

Capitol Health Call

Bill Would Permit Partial Filling of Opioid Prescriptions

Legislation introduced recently in both the Senate and the House would permit the partial filling of opioid prescriptions at the request of patients or physicians (<http://1.usa.gov/1QAInh6>).

"This bipartisan bill will empower patients and doctors to work together to determine appropriate pain treatment while limiting the number of unused pills left in family medicine cabinets," co-sponsor Sen Elizabeth Warren (D, Mass) said in a statement (<http://1.usa.gov/1UuNIMZ>).

Too often, that's where opioid addiction begins, said Rep Katherine Clark (D, Mass), a co-sponsor of the bill in the House.

The Drug Enforcement Administration currently permits controlled drugs in schedules III, IV, and V to be partially filled, but the regulations are narrower and more vague for schedule II drugs, which include prescription opioids, according to a fact sheet about the proposed legislation (<http://1.usa.gov/1KOCnVR>).

Under the proposed legislation, pharmacists will notify physicians when prescriptions are partially filled. Partially filled prescriptions will not be allowed past the date that the full prescription would have run out.

Senate Committee Holds Hearing on Opioid Use Among Seniors

Nearly 30% of Medicare Part D enrollees used prescription opioids in 2014, a Centers for Medicare & Medicaid Services (CMS) official told the Senate Special Committee on Aging at a recent hearing on issues and emerging trends in opioid use among seniors (<http://1.usa.gov/1TIXnqe>).

"While many beneficiaries and prescribers utilize opioids in ways that are medically appropriate, Part D is not immune from opioid overutilization," said Sean Cavanaugh, deputy administrator and director of the Center for Medicare at CMS, at the hearing.

Studies have shown that as many as half of older adults living at home and 85% of those living in residential facilities might have chronic pain, committee chair Sen Susan Collins (R, Me) said at the hearing (<http://1.usa.gov/1nhwAg5>).

"Physicians now face the complicated task of treating pain in an environment where abuse of prescription painkillers is one of the foremost public health challenges facing our nation," Collins said. "Health care providers can play an important role in preventing inappropriate access, but federal reimbursement policies may challenge their best efforts."

One problem is the government's practice of linking certain quality measures to how satisfied patients are with the control of their pain, she said.

"Prompt and effective pain management is a critical component of quality patient care, but hospitals should not have to fear a penalty when medical providers, using their best medical judgment, decide not to prescribe opioid pain relievers," Collins said.

Lawmakers Urge Crack Down on Fraudulent "Conversion Therapy"

Democratic lawmakers recently wrote Edith Ramirez, chair of the Federal Trade Commission, to express their concern over the practice of "conversion therapy" to try to change young people's sexual orientation (<http://1.usa.gov/1T6xQ3T>).

"This practice falsely promises to change a person's sexual orientation or gender identity," wrote Sen Patty Murray (D, Wash), Sen Cory Booker (D, NJ), Rep Jackie Speier (D, Calif), and Rep Ted Lieu (D, Calif). "We urge the Federal Trade Commission to take all actions possible to stop the unfair, deceptive, and fraudulent practice of conversion therapy..."

The lawmakers wrote that they were especially concerned about the effects of conversion therapy on children and youth.

"Lesbian, gay, bisexual, and transgender (LGBT) children and youth are at increased risk of suicide, substance use disorder, and engaging in other high-risk behaviors compared to their peers," they said.

While psychotherapy can help LGBT children and youth feel more confident about their sexual orientation or gender identity, the lawmakers wrote, "conversion therapy provokes guilt, anxiety, and societal rejection that negatively impacts healthy development of children and youth."



Recently proposed legislation would allow partial filling of opioid prescriptions to limit unused pills.

Hospitals Face Challenges in Implementing Patient Safety Practices

Three key challenges confront hospitals trying to implement evidence-based patient safety practices such as use of proper antiseptics, according to a recent report from the Government Accountability Office (GAO) (<http://1.usa.gov/1T6qv4a>).

At the request of Sen Ron Wyden (D, Ore), ranking member of the Senate Finance Committee, and Sen Patty Murray (D, Wash), ranking member of the Senate Health, Education, Labor, and Pensions Committee, the GAO contacted officials at 6 hospitals to ask them about challenges in reducing or eliminating adverse events that result from the medical care patients receive.

Hospital officials identified 3 main challenges in implementing patient safety practices: substantial time and resources needed to gather data about adverse events, limited evidence of effectiveness of some patient safety practices, and ensuring consistent implementation of patient safety practices by staff. But the GAO said it heard some success stories. For example, one hospital noted a 40% reduction in certain infections during the first year after hiring a new infection control nurse.

The GAO also interviewed patient safety experts and reviewed the relevant literature to identify gaps where better information could help hospitals. – Rita Rubin, MA