Advisory Board on Alcoholism and Drug Abuse



ALASKA MENTAL HEALTH BOARD ADVISORY BOARD ON ALCOHOLISM AND DRUG ABUSE 431 NORTH ER ANKLING STREET, SUMER 200

431 North Franklin Street, Suite 200 Juneau, Alaska 99801 (907) 465-8920

Alaska Mental Health Board

March 5, 2013

Representative Mia Costello Alaska Capitol Room Juneau, Alaska 99801

Re: HB 134 — Reimbursement of Scheduled Unit Dose Packaging

Dear Representative Costello,

The Alaska Mental Health Board and Advisory Board on Alcoholism and Drug Abuse support HB 134 requiring reimbursement of "mediset" packaging for prescription medications. Over the past several years, the Boards have previously received significant comment and information from consumers, providers, and pharmacies on this issue. All expressed the importance of having access to a proven tool – mediset packaging – for medication adherence and stability for Alaskans experiencing serious mental illness.

Mediset packaging may seem like an ancillary service provided by pharmacists, but for many, this sort of packaging is a much-needed support to maintaining the ability to function. Many Alaskans experiencing serious mental illness are on complex and delicately calibrated psychiatric medication regimens, often further complicated with medications for co-morbid conditions. There is recent research, as well as ongoing federally-funded research, studying the impact of packaging aids on medication adherence.

For Alaskans experiencing serious mental illness, often with co-morbid conditions, medication adherence is paramount to achieving and maintaining the highest level of functioning and recovery possible. *Blister-pack packaging*, combined with medication education and regular follow-up with clinical pharmacists, has been shown to improve medication compliance among elderly patients.¹ Adherence to medication regimens depends on the severity of the mental health disorder, patient characteristics, and patient-provider relationships.² It requires "constant vigilance, health teaching – both verbal and written – enlisting the help of family and community to provide supervision, *simplification of drug regimens*, frequent examination and vigorous treatment of side effects, and improving the patient-therapist interaction."³ Thus, access to mediset packaging is a key component to achieving recovery.

¹ Effect of a Pharmacy Care Program on Medication Adherence and Persistence, Blood Pressure, and Low-Density Lipoprotein Cholesterol: A Randomized Controlled Trial, Lee, J. et al., JAMA, Dec. 6, 2006, Vol. 296, No. 21; Antidepressant Adherence after Psychiatric Hospitalization, Zivin, K. et al., Adm Policy Ment Health, Nov. 2009 36(6): 406-415.

² Drug Compliance and the Psychiatric Patient, Selter, A. and Hoffman, B., Can Fam Physician. 1980 May; 26: 725–727.

³ Id. at 725.

Adherence-promoting packages, like blister-packs and medisets, have been shown effective in increasing medication adherence rates. Medication adherence is an integral part of achieving and maintaining the highest level of functioning and health possible. HB 134 ensures continued access to this important service for Alaska's most vulnerable citizens.

The Boards appreciate your work on behalf of Alaskans.

Twichal Knosty

Michael Kerosky, Chairman Advisory Board on Alcoholism and Drug Abuse

Brenda Moore

Brenda Moore, Chairperson Alaska Mental Health Board

Chugiak-Eagle River Senior Center "Serving Seniors from Hiland to Eklutna"

March 11, 2013

The Honorable Mia Costello Alaska State Legislature State Capitol, Room 501 Juneau, AK 99801

Dear Representative Costello,

Please accept this letter of support for House Bill 134 (HB 134), requiring Medicaid payment for scheduled unit dose prescription drug packaging and dispensing services for specified recipients. The goal of this legislation is to put a model mediset program into statute to ensure the service continues to be offered in Alaska.

The benefits we see of a mediset program are first and foremost the fact that without them our Program Nurse spends valuable time checking and getting medications ready for distribution while she could be spending more time on patient care. Imagine having to take the time to get medications ready for 20 different clients, with some of those clients taking more than 10 different medications. Physically it is not possible for clients suffering from arthritis to open the medication bottles. Medisets provide less chance for errors. Medisets are also less confusing to clients who capable of taking medications on their own without prompting.

