DAVID Y. IGE GOVERNOR OF HAWA



P. O. Box 3378 Honolulu, HI 96801-3378 doh.testimony@doh.hawaii.gov

Testimony in SUPPORT of H.B. 0140 H.D. 2 RELATING TO HEALTH

REPRESENTATIVE JOHN M. MIZUNO, CHAIR HOUSE COMMITTEE ON HEALTH

Hearing Date: February 6, 2020 Room Number: 329

- 1 **Department Position:** The Department of Health (Department) supports this measure.
- 2 **Department Testimony:** The subject matter of this measure falls within the scope of the
- 3 Department's Behavioral Health Administration (BHA) whose statutory mandate is to assure a
- 4 comprehensive statewide behavioral health care system by leveraging and coordinating public,
- 5 private and community resources. Through the BHA, the Department is committed to carrying
- 6 out this mandate by reducing silos, ensuring behavioral health care is readily accessible, and
- 7 person-centered. The BHA's Alcohol and Drug Abuse Division (ADAD) provides the following
- 8 testimony on behalf of the Department.
- 9 The Department supports this initiative by the Department of Public Safety (PSD) to increase
- Hawaii's public health surveillance capacity by amending HRS §329-104 to allow prescribers,
- dispensers and pharmacists at Hawaii Veteran's Administration (VA) facilities and authorized
- 12 employees of the Department of Human Services, MedOUEST Division (MOD) to access
- information stored in the electronic prescription accountability system (EPAS). This measure
- also aligns with the following objectives of the Hawaii Opioid Initiative:
- By December 2020, propose legislation to amend administrative rules and reduce over prescribing or prescribing practices that are of concern (separate from law enforcement);
- By December 2020, adapt plans used in other states for Hawai'i to educate physicians
 specific to opioid prescribing and pain management practices with continued oversight to
 ensure information is current.

- Establish three memoranda of understanding or other agreements for interdepartmental
 data sharing;
- Disseminate quarterly surveillance data in report form through a data dashboard, to all
 key government agencies, community partners, HOI stakeholders, and the Centers for
 Disease Control and Prevention; and
 - Continue to collaborate with PSD's Narcotics Enforcement Division for EPAS utilization and enhancements.
- 8 Last year the Legislature passed SB1486 CD1 (later Act 230 SLH 2019) which allowed
- 9 authorized employees of ADAD and the Emergency Medical Services and Injury Prevention
- Branch to use the EPAS for public health surveillance. Act 230 SLH 2019 fulfilled one of the
- early objectives of the HOI.

6

7

- ADAD is working more closely with MQD to expand contractual services and staffing provided
- by the Hawai'i Coordinated Access Resource Entry System, or Hawai'i CARES initiative that
- started October 2019. Expanded VA prescriber usage will elevate the EPAS to a "mainstream"
- surveillance tool and provide more opportunities for prescriber education and boost system user
- and registration rates. Allowing MQD to use the EPAS for surveillance provides additional
- 17 checks and balances to ensure appropriate billing for services and appropriate prescribing and
- treatment access for Medicaid members.
- 19 Thank you for the opportunity to testify.



PANKAJ BHANOT DIRECTOR

CATHY BETTS
DEPUTY DIRECTOR

STATE OF HAWAII DEPARTMENT OF HUMAN SERVICES

P. O. Box 339 Honolulu, Hawaii 96809-0339

February 4, 2020

TO: The Honorable Representative John M. Mizuno, Chair

House Committee on Health

FROM: Pankaj Bhanot, Director

SUBJECT: **HB 140 HD2 – RELATING TO HEALTH**

Hearing: February 6, 2020, 8:45 a.m.

Conference Room 329, State Capitol

DEPARTMENT'S POSITION: The Department of Human Services (DHS) supports this bill.

<u>PURPOSE</u>: The purpose of this bill is to update section 329-104(c), Hawaii Revised Statutes, to clarify who may access information stored in the electronic prescription accountability system.

Adding authorized employees of DHS Med-QUEST Division to the list of individuals who may receive investigative information from the electronic prescription accountability system will enhance DHS clinical and program integrity efforts. This is in alignment with the Hawaii Opioid Action Plan to address the problems of opioid misuse and abuse as well as addressing the needs for substance use disorder (SUD) treatment.

