

Testimony of the Board of Pharmacy

**Before the
House Committee on Health
Thursday, January 31, 2019
9:30 a.m.
State Capitol, Conference Room 329**

On the following measure: H.B. 75, RELATING TO THE BOARD OF PHARMACY

Chair Mizuno and Members of the Committee:

My name is Lee Ann Teshima, and I am the Executive Officer of the Board of Pharmacy (Board). The Board supports this bill, which proposes to allow the Board to approve pilot and demonstration projects for innovative applications in the practice of pharmacy under certain circumstances. This, in turn, will enhance the pharmacist's ability to provide more patient-centered services.

During the summer, the Board established the Pharmacy Working Group (Group), which consisted of major stakeholders in the pharmacy industry, including, but not limited to, representatives from both local independent and chain store pharmacies, the medical community, and insurance groups. In particular, the Group discussed legislation introduced during the 2018 legislative session, including those measures that were enacted as law, those that did not pass, and other measures that affected the pharmacy scope of practice.

For the Committee's information, one of the many topics discussed was the use of receptacles to allow pharmacies to participate in the national drug take-back initiative. Although this bill ultimately did not pass, the Group discussed how this project could benefit the public, as drug take-back is critical to ensuring the safe disposal of drugs. The Group also reviewed the laws of several states that allow pilot and demonstration research projects to be approved by the Board, including Virginia and California. The following is a short list of some of the pilot projects California and Virginia boards of pharmacy approved:

- In 2008, the California State Board of Pharmacy approved an E-Prescribing Pilot Project to determine the feasibility of, benefits of, and barriers to e-prescribing by a select group of Medi-Cal providers located in

Los Angeles County. The goals were to improve patient safety, enhance prescribing process efficiency, reduce costs, and increase provider satisfaction. The Board has attached to this testimony the survey and utilization results of this pilot project.

- In 2013, the Virginia Board of Pharmacy initiated a pilot program that allowed persons to obtain prescription naloxone to administer to family members or friends to counteract opiate overdoses.

Thank you for the opportunity to testify on this bill.

Survey & Utilization Results



LA.Care
HEALTHPLAN



Patient Safety



Factors Affecting the Prescri- bing Process

- 91% of providers believed e-Rx reduced pharmacy calls from illegible handwriting
- Alerts made providers aware of potential drug-drug interactions & drug allergies
- Providers reported the number of Adverse Drug Events dropped from 53 to 39

-
- Significant reduction time spent on pharmacy calls regarding illegible handwriting (-3 min., $p=0.0104$) & dosing changes (-1.83 min., $p=0.0162$)
 - 67% believed the e-Rx renewal feature saved provider and staff time
 - But increased time spent on pharmacy calls regarding formulary clarification &

prior authorizations



Costs Impact • Increased generic utilization rate from 65% to 78%
($p=0.013$, $n=20$)



UNIVERSITY OF HAWAII SYSTEM

Legislative Testimony

Testimony Presented Before the
House Committee on Health
Thursday, January 31, 2019 at 9:30 a.m.

By
Carolyn Ma, PharmD
Dean
UH Hilo – Daniel K. Inouye College of Pharmacy (DKICP)

HB 75 – RELATING TO BOARD OF PHARMACY

Chair Mizuno, Vice Chair Kobayashi, and members of the committees:

My name is Carolyn Ma and I am the Dean for the Daniel K. Inouye College of Pharmacy (DKICP). As the designated lead for interim Chancellor Marcia Sakai, the DKICP supports this bill that will allow the board of pharmacy to approve pilot and demonstration projects for innovative applications in the practice of pharmacy.

As the only accredited College of Pharmacy in the state and the Pacific Rim, the DKICP's mission is to provide cutting edge and progressive healthcare to our community through education, research and service. Our faculty are trained to the highest degree of expertise and the concepts of innovation and discovery are the keystones of our ability to advance the pharmacy profession. The most advanced teaching methods are employed with a progressive and dynamic curriculum.

