March 7th 2023 SB 559

Dear Senate Committee On Health Care.

I strongly appose SB 559.

Oregon, has gained the unfortunate reputation during the past 5 plus years- of being a state that has major issues with the under treatment of pain. This is due in part- to statewide deprescribing measures on certain scheduled medications such as opioid based pain medications. These State measures have failed to appropriately track patient harms. The pendulum has swung too far and it appears pets are now feeling the effects of this. In my advocacy work I hear an increasing number of stories in Oregon, where pets are no longer getting appropriate and warranted pain care. Some of these stories are related to post op care after major surgeries or procedures, and some in regards to palliative and hospice care.

The unintended consequences of Oregon choosing to dramatically spare, or eliminate opioid based pain medication has caused serious harms to the people and pets who need them. I believe SB 559 will compound this serious issue and add additional constraints for veterinarians caring for these pets.

While I support measures to keep patients safe and doctors accountable in prescribing, the pendulum has swung too far. New data suggests that policing in the doctors offices and practices has had unintended consequences and harms. There are concerns with the SOS PDMP audit, the report continues to push the narrative that prescriptions are the major cause of overdoses, when in fact this is not the case. In the American Medical Association 2022 overdose epidemic report, the AMA states "Reductions in opioid prescribing have not led to reductions in drug-related mortality".

We must be vigilant to include new information and data as it comes in, and increase our awareness of patient harms and unintended consequences. Especially in regards to patient harms, privacy rights and over arching policies and measures.

Some additional concerns I would like to point out are:

- \* Bill SB 559 lacks supporting quality evidence and in some cases, transparency. Giving the impression we have a National or statewide emergency where pet owners are deliberately harming their pets to obtain scheduled medications. I see no sources to this claim, other than incredibly rare occurrences.
- \* Some of the supporting points used for this bill are following the lead of 11 other states. The number of states for whom Vets are added to the PDMP are limited, and some have even reversed their position. (Others removed vets from their states pdmp)
- \* Just as with human prescriptions, this bill could incentives prescribers to opt to prescribe less effective but non reportable pain medication to animals, to avoid the time burden, system challenges and elevated scrutiny. Again, we ask the state to be mindful of unintended consequences and harms.
- \* SB 559 attempts to Remove the public member currently serving on the PDMP Commission and permanently. I am unsure why this was added to this bill and I did not hear or read any supporting evidence as to why the non IT public member should be removed. It is imperative we have and retain balanced memberships on state commissions, whom serve the state of Oregon. A new bill, SB 607 had it's first hearing on February 20th 2023 and seeks to study

the membership of the Oregon Pain Management Commission to insure there is balance and patient representation. Why is SB 559 trying to delete an important member on the PDMP Commission? The current member on the commission is someone who lives with chronic pain and lived experience and brings important feedback and insight to the commission. Please see screenshots.

Thank you for your time

## **Member Representation**

AS IT STANDS NOW

The Advisory Commission shall consist of 11 members appointed by OHA as follows:

- A person nominated by the Pain Management Commission
- A person who dispenses controlled substances nominated by an association representing pharmacists
- A practicing dentist nominated by an association representing dentists
- A practicing physician nominated by an association representing physicians
- A practicing doctor of osteopathy nominated by an association representing osteopathic physicians and surgeons
- A nurse authorized to prescribe controlled substances nominated by an association representing nurses
- A practicing naturopathic physician nominated by an association representing naturopathic physicians
- A practicing optometrist, nominated by an association representing optometrists
- department responsible for administering addiction services

  Two members of the public nominated by the department, one

• A person nominated by the department from a division of the

Two members of the public nominated by the department, one of whom must be an expert in information technology.

## SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure as introduced.

Requires veterinarians to participate in prescription drug monitoring program. Directs Oregon State Veterinary Medical Examining Board to provide Oregon Health Authority with information of individuals licensed by board authorized to prescribe or dispense controlled substances for purposes of qualifying individuals to report information to and receive information from program.

Adds practicing veterinarian as member of Prescription Monitoring Program Advisory Commis-

sion. Reduces number of public members on commission from two members to one member.

## A BILL FOR AN ACT

Relating to the prescription drug monitoring program; amending ORS 431A.880 and 431A.890. 2 . . .

DULLULLE LIGHTON, 22 (g) A practicing naturopathic physician nominated by an association representing naturopathic 23

- (h) A practicing optometrist, nominated by an association representing optometrists;
- (i) A practicing veterinarian, nominated by an association representing veterinarians;
- [(i)] (j) A representative of the authority with expertise in administering addiction services; and
- [(j)] (k) [Two members] One member of the public, one of whom must be] who is an expert in

information technology. 28

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