

STATE OF HAWAII DEPARTMENT OF PUBLIC SAFETY

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TESTIMONY ON SENATE BILL 2811, SENATE DRAFT 1 RELATING TO THE UNIFORM CONTROLLED SUBSTANCES ACT By Nolan P. Espinda, Director

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

Tuesday, March 20, 2018; 8:30 a.m. State Capitol, Conference Room 329

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

The Department of Public Safety (PSD) **supports** Senate Bill (SB) 2811, Senate Draft (SD) 1, which proposes to amend Hawaii's controlled substances act to clarify state law and mirror federal regulations which permit qualified practitioners to administer, dispense, and prescribe controlled substances for use as medically managed withdrawal treatment, provided that the practitioner complies with specific requirements which mirror federal regulations.

First, SB 2811, SD 1 clarifies that a prescription may not be issued for medically managed withdrawal treatment <u>unless</u> the practitioner complies with Title 21 of the Code of Federal Regulations (CFR) section 1301.28, the registration and any requirements of section 329-32(e), HRS, and "any other federal or state regulatory standard relating to the treatment qualification, security, records, and unsupervised use of drugs."

Second, SB 2811, SD1 also clarifies that a practitioner who holds a separate Drug Enforcement Administration (DEA) registration as a narcotic treatment Testimony on SB 2811, SD 1 House Committee on Health, and Human Services March 20, 2018 Page 2

program and is in compliance with DEA regulations regarding treatment qualifications, security, records, and unsupervised use of drugs pursuant to this chapter, may administer or dispense directly (but not prescribe) a narcotic drug listed in any schedule for the purpose of medically managed withdrawal.

Third, SB 2811, SD 1 clarifies two additional situations which are referenced in Title 21, CFR, section 1306.07. This bill allows a physician to treat a person to relieve acute withdrawal symptoms for not more than three days without renewal or extension. Also, this bill clarifies the situation wherein a physician or authorized hospital staff may administer or dispense narcotic drugs in a hospital to maintain or detoxify a person as an incidental adjunct to medical or surgical treatment in limited situations.

Fourth, SB 2811, SD 1 clarifies that practitioners who are in compliance with federal and state registration requirements related to medically managed withdrawal treatment, and who are also in compliance with federal and state regulatory standards relating to treatment qualification, security, records, and unspupervised drugs may administer, dispense, **and prescribe** any schedule III, IV, or V narcotic drug approved by the United States Food and Drug Administration (FDA) for use in medically managed withdrawal treatment to a narcotic dependent person.

Finally, the exclusionary wording on page 1, lines 10-14, mirrors the wording in Title 21, CFR, section 1308.12. This wording specifically excludes the drug "naloxone" from scheduling as a controlled substance. This allows Naloxone to be administered, dispensed, or prescribed without the regulatory controls of a scheduled controlled substance.

Thank you for the opportunity to testify on this measure.



STATE OF HAWAII DEPARTMENT OF HEALTH

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Testimony in SUPPORT of SB 2811 SD 1 RELATING TO THE UNIFORM CONTROLLED SUBSTANCES ACT

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

Hearing Date: March 20, 2018 Room Number: 329

1 Fiscal Implications: None

- 2 **Department Testimony:** The Department of Health (DOH) strongly supports this bill to clarify
- 3 how practitioners as defined under the State Uniform Controlled Substances Act may administer,
- 4 dispense and prescribe schedule III, IV or V narcotic drugs approved by the U.S. Food and Drug
- 5 Administration for use in maintenance or detoxification treatment, provided the practitioner
- 6 meets federal and state criteria for a narcotic treatment program. The DOH is aware that the
- 7 Department of Public Safety (PSD) has introduced language to update Chapter 329, Hawaii
- 8 Revised Statutes (HRS), to be consistent with federal law by allowing prescribing authorization
- 9 of drugs including buprenorphine to patients undergoing "medically managed withdrawal", also
- 10 known as "detoxification treatment" and "maintenance treatment,' by practitioners who are
- properly registered. The DOH defers to the PSD on the regulation and implementation of the
- 12 Uniform Controlled Substances Act and respectfully offers the following comments:
- The DOH, Alcohol and Drug Abuse Division (ADAD) notes that the practice of
- prescribing, administering and dispensing medications such as suboxone are critical components
- of the treatment continuum for persons suffering from opioid use disorders. We also note that
- the U.S. Substance Abuse and Mental Health Services Administration strongly supports the use
- of these medications as important components of opioid treatment. PSD and the DOH are
- working together on a coordinated and balanced public safety/public health approach to address
- 19 narcotic addiction. The PSD has been an important and active partner in the development and
- implementation of the Hawaii Opioid Action Plan. SB 2811 SD 1 and its companion HB 2384

- 1 HD 1 aligns with Plan Objective 1-3: "By December 2018, increase the number of prescribers
- 2 licensed to prescribe and administer medication-assisted treatment (MAT) such as buprenorphine
- and suboxone by 25 percent." The full Plan is available at: https://health.hawaii.gov/substance-
- 4 abuse/files/2013/05/The-Hawaii-Opioid-Initiative.pdf.
- 5 Thank you for the opportunity to provide testimony.



