



Dr. Bandy – CURES 2.0 Testimony 2/6/18

Mr. Chair and members of the Committee, I am Dr. Veronica Bandy, President-Elect of the California Pharmacists Association.

On behalf of CPhA, I would like to thank the members of this committee for the opportunity to speak to this important issue.

Pharmacists take an oath to “devote ourselves to a lifetime of service to others through the profession of pharmacy” and in doing so promise to “consider the welfare of humanity and relief of suffering our primary concern.”

It is with that in mind that California pharmacists have always supported a workable, sustainable prescription drug monitoring program that gives healthcare providers a meaningful way to ensure that controlled substances are prescribed and dispensed safely and appropriately.

CPhA supported the legislation that established CURES 2.0 as a way to begin to fix an unworkable system that was the original CURES program. While 2.0 is an improvement over its predecessor, the current CURES system still lacks the ability to provide pharmacists the benefit of an integrated workflow system and to provide interstate connectivity for complete patient medication history. The recent passage of AB 40, which permits the Department of Justice to integrate CURES into health facility software systems, provides a partial solution to the problem. This will allow healthcare teams to now integrate CURES into their facility operating system, which will increase utilization, reduce complications of managing multiple systems, and ultimately improve patient care.

Along with our colleagues in medicine, we see firsthand the devastating impact of prescription drug misuse and abuse. It is truly a public health crisis which is plaguing every community in our state. We need every tool available in order to combat the devastating affect of this problem.

The delivery of healthcare has changed to no longer being provided by an individual, but rather by an interdisciplinary healthcare team. This model provides us the opportunity to treat the whole patient, collaborate and coordinate their care. Prescription Drug Monitoring Program provide the members of this team with a tool to track the controlled substance medication use of our patients and to identify where medication misuse and abuse may be a risk. While CURES 2.0 provides some of this information, it still lacks key information for practitioners to make the most informed decision possible.

In order for all members of the healthcare team to share in case management of a patient, the medical history, including behavioral and prior substance abuse/overdose history would be extremely important information to have access to in order to evaluate the risk of abuse.

Additionally, under the current CURES system, healthcare providers are limited to information about a patient's history to only within the California's CURES system. We do not have the ability to track a patient's prescription usage across state lines. Interstate integration is key to addressing the prescription drug abuse crisis.

39 other states, including our neighboring border states, utilize a national prescription drug monitoring system that provides practitioners the ability to access the prescription records of a patient residing in any one of those states. California has been a leader in many significant health policies, unfortunately, this is not the case for tracking the medication utilization of our citizens as the existing CURES program will only provide information for individuals who have received controlled substances within this state. With the mobility of people into and out of California, compounded with the interstate trafficking of controlled substances being mailed into this state, it is imperative that California joins its colleagues in the 39 other states and begin sharing real-time PDMP data.

CPhA urges this body to study those models which provide seamless integration and national data sharing of PDMP information and to implement that system in California.

CPhA looks forward to working with members of this committee and our colleagues in healthcare to develop a well-thought-out plan which meets our collective goal of providing care to all Californians.