Overall the mediset program generates long term cost savings for the State of Alaska, caregivers and provides for the health and safety of Alaskans.

I fully support HB134 and hope it receives a passing vote in both the House and Senate.

Thank you for your time and consideration. Please feel free to contact me with any questions you may have.

Regards,

Hendrichson

Linda Hendrickson Executive Director





Department of Health and Social Services

ALASKA COMMISSION ON AGING

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March 24, 2013

Representative Mia Costello Alaska Capitol, Room 501 Juneau, AK 99801-1182

Subject: Support for HB 134, Medicaid Payment for Mediset Prescription Packaging

Dear Representative Costello:

The Alaska Commission on Aging (ACoA) supports HB 134, a bill sponsored by you, requiring Medicaid reimbursement for scheduled unit dose prescription drug and dispensing services for specified recipients. Based on our understanding, the goal of this legislation is to put within statute a "mediset" medication management service to ensure that this service continues to be offered in Alaska to eligible persons.

"Mediset" packaging of prescription medications, combined with medication management and regular followup with a patient's health care provider, have been shown to improve medication adherence which is particularly important for older persons with multiple chronic conditions who are on complicated medication regimes. *Blister-pack packaging* enhances medication management for persons residing in assisted living and institutional settings and reduces medication error for seniors living independently taking medications on their own. By improving patient adherence to medications, the mediset program is cost-effective in promoting the health and safety of elderly Alaskans, and all Alaskans on prescription medications, reducing the need for higher cost health care.

While ACoA supports the intent of the Mediset program to improve medication management, we are concerned about the potential impact to small pharmacies being eligible for Medicaid reimbursement as the result of this legislation. We believe these concerns could be addressed through regulation.

Please feel free to contact Denise Daniello, ACoA's executive director (465-4879 or <u>denise.daniello@alaska.gov</u>) should you require additional information about our position. Thank you for sponsoring this legislation to improve medication adherence which is integral to the health and well-being of all Alaskans.

Sincerely,

Paula failours Q.

Paula Pawlowski Chair, Alaska Commission on Aging

Denise Daniello Executive Director, Alaska Commission on Aging



March 18, 2013

Representative Mia Costello State Capitol Room, #501 Juneau, AK 99801

RE: House Bill 134 - Medicaid Payment for Mediset Prescription

Dear Representative Costello,

The Alaska Mental Health Trust Authority is pleased to submit this letter in support of House Bill 134, "An act requiring Medicaid payment for scheduled unit dose prescription drug packaging and dispensing services for specified recipients."

The Trust supports programs, services and policy that positively impacts the lives of Trust beneficiaries, those Alaskans who experience a mental illness, substance abuse related disorder, traumatic brain injury, Alzheimer's and Related Dementia (ADRD) or developmental disabilities. The Trust is an advocate of community-based services, systems and supports that assist beneficiaries to reside as independently as possible in our communities. Occasionally, the right support includes assistance with medication organization and management offered through prescription mediset packaging provided by local pharmacies in coordination with the individual's prescribing medical provider. We are in support of House Bill 134 because it ensures this service is maintained and available to Alaskans when necessary.

We appreciate your advocacy on behalf of Alaskans including Trust beneficiaries and look forward to continuing to work with you on this very important issue.

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Jeff Jessee, CEO



Integrity • Advocacy • Professionalism • Representation • Empowerment

The mission of the Alaska Nurses Association is to advance and support the profession of nursing in Alaska.

Testimony

CS HB 134, An Act Requiring Medicaid payment for medication compliance package.

March 19, 2013

Dear Mr. Chairman,

I want to speak today in support of the committee substitute for HB 134. As a nurse who has spent most of my nursing career working in a community setting, I know the importance of medication compliance packaging of medications. These packages are immensely helpful to patients with mental challenges, and to patients with very complex medication regimes.

I am thankful that in this committee substitute the eligibility for this service has been changed. There are individuals in the community with complex medication regimes who are being cared for by their families. These individuals should be eligible for this service along with individuals living in licensed facilities.

I also want to address the frequency the medication compliance packages are made. As you know medications these days are outrageously expensive. Once medications are placed in a mediset they cannot be reused. If there is a medication change then there can be a lot of wasted medication. Making up mediset every one to two weeks helps avoid a lot of this waste.