Approximately 30% of the Doctor of Pharmacy curriculum is experiential based where our students, through their four years in the program will practice as student pharmacists under the mentorship of our Pharmacy Practice faculty. These faculty clinical pharmacists are placed into most health care hospitals and clinics on the four major islands of Hawaii, Oahu, Maui and Kauai with the primary responsibility to, via their practice site, teach our students in the clinical setting and to advance the professions level of pharmacy practice within the institution. As the academic arm of the pharmacy profession, we partner with our health care institutions and other health care professionals to study, assess and evaluate innovative pharmacy practice patient care delivery models, technological medication distribution models and safety. Continued study to gain knowledge and data from pilot projects help us to seek advances may help to address the rising demands of complex patient care. Many of the registered pharmacists that practice in hospitals, clinics and community retail pharmacy sites also mentor or precept our students.

This bill will allow projects to lawfully proceed and keep the Board of Pharmacy informed of projects. These projects may be important to address needed changes and support a more progressive and current set of administrative rules.

Thank you for the opportunity to testify.

Testimony of
Jonathan Ching
Government Relations Specialist

Before:
House Committee on Health
The Honorable John H. Mizuno, Chair
The Honorable Bertrand Kobayashi, Vice Chair

January 31, 2019
9:30 a.m.
Conference Room 329

Re: HB75, Relating to the Board of Pharmacy

Chair Mizuno, Vice Chair Kobayashi, and committee members, thank you for this opportunity to provide testimony on HB75, which permits the Hawai'i State Board of Pharmacy to approve pilot and demonstration projects for innovative applications in the practice of pharmacy.

Kaiser Permanente Hawai'i SUPPORTS HB75.

Kaiser Permanente Hawai'i is the state's largest integrated health system that provides care and coverage for 255,000 members. Each day, over 4,500 dedicated employees and more than 600 Hawai'i Permanente Medical Group physicians come to work to care for our members at Moanalua Medical Center and 27 other clinic locations, providing high-quality care and delivering on our commitment to improve the health of the 1.4 million people in the communities we serve.

Kaiser Permanente Hawai'i believes in continuously improving the effectiveness of health care delivery systems, including our pharmacies. One way to accomplish this objective is to utilize new technologies which enable health care personnel to reallocate health tasks to better and more efficiently meet the health needs of the public. We note that HB75 appears to be modeled after the Texas Pharmacy Act in which the Texas State Board of Pharmacy has considered projects for review that expand pharmaceutical care services and contribute to positive patient outcomes. Many of these projects have gone on to be implemented because they aid a pharmacist's ability to provide more patient-centered services.

Therefore, we believe that authorizing the Board of Pharmacy to approve pilot and demonstration research projects can accelerate innovation and create opportunities for pharmacists to enhance patient care and safety, reduce barriers, and increase access to pharmaceutical services.

Mahalo for the opportunity to testify on this important measure.



SanHi

GOVERNMENT STRATEGIES

A LIMITED LIABILITY LAW PARTNERSHIP

DATE: January 30, 2019

TO: Representative John Mizuno
Chair, Committee on Health
Submitted Via Capitol Website

RE: **H.B. 75 – Relating to The Board of Pharmacy**
Hearing Date: Thursday, January 31, 2019 at 9:30 a.m.
Conference Room: 329

Dear Chair Mizuno and Members of the Committee on Health:

We submit this testimony on behalf of Walgreen Co. (“Walgreens”). Walgreens operates stores at more than 8,200 locations in all 50 states, the District of Columbia, and Puerto Rico. In Hawaii, Walgreens now has 19 stores on the islands of Oahu, Maui, and Hawaii.

Walgreens **supports H.B. 75 with amendments**. This bill allows the board of pharmacy to approve pilot and demonstration projects for innovative applications in the practice of pharmacy under certain circumstances.

Walgreens supports the idea of pilot projects that could enhance patient care via the use of new technologies and believes that this bill would be a beneficial way to test innovation and demonstration projects.

However, we would ask for the language at paragraph (A) at page 3, lines 9-12 relating to drug take back programs be deleted from the bill. This language would require that drug take back programs be approved by the Board of Pharmacy. Currently, across the country board approval for drug take back programs is generally not required, because these programs are already strictly regulated at the federal level by the Drug Enforcement Agency. We would also note that H.B. 667, Relating to Health, being considered this legislative session, would authorize pharmacies to implement drug take back programs according to the existing federal law.

Thank you for the opportunity to submit testimony regarding this measure.