With access to this information, DHS would be able to find prescribers and members that circumvent our current system of checks in place. DHS is presently limited in how it can identify prescribers that write prescriptions for some medications, but then instruct Medicaid beneficiaries to pay cash when they go to the pharmacy as a way for the prescriber to evade the strict prescribing guidelines in place. DHS is also limited in how it can identify beneficiaries that get prescriptions from multiple prescribers through doctor shopping. While prescribers

should be checking the electronic prescription accountability system for prescribing to these individuals, sometimes beneficiaries are still able to slip through the system. If DHS had access to the electronic prescription accountability system, then we could take action against bad actors and reach out to beneficiaries that have SUD treatment needs.

Giving Med-QUEST employees access could also help bring additional federal dollars to the electronic prescription accountability system. According to federal rules, states can receive up to 90 percent of the cost to build or enhance IT systems from the federal government that benefit state Medicaid programs. To access this funding, there must be a direct link between the Medicaid program and the electronic prescription accountability system. The language of this bill establishes that link and will help the state claim additional federal dollars for continued improvements to the system.

Thank you for the opportunity to testify on this bill.

DAVID Y. IGE GOVERNOR





STATE OF HAWAII DEPARTMENT OF PUBLIC SAFETY

919 Ala Moana Boulevard, 4th Floor Honolulu, Hawaii 96814

NOLAN P. ESPINDA DIRECTOR

Maria C. Cook Deputy Director Administration

Shari L. Kimoto Deputy Director Corrections

Renee R. Sonobe Hong
Deputy Director
Law Enforcement

TESTIMONY ON HOUSE BILL 140, PROPOSED HOUSE DRAFT 2 RELATING TO HEALTH.

by Nolan P. Espinda, Director

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

Thursday, February 6, 2020; 8:45 a.m. State Capitol, Conference Room 329

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

The Department of Public Safety (PSD) **supports** House Bill (HB) 140, Proposed House Draft (HD) 2, which updates section 329-104(c), Hawaii Revised Statutes, to clarify who may access information stored in the electronic prescription accountability system (EPAS), more commonly known as the Prescription Drug Monitoring Program (PDMP). The department also requests an amendment to subsection 10 on page 3, line 13 – 17, which will be explained below.

PSD supports the proposed draft of HB 140 for several important reasons, the most important being that this measure aligns with the goals of the Hawaii Opioid Initiative. First, the measure clarifies that an advance practice registered nurse (APRN) has the authority to access information stored on the PDMP. APRNs are already mandated to use the PDMP when they prescribe controlled substances in certain situations.

Second, the bill clarifies that a pharmacist may access the PDMP to check for information regarding a customer being serving. Currently, pharmacists may query a customer in the PDMP only when they suspect that a violation of law is occurring. The

Testimony on HB 140, Proposed HD 2 House Committee on Health February 6, 2020 Page 2

ability for a pharmacist to check the PDMP before dispensing a controlled substance, without first suspecting a violation of the law, is best practice for every pharmacist.

Third, the measure would allow authorized employees of the State Department of Human Services, Med-Quest Program, which manages the federal Medicaid Program in Hawaii, to access information in the PDMP. Allowing Med-Quest access the PDMP provides additional checks and balances to ensure appropriate billing for services, appropriate prescribing, and treatment access for Medicaid members. Further, the federal Medicaid Program has instituted new efforts to combat the nationwide opioid problem. As a result, PSD has been working closely with the State Med-Quest Office to cooperatively combat the national opioid problem.

Finally, PSD respectfully requests an amendment to Section 1, page 3, lines 13 -15 as follows:

(10) Controlled substances prescribers, dispensers, and pharmacists of

Licensed healthcare providers or delegates of such providers employed

by the United States Department of Veteran Affairs facilities within the

State who submit data, as described in section 329-101, to the electronic prescription accountability system;

This revision is requested because on January 29, 2020, PSD was notified that the federal government passed a new law called the "Mission Act," which requires that every state provide access to their PDMPs for Department of Veteran's Affairs licensed healthcare providers, and their delegates, without exception. This amendment is recommended to be consistent with this new federal law.

Thank you for the opportunity to testify on this measure.