

Tennessee Pharmacists Association – Position Statement

HB 2225 by Terry, Williams, Sexton C, Doss, Dunlap, Howell, Hazlewood
SB 2403 by Overbey, Haile

Position: The Tennessee Pharmacists Association strongly supports this legislation and respectfully urges members of the Tennessee General Assembly to SUPPORT HB 2225 and SB 2403. TPA believes that this legislation will expand patient access to this lifesaving medication and promote continued collaboration between pharmacists and other members of the multidisciplinary public-health team to help ensure effective strategies for the prevention and treatment of opioid overdose.

Prescription Drug Overdoses: Prescription drug overdoses, and especially overdoses of opioid pain killers, continue to be a very important public health issue. According to the Centers for Disease Control and Prevention, 44 people die as a result of prescription opioid overdose every day in the United States. In fact, prescription opioid overdoses killed 16,235 people in the US in 2013, and drug overdose was the leading cause of injury death in 2013. Among people 25 to 64 years old, drug overdose caused more deaths than motor vehicle traffic crashes. Overdoses can be accidental and the result of legitimately obtained prescription drugs, or the result of abuse of prescription opioids or heroin. When administered in time, opioid antagonists (such as naloxone) can stop the effects of these drugs and prevent death.

Background: The World Health Organization recommends that people likely to witness an overdose have access to opioid antagonists and training in its proper use. Because pharmacists know and have relationships with patients or their family members who pick up opioid prescriptions, they are in an ideal position to assist with this very important issue. House Bill 2225 and Senate Bill 2403 aim to increase access to opioid antagonist rescue medications for opioid users and their families, through pharmacists and pharmacies, and to seek to prevent opioid overdoses in our communities. Because opioid prescription medications are often the cause of overdose, pharmacists are a logical resource in their communities to increase access to opioid antagonists. Designed to increase access to opioid antagonist, the new legislation makes pharmacists an additional access point. At least 24 other states either have active legislation or have introduced legislation to give pharmacists some level of authority to dispense opioid antagonists at their discretion. On October 20, 2014, the National Association of Boards of Pharmacy recognized the need “to support programs that involve an active role for pharmacists in expanding access to the opioid overdose reversal drug, naloxone.”

Key Provisions:

- Authorizes the Chief Medical Officer for the Tennessee Department of Health to implement and execute a state-wide collaborative pharmacy practice agreement specific to opioid antagonist therapy with any pharmacist licensed in, and practicing in, this state.
- Under this state-wide collaborative pharmacy practice agreement, pharmacists would be authorized to dispense opioid antagonists to a person at risk of experiencing an opiate-related overdose or a family member, friend, or other person in a position to assist a person at risk of experiencing an opiate-related overdose.
- Requires that, before a pharmacist enters into a state-wide collaborative pharmacy practice agreement with the chief medical officer for the dispensing of an opioid antagonist, the pharmacist shall be able to provide documentation of completion of an opioid antagonist training program approved by the department of health related to opioid antagonist therapy within the previous two (2) years.
- Establishes immunity from disciplinary or adverse administrative actions, as well as immunity from civil liability, for the Chief Medical Officer for the Department of Health and any pharmacist who dispenses opioid antagonists pursuant to a valid state-wide collaborative pharmacy practice agreement.

Effective date: Upon becoming a law.