SB2811 SD1 Medications for Opioid Treatment

COMMITTEE ON HEALTH AND HUMAN SERVICES:

- Representative John Mizuno, Chair; Representative Bertrand Kobayashi, Vice Chair
- Tuesday, March 20, 2018: 8:30 am
- Conference Room 329

Hawaii Substance Abuse Coalition (HSAC) Supports SB2811 SD1:

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 organization of almost 40 alcohol and drug treatment and prevention agencies.

Buprenorphine, naltrexone, vivitrol, and naloxone are FDA approved and supported by the federal funding agency: Substance Abuse Mental Health Services Administration (SAMHSA) for the treatment for alcohol, methamphetamine and opioid use disorders. They are essential evidenced-based practices for "Medication-Assisted Treatment."

While these medications don't replace counseling or formal addiction treatment, they improve outcomes for receptive or clinically appropriate patients.

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



Life Foundation & The CHOW Project

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TESTIMONY IN SUPPORT OF SB2811 SD1: RELATING TO CONTROLLED SUBSTANCES

TO: Representative John Mizuno, Chair; Representative Bert Kobayashi, Vice Chair; House

Committee on Health and Human Services

FROM: Heather Lusk, Executive Director, CHOW Project

Hearing: Tuesday, March 20, 2018 8:30 AM Conference Room 329, State Capitol

Dear Chair Mizuno, Vice Chair Kobayashi, and members of the Committee on Health and Human Services:

I thank you for this opportunity to testify in **support** of **SB2811 SD1** relating to the Uniform Controlled Substances Act.

SB2811 brings clarity to the provision of maintenance or detoxifying treatment through the Uniform Controlled Substances Act. Buprenorphine, naltrexone, vivitrol, and naloxone are all approved by the FDA and supported by the Substance Abuse Mental Health Services Administration (SAMHSA). When coalesced with counseling services and formal treatment, Medication-Assisted Treatment provides essential care for those struggling with substance use disorder.

These practices are key to effective Medication-Assisted Treatment and improve outcomes for the treatment of opioid use disorders, methamphetamine, and alcohol.

Thank you for the opportunity to testify on this measure.

Sincerely

Executive Director

CHOW Project + Life Foundation

<u>SB-2811-SD-1</u> Submitted on: 3/18/2018 11:46:53 PM

Testimony for HHS on 3/20/2018 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Carl Bergquist	Drug Policy Forum of Hawaii	Support	No

Comments:

SB-2811-SD-1

Submitted on: 3/19/2018 2:50:23 AM

Testimony for HHS on 3/20/2018 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Melodie Aduja	OCC Legislative Priorities Committee, Democratic Party of Hawai'i	Support	No

Comments:

To the Honorable John M. Mizuno, Chair; the Honorable Bertrand Kobayashi, Vice-Chair and Members of the House Committee on Health & Human Services:

Good morning. My name is Melodie Aduja. I serve as Chair of the Oahu County ("OCC") Legislative Priorities Committee of the Democratic Party of Hawaii. Thank you for the opportunity to provide written testimony on **SB2811 SD1** relating to the Uniform Controlled Substances Act; and Medically Managed Withdrawal.

The OCC Legislative Priorities Committee is in favor of **SB2811 SD1** and supports its passage.

SB2811 SD1 is in accord with the Platform of the Democratic Party of Hawai'i ("DPH"), 2016, as it updates chapter 329, Hawaii Revised Statutes, to be consistent with federal law, by allowing prescribing authorization of drugs which include buprenorphine and naloxone to patients undergoing "medically managed withdrawal", also known as "detoxification treatment" and "maintenance treatment" by practitioners who are properly registered.

Specifically, the DPH Platform provides that we "also support the establishment of adequate mental health and statewide drug rehabilitation programs set up in conjunction with policing policies aimed at enabling all that seek assistance to obtain whatever support assistance is needed to allow them to remain free of drug dependence." (Platform of the DPH, P. 7, Lines 382-284 (2016)).

Given that **SB2811 SD1** updates chapter 329, Hawaii Revised Statutes, to be consistent with federal law, by allowing prescribing authorization of drugs which include buprenorphine and naloxone to patients undergoing "medically managed withdrawal", also known as "detoxification treatment" and "maintenance treatment" by practitioners who are properly registered, it is the position of the OCC Legislative Priorities Committee to support this measure.

Thank you very much for your kind consideration.

Sincerely yours,

/s/ Melodie Aduja

Melodie Aduja, Chair, OCC Legislative Priorities Committee

Email: legislativepriorities@gmail.com, Text/Tel.: (808) 258-8889