

STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY
919 Ala Moana Boulevard, 4th Floor
Honolulu, Hawaii 96814

NOLAN P. ESPINDA
DIRECTOR

Cathy Ross
Deputy Director
Administration

Jodie F. Maesaka-Hirata
Deputy Director
Corrections

Renee R. Sonobe Hong
Deputy Director
Law Enforcement

No. _____

TESTIMONY ON HOUSE BILL 1602
RELATING TO OPIOIDS

by
Nolan P. Espinda, Director
Department of Public Safety

House Committee on Health and Human Services
Representative John M. Mizuno, Chair
Representative Bertrand Kobayashi, Vice Chair

Thursday, February 1, 2017; 9:30 a.m.
State Capitol, Conference Room 329

Chair Mizuno, Vice Chair Kobayashi, and Members of the Committee:

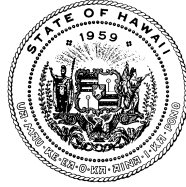
The Department of Public Safety (PSD) **supports the intent** of House Bill (HB) 1602, which would require that persons who sell opioid drugs provide a statutorily-specific label on the drug's container warning of the risks of addiction and death, and offers the following comments.

First, PSD notes that the labeling requirements of section 329-38, Hawaii Revised Statutes (HRS) would substantially apply to the proposed labeling requirements under this bill. Many controlled substances are opioid drugs subject to section 329-38, HRS, requiring that controlled substances in schedules II-V be labeled with specific information, such as, dosage, name, strength, and quantity, when those controlled substances are dispensed by practitioners, other than a pharmacist. One of the labeling requirements in section 329-38, HRS is the inclusion of such "cautionary statements" as proposed in this bill.

Second, under section 329-41(1), HRS, a violation of chapter 329-38 is a felony. This proposed bill mandates a proposed specific, cautionary statement. As a result of this bill, a practitioner other than a pharmacist, such as a physician, may

be committing a felony offense if that physician did not include the required label proposed in HB1602 when that physician dispenses an opioid drug. PSD instead recommends that the proposed warning in HB1602 be included on literature, provided to the patient, when opioid drugs are dispensed by practitioners other than a pharmacist.

Thank you for the opportunity to present this testimony.



STATE OF HAWAII
DEPARTMENT OF HEALTH
P. O. Box 3378
Honolulu, HI 96801-3378
doh.testimony@doh.hawaii.gov

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**Testimony COMMENTING on S.B. 1602
RELATING TO OPIOIDS**

REPRESENTATIVE JOHN M. MIZUNO, CHAIR
HOUSE COMMITTEE ON HEALTH & HUMAN SERVICES

Hearing Date: January 31, 2018

Room Number: 329

1 **Fiscal Implications:** Undetermined

2 **Department Testimony:** This measure intends to educate patients about the dangers of opioid
3 use. The Department of Health (DOH) applauds the intent of this bill and recognizes the
4 commitment of the sponsors of this measure to step up state efforts to combat the opioid
5 epidemic through multi-faceted strategies such as warning labels and comprehensive health
6 insurance coverage for opioid treatment.

7 The DOH defers to the Department of Public Safety regarding the implementation of the
8 amendment to HRS Chapter 329E which may eventually require some enforcement against
9 retailers who do not follow the proposed labelling standard.

10 The DOH Alcohol and Drug Abuse Division (ADAD) believes that the prevalence of
11 substance use disorders encompass a wide variety of substances besides opioids and many who
12 suffer from the chronic illness of substance abuse, misuse multiple drugs. The ADAD is
13 committed to addressing both opioid misuse as well as the broader addiction problem in Hawaii
14 and has been working closely with other government and community entities to coordinate a
15 comprehensive response plan to address opioids and substance abuse in general. From a wider
16 chronic illness perspective, substance misuse and addiction represents significant public health
17 and economic burdens for Hawaii. This is presented in more detail in the Hawaii Opioid Action
18 Plan, which is found at: [https://health.hawaii.gov/substance-abuse/files/2013/05/The-Hawaii-](https://health.hawaii.gov/substance-abuse/files/2013/05/The-Hawaii-Opioid-Initiative.pdf)
19 [Opioid-Initiative.pdf](https://health.hawaii.gov/substance-abuse/files/2013/05/The-Hawaii-Opioid-Initiative.pdf)

20 According to the Hawaii Opioid Action Plan (Dec. 2017):

- 1 • There are an average of nearly 400 nonfatal overdose incidents each year, nearly
2 half of which require hospitalization; and
- 3 • The issue of opioid misuse and addiction cannot be fully appreciated unless seen
4 from from a broader context of a chronic illness perspective, which shows that
5 substance misuse and addiction represents significant public health and economic
6 burdens for Hawaii:
 - 7 ○ Workplace drug tests positive for methamphetamine were 410% higher
8 than the national average in 2011;
 - 9 ○ Impaired driving deaths in Hawaii (2010-2014) were 39.4% compared to
10 the national average of 30.0%; and
 - 11 ○ Data from ADAD-funded providers suggests that methamphetamine was
12 reported as the primary drug of choice upon admission for 53.4% of adults
13 receiving substance misuse treatment in FY2017.