With pills taken by mouth we do not think that a pharmacist has to be on call 24/7.Extended hours into the evening and on weekends is fine. When an individual goes into a pharmacy to purchase their medications the pharmacist isn't available 24/7. This is no different.

It is very important that the pharmacist report compliance issues directly to the healthcare provider. As a provider I don't want to have my patient tell me they said something to the pharmacist about a medication and that concern was not relayed back to me.

Thank you for this opportunity to testify in support of CS HB 134.

Patricia Senner MS, RN, ANP Professional Practice Director Alaska Nurses Association



March 27, 2013

Representative Mia Costello Alaska State Legislature State Capitol, Room 501 Juneau, AK 99801

Representative Costello,

Thank-you for understanding the benefits of unit packaging and for leading efforts to keep them an option for individuals with complicated psychopharmacology needs. While there are serious reasons for maintaining the program that are not directly based on cost savings I would like to suggest they have the possibility for serious costs in other ways.

Medisets are dosed and reviewed by pharmacists and their trained technicians. Eliminating that medical control would require either individuals with severe mental illness to be responsible or rely on Human Service Provider organizations to take on the responsibility and liability of setting up weekly medisets. We suspect medication errors for individuals with SMI would be dramatically and possibly dangerously increased without the prepackaged sets for individuals not being supervised. The organization I work for has one Nurse for over 100 clients. If she were required to act as a pharmacy technician and build weekly medisets she would have no time for anything else and also assume the liability for properly packaging the weekly kits.

Individuals with complicated mental health diagnosis and frequently concurrent medical disorders have changes made to their prescriptions frequently. Weekly medisets save money because they reduce the waste of discarding a whole month's supply of a changed or discontinued medication. This situation occurs when a physician is attempting to find a therapeutic dose, frequently occurs when a person has medications adjusted during short stays in the hospital and when medication for medical conditions and psychiatric medications have unforeseen interactions.

I am sure these are all points you are well aware of, but I appreciate the opportunity to add to the position that medisets help save money and reduce risk for clients and supporters alike.

Gratefully. Matthew X Jones M.A

Assets Inc. Executive Director

Department of Health & Social Services





GOVERNOR'S COUNCIL ON DISABILITIES & SPECIAL EDUCATION Teresa Holt, Executive Director

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March 22, 2013

The Honorable Mia Costello House of Representatives Alaska State Capitol Juneau, AK 99801-1182

RE: HB 134

Dear Representative Costello:

Thank you for sponsoring HB 134, which would require Medicaid payment for scheduled unit dose prescription drug packaging and dispensing services, such as medisets, for specified recipients, including those individuals with disabilities. As you know, the Governor's Council on Disabilities and Special Education (the Council) advocates for change that improves the lives of individuals with disabilities.

One of the roles of the Council is to serve as Alaska's State Council on Developmental Disabilities to ensure that individuals with developmental disabilities receive the services and supports that they need to be safe and healthy in their communities. The Council strongly supports the passage of HB 134, as we believe that both the mediset and unit dose provisions of the bill will help to maintain the health and safety of individuals with disabilities (as well as the elderly) while following the medication regimen that is prescribed by their medical provider.

Individuals with developmental disabilities often have many medications that are needed throughout the day. When these individuals reside in a group home setting, their medication regimens are in the hands of the caregivers of that particular home. Oftentimes more than one caregiver has the responsibility of carrying out the medication regimens of several individuals throughout the day. A medistat allows caregivers to more easily follow the prescribed medication regimens so that they may administer medications to the right individual, at the right time and in the right dosage. The use of medisets greatly reduces medication errors and issues with non-compliance, which in turn, ensures the health and safety of individuals with disabilities.

Again, the Council wholeheartedly supports the passage of HB 134, which allows individuals with disabilities to remain safely supported in their communities where they belong. If you have any questions, please do not hesitate to call.

Lin Sehnt

Eric Gebhart Chair



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www.hopealaska.org

Stephen P. Lesko Executive Director

Roy T. Scheller, Ph. D. Deputy Executive Director To the Members of the Twenty-Eighth Alaska Legislature:

March 7, 2013

Hope Community Resources strongly supports passage of HB 134 sponsored by Representative Mia Costello. Hope believes both the mediset and unit dose provisions of HB 134 will help reduce Medicaid costs and increase the safety of medication usage.

