

2012 End of Session Report

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The Virginia General Assembly adjourned on Saturday March 10th with a budget adopted in May.

The General Assembly approved State budget for the 2013-14 fiscal year included several items related to pharmacy. Those items are:

- Transparency requirement for future contract administration of the State Employee health insurance program
- Prohibits the establishment of a retail maintenance network for maintenance drugs for the State Employee health insurance program
- Creation of a Medication Therapy Management pilot program for the State Employee health insurance program
- Restoring funding for the Pharmacy Connection program
 - Pharmacy Connect provides access to free prescription drugs, for adults without drug coverage, from participating pharmaceutical companies in Southwest Virginia
- Adds behavioral health drugs to the Medicaid Preferred Drug List (PDL)
 - Behavioral health drugs were scheduled to be added to the Medicaid PDL in fiscal year 2014. This amendment adds those drugs to the PDF one year early starting in 2013

Below is a list of some of the legislation that we have been working on or following with a brief description of how these bills fared:

SB 294 Methamphetamine precursors; sale and tracking, penalties.

HB 1161 Methamphetamine precursors; sale and tracking, penalties.

- Introduced by Senator Lucas and Delegate Cline both bills require the Department of State Police to enter into a memorandum of understanding to establish the Commonwealth's participation in a real-time electronic recordkeeping and monitoring system for the nonprescription sale of ephedrine or related compounds. VPhA asked for several technical amendments. After these were agreed to we supported both bills. The new electronic log will be a free web based system that will replace the paper logs that pharmacies are currently required to maintain. Both bills have passed through the General Assembly and SB 294 has been signed by the Governor. The law will go in to effect on January 1st, 2013.

HB 347 Prescription Monitoring Program; disclosures.

SB 321 Prescription Monitoring Program; disclosures.

- Introduced by Delegate Jackson Miller and Senator Bill Carrico on behalf of the Prescription Monitoring Program these bills accomplish four main objectives. The first is a requirement to provide the method of payment for a monitored prescription drug. The second requires the Director of the Department of Health Professions to report information relevant to an investigation of a prescription recipient, in addition to a prescriber or dispenser, to any federal law-enforcement agency with authority to conduct drug diversion investigations. The third allows the Director to disclose information indicating potential misuse of a prescription by a recipient to the State Police. The fourth allows prescribers to delegate authority to access the Program to an unlimited number, rather than the current limit of two, of regulated health care professionals under their direct supervision. These bills have passed their respective chambers unanimously and have been signed by the Governor.

HB 733 Pharmacists; compounding authority.

- This bill patroned by Delegate Chris Jones and with Delegate Bob Brink as chief co-patron is VPhA's primary legislative initiative. HB 733 was introduced to correct the situation encountered in 2011 regarding 17HP and the inability of patients to acquire the newly branded drug. This legislation would allow pharmacists to compound commercially available drugs under several scenarios. The first is the compounding of any drug whose manufacturer has reported to FDA that the drug is unavailable due to a shortage. The second is the ability to compound when the drug is unavailable in the time medically necessary and where the prescriber has noted on the written or oral prescription that the patient has an emergent need for the drug. HB 733 has passed both the House and Senate and has been signed by the Governor.

HB 858 Tramadol; added to list of Schedule IV controlled substances.

SB 592 Tramadol; added to list of Schedule IV controlled substances.

- Patroned by Delegate Joseph Yost and Senator Phil Puckett these bills would add Tramadol as a schedule IV in the Commonwealth. Both bills passed their respective committees unanimously and SB 592 passed from the Senate. However, since a schedule IV drug has criminal penalties associated with its abuse, illegal manufacturing, or unlawful distribution the House placed a fiscal impact on it. This led to HB 858's demise. SB 592 was also defeated in Appropriations.

HB 1140 Carisoprodol; added to list of Schedule IV

HB 1141 Ezogabine; added to list of Schedule V

- Both of these bills were patroned by Delegate Keith Hodges. These were initiatives of the Board of Pharmacy which were not included in the Governor's legislative packet. For the sake of uniformity with the federal schedule VPhA asked that they be introduced. Both bills have cleared the House of Delegates and Senate unanimously.

HB 1273 Chemotherapy; requirements for orally administered cancer drugs.

SB 450 Chemotherapy; requirements for orally administered cancer drugs.

- Patroned by Delegate Chris Peace and Senator Jill Vogel these bills mandate parity for oral chemotherapy with other forms of chemotherapy treatment under health plans in the Commonwealth. These bills were strongly opposed by the health plans and supported by a coalition of health care organizations including VPhA. Despite rather stiff opposition both bills have passed their chambers and will make their way to the Governor's desk for signature.

HB 346 Nurse practitioners; practice as part of patient care teams

- This bill was introduced by Delegate John O'Bannon and was the result of a years worth of negotiations between the Medical Society of Virginia and the Virginia Council of Nurse Practitioners. The bill relaxes

supervisory requirements and forms patient care teams where the NP' and physicians work in collaboration. Being consensus legislation it has moved forward fairly easily. However, some groups, mainly the nurse anesthetists and the nurse midwives, have begun to express concerns. The nurse anesthetists are concerned because they are not included in the bill and the nurse midwives because they are. HB 346 passed both the House and Senate and is awaiting the Governor's signature.

HB 266 Surgery; definition and who may perform.

SB 543 Surgery; definition and who may perform.

- These bills patroned by Delegate Chris Peace and Senator Steve Martin seek to define surgery, who may practice surgery, and who will regulate surgery. These bills are legislative priorities of the Medical Society of Virginia and were the cause of significant controversy at the beginning of session. Amendments were offered and accepted to address the concerns of various groups and to clarify that this bill does not prohibit any currently allowed practices. They have since become non-controversial and have easily passed from both bodies. HB 266 was signed into law by the Governor on February 28th.

HB 938 Military training, etc.; regulatory boards to accept as equivalent to requirements for licensures.

- HB 938 is patroned by Delegate Scott Lingamfelter and is part of the Governor's initiative to make Virginia the most veteran friendly state in the country. The bill exempts the boards of medicine and dentistry due to concerns that members of these professions could have reserve military status but not have practiced for an extended period. The bill requires "substantially equivalent" training and education which will give the boards some leeway. HB 938 passed the House and Senate unanimously.