14 Treatment admission data from 2010-2016 in Hawaii further underscores the need for a
15 focus on the broader addiction issue in the state and for a coordinated and comprehensive
16 approach to addiction in Hawaii.

17 Thank you for the opportunity to provide testimony.



HB1602 Labeling Opioid Medication

HOUSE COMMITTEE ON HEALTH & HUMAN SERVICES:

- Representative John Mizuno, Chair; Representative Bertrand Kobayashi, Vice Chair
- Thursday, February 1st, 2018: 9:30 a.m.
- Conference Room 329

HAWAII SUBSTANCE ABUSE COALITION Opposes HB1602:

GOOD MORNING CHAIR, VICE CHAIR AND DISTINGUISHED COMMITTEE MEMBERS. My name is Alan Johnson. I am the current chair of the Hawaii Substance Abuse Coalition (HSAC), a statewide hui of almost 40 non-profit alcohol and drug treatment and prevention agencies.

While HSAC agrees with the intent of the bill, there are considerations to discuss in a more comprehensive manner before labeling a drug. Also the font size indicated is much too big for the container.

HSAC wholeheartedly agrees with the language in the narrative in Section 1 that:

1. More comprehensive health insurance coverage for the treatment of opioid dependence;
2. Data collection on opioid overdoses and deaths;

More discussion is needed before determining the following:

1. Warnings to accompany opioid prescriptions following regulatory approaches;
2. Lowest possible dosage levels for prescriptions since this involves medical necessity.

Recommend that the State in its Hawaii Opioid Initiative: A Statewide Response, a task force of about 150 state and provider individuals and groups, address the issues presented in this bill.

We appreciate the opportunity to provide testimony and are available for questions.



HAWAII CHAPTER - AMERICAN PHYSICAL THERAPY ASSOCIATION

(800) 554-5569 x13 • www.hapta.org • info@hapta.org

**HB 1602, Relating to Opioids
HHS Committee Hearing
Thursday, Feb. 1, 2018 – 9:30 am
Room 329
Position: Support**

Chair Mizuno, Vice Chair Kobayashi and Members of the Health and Human Services Committee:

I am Gregg Pacilio, PT and Board President of the Hawaii Chapter of the American Physical Therapy Association (HAPTA), a non-profit professional organization serving more than 300 member Physical Therapists and Physical Therapist Assistants. Our members are employed in hospitals and health care facilities, the Department of Education school system, and private practice. We are movement specialists and are part of the spectrum of care for Hawaii, and provide rehabilitative services for infants and children, youth, adults and the elderly. Rehabilitative services are a vital part of restoring optimum functioning from neuromusculoskeletal injuries and impairments.

HAPTA **supports** the requirement of warning labels on Opioid prescriptions warning of potential addiction and harm. As physical therapists, our professional association, The American Physical Therapy Association (APTA), has started a movement within our profession to fight the growing epidemic of opioid addiction. The APTA and the Hawai'i chapter (HAPTA) have adopted the #choosePT tag to help bring attention to this growing non-injury or disease related cause of death. So we continue to support any means that align with our goals to promote the choice of alternative methods of treatment and decrease the abuse of opioids in health care.

Your support of HB 1602 is appreciated. Thank you for the opportunity to testify. Please feel free to contact Justin Ledbetter, HAPTA's Wellness Issue Lead at (334) 740-0323 for further information.



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GOVERNMENT STRATEGIES

A LIMITED LIABILITY LAW PARTNERSHIP

DATE: January 31, 2018

TO: Representative John Mizuno
Chair, Committee on Health & Human Services
Submitted Via HHSTestimony@capitol.hawaii.gov

RE: **H.B. 1602 Relating to Opioids**
Hearing Date: Thursday, February 1, 2018 at 9:30 a.m.
Conference Room: 329

Dear Chair Mizuno and Members of the Committee on Health & Human Services:

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 the intent of H.B.1602, but requests amendments to the bill.** H.B. 1602 requires that persons who sell opioid drugs must also provide a label warning of the risks of addiction and death.

Walgreens is committed to comprehensive efforts to combat drug abuse and has supported several measures to help with the opioid crisis. While not opposed to a warning label, Walgreens is concerned regarding the way this measure is currently drafted and believes it would be difficult to implement and create operational challenges for pharmacies and other practitioners. We would also note that any policy regarding opioid warning labels needs to be balanced against having the opposite impact, where adding visuals could make opioids more attractive among other medications.

The requirement that an opioid warning label be in 14-point font is an issue because Walgreens' labeling printers cannot print in that size, and some bottles will not be big enough to fit a label with this size. There are also other instructions on a bottle that also need to be included and provide important information about opioids (like dosage, other side effects etc). Because different pharmacies have different limitations, we believe it would be best to make a warning as simple as possible to implement.

Based on these concerns we would suggest that the bill remove the current wording of the warning, and either require approval by an appropriate governing agency, and/or significantly shorten the warning language and allow flexibility for using similar wording to comply.

We are happy to work with the committee on this measure and offer language if needed. Thank you for the opportunity to submit testimony regarding this bill.