Hope is the largest statewide provider of community supports for Alaskan children, adolescents and adults who experience disabilities. Hope was the first agency to enter into a defined partnership with the State of Alaska to initiate the specialized program that we now call "children with complex medical conditions." This pioneer pilot at the time, proved to be overwhelmingly successful in two distinct ways- it significantly reduced costs and clearly improved not only quality of life, but also life expectancy. We are no strangers to medication administration and acceptable protocol in a variety of challenging situations.

The unit dose and mediset systems are vital components of both community and Long Term Care service delivery. Hope has utilized both for many who choose our supports in our nine regional offices. With a defined history of extensive experience in medication and medication administration, we have come to firmly believe that both the unit dose and mediset systems significantly decrease medication errors.

In a number of our residential homes, as many as three individuals can be involved in intensive medication regimens. Without unit dose and medisets, we would be coping with serious scenarios that could easily compromise the reasonable health and safety of some of our most vulnerable citizens. For the record, the following points for consideration are offered by Hope in support of HB 134:

- Medisets lessen non-adherence or mistakes that pose a serious safety risk.
- There is less forgetfulness, confusion for people and caregivers, thus preventing readmissions to hospitals or mistakes when they return home from the hospital.
- Many of our individuals take seizure medications 4X daily, needing to schedule calcium 2 hours in between to prevent the supplement from blocking action of these life-saving drugs. Sometimes they take 4 different seizure meds 4 X daily!
- Many of our individuals are on medications not just for seizure disorders, but for pulmonary hypertension, high blood pressure, inflammatory conditions, mental health disorders, acid reflux, & endocrine disorders or imbalances. Cancer, chronic renal failures are not unknown to us or those we support. In essence, medication routines are far from routine- they can be extremely complex!

Furthermore; legally, licensed nurses or staff are not allowed to "dispense meds" from bottles into specific slots of portable storage sets. That activity is considered dispensing & only a Pharmacist may dispense.

Helping people who experience disabilities achieve their dreams through community supports since 1968.

- Medications need to be given at the right time, in the right dose, to the right person, with the correct number of pills or capsules each time, in the right route and with the right documentation.
- There is great savings when medisets are issued weekly and so 30 days of meds are not destroyed when changed or discontinued.
- When the same medication is being given the same day in different doses at different or the same time, it can be confusing. (Giving two of the 200 mg instead of two of the 50 mg is a mistake that could happen and be deadly.)
- Managing meds well has been a key for so many of our individuals that allows them to reside in community homes instead of placement within the confines of extremely expensive institutions.
- There would be no cost savings realized if medisets are cut, due to the immense health & safety issues that would result from errors or non-compliance.
- The State of Alaska has been instrumental in supporting community inclusion for our families experiencing a physical or intellectual disability, or chronic debilitating conditions. In the past, we have been fortunate in having such support that works and is fiscally responsible. Why change an excellent system in favor of another that will surely jeopardize the welfare of so many who experience disabilities?

Past testimony from the Alaska Board of Nursing, along with numerous providers of support to individuals classified as "vulnerable", clearly mirrors and enhances our contention that <u>we must</u> <u>advance and pass HB 134</u>, and we must do so this legislative session.

Passage of HB 134 will provide our vulnerable citizens continued access to community; it will allow them to live as independently as possible in so many regions throughout Alaska of their choosing, birth, and culture; it will provide a reasonable measure of safety and enhance the overall welfare of our vulnerable Alaskan citizens; and the unit dose and mediset systems will prove to be fiscally responsible and cost effective.

HB 134 values each human life in so many ways and emphasizes the priceless ability to live in community, as independently as possible, with minimal supports, dignity, value and a defined sense of real contribution.

If you have further questions or concerns, I standby with my excellent, professional Health Team to address any issues that may arise and urge the passage of this most excellent legislation, HB 134.

Respectfully,

Stephen P. Lesko: CEO Executive Director Hope Community Resources, Inc.