

Honolulu, Hawaii

MAR 02 2017

RE: S.B. No. 505
S.D. 1

Honorable Ronald D. Kouchi
President of the Senate
Twenty-Ninth State Legislature
Regular Session of 2017
State of Hawaii

Sir:

Your Committee on Commerce, Consumer Protection, and Health,
to which was referred S.B. No. 505 entitled:

"A BILL FOR AN ACT RELATING TO HEALTH,"

begs leave to report as follows:

The purpose and intent of this measure is to reduce
addiction, overdose, and death related to the use of opioids by:

- (1) Requiring an opioid therapy informed consent process
agreement to be executed between a patient and any
prescriber of opioids under certain conditions; and
- (2) Limiting initial prescriptions for opioids and
benzodiazepines to a maximum of seven consecutive days.

Your Committee received testimony in support of this measure
from the Early Childhood Action Strategy, Hawaii Opioids and
Overdose Leadership Action Working Group, and three individuals.
Your Committee received comments on this measure from the
Department of Health, Department of Public Safety, Board of
Nursing, Drug Policy Forum of Hawai'i, Hawaii Medical Association,
The Queen's Health Systems, Hawaii College of Emergency
Physicians, and Drug Policy Action Group.

Your Committee finds that Hawaii and the nation are facing an
epidemic related to prescription pain relieving drugs that are



causing frightening rates of addiction, overdose, and death. According to the National Institute on Drug Abuse, opioids account for the greatest proportion of the prescription drug abuse problem, with opioids causing more deaths than heroin or cocaine by 2002 when opioid prescriptions were on the rise. According to data provided by the PEW Charitable Trusts, opioid pain relievers killed nearly 20,000 Americans in 2014.

Your Committee further finds that national and state legislators, and many community groups, are trying to curb this epidemic through public education and limiting liberal opioid prescribing practices. Your Committee additionally finds that informed consent is an effective process between a provider and a patient that requires a specific medication or form of treatment such as safe opioid therapy. The informed consent process allows the patient to better understand the goals of treatment, potential benefits of treatment, realistic outcomes, potential risks, how to use the medication, and alternative treatment options.

Your Committee recognizes that any approach to curb the opioid epidemic must balance the medically justified and necessary use of opioid pain medication with the reality of increased opioid misuse, abuse, and overdose. Your Committee also recognizes that patients in certain circumstances suffering from certain conditions may not be served by a strict seven-day limit on initial prescriptions of opioids. Furthermore, your Committee acknowledges that healthcare professionals need to be held accountable for following rules pertaining to opioid prescribing, but that related disciplinary action should come from professional licensing boards. Finally, your Committee finds that advanced practice registered nurses are primary care providers and, therefore, are qualified to provide concurrent care and consultation to patients who are going through opioid therapy.

Accordingly, your Committee has amended this measure by:

- (1) Requiring the Harm Reduction Services Branch of the Department of Health, instead of the Administrator of the Narcotics Enforcement Division of the Department of Public Safety, to develop and make available a template of an opioid therapy informed consent process agreement;



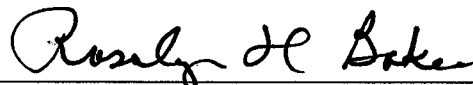
- (2) Inserting a provision to require that the template for the opioid therapy informed consent process agreement include an assessment of reproductive health plans for women ages 18 to 50 and a statement that the patient has been advised of the risks of opioid use during pregnancy and has been offered information regarding how to avoid pregnancy while using opioids;
- (3) Inserting language to include an advanced practice registered nurse as an authorized healthcare provider to whom a patient may consent to be referred for concurrent care if opioid therapy continues for longer than six months;
- (4) Inserting a provision to require that all opioid therapy informed consent process agreements be filed with the Harm Reduction Services Branch of the Department of Health for monitoring;
- (5) Inserting language to clarify that prescribers who violate the mandatory opioid therapy informed consent process shall be subject to disciplinary action established by the Hawaii Medical Board or the State Board of Nursing;
- (6) Inserting language to require all prescribers who are authorized to prescribe opioids in the State to register with Hawaii's Electronic Prescription Accountability System, which is commonly known as the Hawaii Prescription Drug Monitoring Program;
- (7) Inserting provisions to allow the prescription of opioids and benzodiazepines for longer than seven days if determined to be medically necessary for the treatment of post-operative pain, chronic pain, substance abuse or opioid dependence, or pain while in palliative care or hospice care; provided that the practitioner must document in the patient's medical record the condition for which the prescription is necessary and that no alternative is appropriate to treat the condition;



- (8) Inserting a provision that allows prescribing practitioners to authorize follow-up prescriptions for opioids and benzodiazepines through a telephone consultation with post-operative and pain management patients but requires an in person consult at least every thirty days;
- (9) Inserting an effective date of July 1, 2050, to encourage further discussion; and
- (10) Making technical, nonsubstantive amendments for the purposes of clarity and consistency.

As affirmed by the record of votes of the members of your Committee on Commerce, Consumer Protection, and Health that is attached to this report, your Committee is in accord with the intent and purpose of S.B. No. 505, as amended herein, and recommends that it pass Second Reading in the form attached hereto as S.B. No. 505, S.D. 1, and be placed on the calendar for Third Reading.

Respectfully submitted on
behalf of the members of the
Committee on Commerce, Consumer
Protection, and Health,



ROSALYN H. BAKER, Chair



The Senate
 Twenty-Ninth Legislature
 State of Hawai'i

Record of Votes
Committee on Commerce, Consumer Protection, and Health
CPH

Bill / Resolution No.:* SB505	Committee Referral: CPH	Date: 2/22/17		
<input type="checkbox"/> The Committee is reconsidering its previous decision on this measure. If so, then the previous decision was to: _____				
The Recommendation is: <input type="checkbox"/> Pass, unamended 2312 <input checked="" type="checkbox"/> Pass, with amendments 2311 <input type="checkbox"/> Hold 2310 <input type="checkbox"/> Recommit 2313				
Members	Aye	Aye (WR)	Nay	Excused
BAKER, Rosalyn H. (C)	/			
NISHIHARA, Clarence K. (VC)	/			
CHANG, Stanley	/			
ESPERO, Will	/			
IHARA, Jr., Les	/			
KIDANI, Michelle N.	/			
RUDERMAN, Russell E.				/
TOTAL	6			1
Recommendation: <input checked="" type="checkbox"/> Adopted <input type="checkbox"/> Not Adopted				
Chair's or Designee's Signature: <i>Clarence K. Nishihara</i>				
Distribution: Original Yellow Pink Goldenrod File with Committee Report Clerk's Office Drafting Agency Committee File Copy				

*Only one measure per Record of Votes