STATE REPRESENTATIVE DEBRA KOLSTE



44TH DISTRICT

WISCONSIN STATE ASSEMBLY

To:

Assembly Committee on Health

From: Representative Debra Kolste

Re:

Testimony on Assembly Bill 125

Date: March 22, 2017

Chairman Sanfelippo, Vice-Chair Bernier, and fellow committee members, thank you for holding a public hearing today on Assembly Bill 125. I appreciate the opportunity to testify before you regarding the merits of this legislation.

AB 125 would authorize pharmacists to extend a patient's expired prescription in the case of an emergency. There are instances in which patients are unable to reach their prescribing physician and could be without life sustaining medication. This can create an emergency situation for patients on regimented treatments and put pharmacists in an ethical quandary, debating whether or not they should provide medication without the consent of the physician. This bill allows a pharmacist to use their professional judgement and avoid a potentially fatal situation rather than putting the onus on the patient to monitor expiration dates for various medications.

After hearing of an individual in Ohio that passed away from ketoacidosis, a complication that diabetics prevent with routine insulin treatments, because they were unable to reach their doctor, I wanted to ensure that something similar did not happen here in Wisconsin.

AB 125 is modeled after other successful state bills while also taking into account the opinions of prescribing doctors who are ultimately responsible for their patients. That is why the bill prohibits prescription refills for controlled substances and limits the amount of medication to a 7 day supply. A pharmacist is also required to notify the prescribing physician of any emergency refill dispensed at their earliest convenience to ensure that patient prescribing records are up to date.

With that, I ask you to please consider the passage of AB 125 and thank you again for allowing me to testify today.

Debra Kolste



Assembly Committee on Health

Wednesday, March 22, 2017

Assembly Bill 125

Chairman Sanfelippo, committee members, thank you for taking time today to hear testimony on Assembly Bill 125.

This proposal is a straightforward, commonsense solution to a problem many pharmacists see on a regular basis. Sometimes patients on a drug therapy routine are unable to contact their prescribing practitioner when they run out of refills of their prescription. Under current law, this means patients would have to break an established prescription routine until the prescriber could be contacted.

This bill fixes that problem by implementing the ability for a pharmacist to dispense a seven-day emergency refill in the event that the prescribing authority cannot be contacted.

Assembly Bill 125 includes additional provisions in the bill to ensure patient safety and secure the authority of the prescribing practitioner. The legislation prohibits the dispensing of an emergency refill for a controlled substance. The drug must be essential to the health and life of the patient. The patient must be on an established drug therapy regimen. Patients would also be limited to one emergency refill per drug per year, to ensure this ability is only used in the case of an emergency. A prescriber would have the ability to opt out of allowing their patient to use this emergency refill procedure.

I am proud to see this bill has garnered such widespread bipartisan support throughout the Capitol. The Legislature demonstrated its support for helping patients adhere to their prescribed drug regiments last session with Act 290, and this bill works toward that same goal. I would encourage your future support for this bill.

Thank you again for your consideration. Please feel free to reach out to me and my office if you have any questions.

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One Voice, One Vision,

DATE:

March 22, 2017

TO:

Representative Joe Sanfelippo, Chair

Members, Assembly Committee on Health

FROM:

Danielle M. Laurent, MPH

Pharmacy Society of Wisconsin

Director, Public Affairs

SUBJECT:

AB 125 relating to: prescription order extensions for when a refill authorization cannot be

obtained

Thank you for the opportunity to testify on Assembly Bill 125, relating to prescription order extensions for when a refill authorization cannot be obtained. The Pharmacy Society of Wisconsin appreciates the work of the bill authors, Representatives Kolste and Nygren and Senators Vukmir and Johnson, in bringing forth this bill, which would allow pharmacists to dispense up to seven days of a medication if a patient has no authorized refills but the prescriber cannot be reached.

Under current law, if a patient wishes to refill a prescription for which they do not have an authorized refill, the pharmacist must get authorization from the prescriber or prescriber's delegate. This means that if a patient runs out of medication after the doctor's office is closed, on a weekend, or another time when the prescriber is unreachable by pharmacy staff, the patient is not able to have their prescription filled. This leaves the patient with the option of either a costly emergency department visit, or skipping their medication. For many medications, therapeutic interruption can cause serious, sometimes life-threatening, medical complications for the patient.

Assembly Bill 125 provides a common sense solution to this problem by allowing the pharmacist to extend the prescription with a seven-day emergency supply if the pharmacy attempts to contact the prescriber, but the prescriber cannot be reached. Thirty-five states have enacted legislation that allows, in certain circumstances, pharmacists to dispense an emergency quantity of a prescription, and this legislation seeks to make Wisconsin the thirty-sixth state to allow this practice.

In order to ensure patient safety and prescriber authority over the prescription, the bill includes numerous conditions which must be met in order for a pharmacist to issue the emergency supply. These conditions include that the patient is on a consistent drug therapy program and that interruption of the therapy could result in undesirable consequences for the patient's health. Additionally, a patient may only receive one emergency extension prescription per drug per year and the pharmacist must contact the prescriber at the earliest reasonable time and inform them of the emergency extension. A prescriber may also indicate "no extension" on the prescription if they do not wish for the prescription to be extended before a patient gains authority from the prescribed. Finally, no prescription for a controlled substance may be extended by emergency extension.

On behalf of the Pharmacy Society of Wisconsin, I encourage you to support this common sense legislation which will assist patients is adhering to their medications. Thank you again for allowing me to testify on this important legislation. I would be happy to answer any questions from the committee.



DATE:

Wednesday, March 22, 2017

TO:

Representative Joe Sanfelippo, Chair

Members, Assembly Committee on Health

FROM:

Joe Cesarz, MS, PharmD

Manager, Ambulatory Pharmacy Services

UW Health

SUBJECT:

Assembly Bill 125 relating to Pharmacist Authority to Dispense Emergency

Prescription Extensions

Good Morning Chair Sanfelippo, Vice Chair Bernier, and Committee members.

Thank you for the opportunity to comment on Assembly Bill 125 relating to Pharmacist Authority to Dispense Emergency Prescription Extensions.

My name is Joe Cesarz, and I am a pharmacy manager at UW Health, a health system in Madison, WI. My primary responsibility within this role is to provide leadership and oversight of our 14 pharmacy dispensing locations, which collectively fill over 2,000 prescriptions per day.

I am here today to express my professional support for Bill 125 as a representative of UW Health.

This bill makes sense to pharmacists and other members of the patient's care team. The current law puts patients in limbo. If they need a prescription refill when the prescriber is unreachable, the pharmacy does not have the ability to provide the patient with any medication. This could ultimately lead to harmful outcomes for patients who require these essential medications to control their disease states. We encounter this problem frequently, and it puts pharmacists between a rock and a hard place when trying to do what is best for the patient. This bill permits our health care system a mechanism to provide the right care to patients at the right time, in a common sense fashion.

I would like to thank Senators Vukmir and Johnson, and Representatives Kolste and Nygren, for authoring this piece of legislation. I am confident that this bill will result in improvements to patient care, and prevent potentially harmful events from occurring if patients go without medication.