



**TESTIMONY OF  
CONNECTICUT HOSPITAL ASSOCIATION  
SUBMITTED TO THE  
PUBLIC HEALTH COMMITTEE  
Friday, March 11, 2011**

**HB 5610, An Act Concerning The Duties Of A Pharmacist When Filling A  
Prescription Used For The Treatment Of Epilepsy Or Prevention Of Seizures**

The Connecticut Hospital Association (CHA) appreciates this opportunity to present testimony concerning **HB 5610, An Act Concerning The Duties Of A Pharmacist When Filling A Prescription Used For The Treatment Of Epilepsy Or Prevention Of Seizures**. CHA opposes this bill.

This bill seeks to add a new subsection (j) to section 20-619 of the general statutes that is unnecessary. The proposed text would require a pharmacist to obtain additional consents from the prescribing physician and the patient when substituting generic drugs for brand name antiepileptic medications.

HB 5610 is unnecessary because a prescribing physician already has the ability to require a brand name only prescription. This ability, and its process, is set forth in detail in subsection (c) of section 20-619 of the general statutes. Subsection (c) of section 20-619 provides "*A prescribing practitioner may specify in writing or by telephone or other electronic communication that there shall be no substitution for the specified brand name drug product prescription.*"

It would be confusing to create another method providing for no substitution with generics on a drug-by-drug or clinical condition basis. This change will not result in better care, nor will it expand patient choice. Instead, it will lead to increased costs, confusion for patients, and delays in care.

In addition, HB 5610 is problematic because it includes confusing language that refers to "inpatient hospitals" instead of making clear that medications provided to hospital inpatients are not subject to these requirements. This confusion could be eliminated if the following changes were made to the definition of "Pharmacy" in lines 121 to 123, inclusive (suggested changes are underlined):

*"Pharmacy" does not include a pharmacy serving patients in a long-term care facility, other institutional facility or a pharmacy [that provides prescriptions for inpatient hospitals] relating to hospital inpatients.*

Thank you for your consideration of our position.

For additional information, contact CHA Government Relations at (203) 294-7310.