through fees levied through the Oregon Board of Pharmacy. Oregon pharmacy has born the cost of providing the data to the Program and notification of patients that their prescription information is being provided to the PDMP. The PDMP has been a positive factor in the care of patients receiving controlled substances, allowing prescribers and dispensers to have a complete record of medication histories and dispensing of controlled substances prior to prescribing or dispensing these medications to patients. The system has provided the benefits to the people of Oregon intended by the legislature.

Oregon pharmacists support the revisions and amendments to ORS 431.960-431.992 as proposed by SB 470 because the Program would benefit the public further with some changes as presented in SB 470.

Key changes include the addition of several key data elements to the required list as outlined in Section 1 of the bill. These data would improve the usefulness of the program by providing information about refills provided and days supply dispensed by the pharmacy.

The program would be more effective if more physicians and pharmacist used the database, and the addition of language in Section 2 allowing staff members to access the database to assemble the patient drug regimen in advance of the visit will make the system more useful and increase its use among prescribers and dispensers.

There are amendments that would further improve the PDMP.

- Increasing the types and number of drugs included in the database provided by the dispensing pharmacies. Current national statistics reveal that the concurrent use of other centrally acting drugs, such as antidepressants and anti-psychotics increases the risk of inadvertent death with opioid narcotics, and having these drugs appear in the list would assist practitioners in the safe prescribing of these medications.
- Allowing links to the PDMP to be provided in Electronic Health Record Systems to facilitate its incorporation into the medical record.
- Allowing practitioners in neighboring states, especially Washington, to have access to the PDMP for Oregon residents that may seek care in adjacent states.
- The reporting of drugs dispensed by physicians, physician assistants, and nurse practitioners would close a current gap in the medication list.

- Removal of 431.962(g) requiring pharmacies to notify a patient about the prescription monitoring program

SB470 would improve the operations and functionality of the Prescription Drug Monitoring Program and I urge the committee to support its passage in the legislature.