

Act Number: 09-150

Bill Number: 325

Senate Pages: 1254, 1263, 2530, 2585-2588

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House Pages: 9220-9227

8

Committee: General Law: 132-138, 156-
165, 261-266

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temporarily.

Calendar 417, PR.

Calendar 418, Senate Bill Number 1108, Mr.

President, I move to refer this item to the Judiciary
Committee.

THE CHAIR:

Without objection, so ordered.

SENATOR LOONEY:

Thank you, Mr. President. Calendar page 23,
Calendar 419, Senate Bill Number 1117, Mr. President,
I move refer this item, also, to the Judiciary
Committee.

THE CHAIR:

Without objection, so ordered.

SENATOR LOONEY:

Thank you, Mr. President. Calendar 420, Mr.
President, I move to place this item on the Consent
Calendar.

SB 325

THE CHAIR:

Motion is on consent. Without objection, so
ordered.

SENATOR LOONEY:

Thank you, Mr. President. Calendar 421, PR.

Calendar 422, Senate Bill Number 845, Mr.

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Calendar 470, Senate Bill Number 1126, Mr. President, I move to refer that item to the Education Committee.

THE CHAIR:

Without objection, so ordered.

SENATOR LOONEY:

And Mr. President, removing an item from the Consent Calendar placed there earlier -- on calendar page 6, Calendar 165, Senate Bill 781, would remove that item from the Consent Calendar and mark it PR.

Yes, also, another item to remove --

THE CHAIR:

Without objection, so ordered.

Go ahead, sir.

SENATOR LOONEY:

Thank you, Mr. President. Also calendar page 23, Calendar 420, would remove that item from the Consent Calendar and to mark it, also, PR.

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THE CHAIR:

The Senate will stand at ease.

SENATOR LOONEY:

Mr. President, a couple changes in markings. First of all, calendar page 18, Calendar 392 -- page 18, Calendar 392 should be, I think, was marked for

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possession of the Amendment that the Chair was going to offer. I understand that Amendment is now in place so we would mark that item "go."

THE CHAIR:

If no objections, so ordered.

SENATOR LOONEY:

Thank you, Mr. President. Also, Mr. President, two other bills previously marked "passed temporarily" to mark "go." One is on Calendar page 23, Calendar 84, Senate Bill 290, that may be marked "go." And also, Calendar page 28, Calendar 225, Senate Bill 457, if that item might also be marked "go." In addition, Mr. President, another item to add to the Consent Calendar is on Calendar page 34, Calendar 420, Senate Bill 325. Mr. President, if we might move that bill to the Consent Calendar,

THE CHAIR:

Without objection, so ordered.

SENATOR LOONEY:

Thank you, Mr. President. Mr. President, if the Clerk might then call Calendar page 3, Calendar 279.

THE CHAIR:

Mr. Clerk.

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that it be placed on the Consent Calendar.

THE CHAIR:

Without objection, so ordered. Mr. Clerk, would you please return to the call of the Calendar. Mr. Majority Leader.

SENATOR LOONEY:

Thank you, Mr. President. Mr. President, if the Clerk might call the first Consent Calendar.

THE CHAIR:

Mr. Clerk.

THE CLERK:

The roll call has been ordered in the Senate on the Consent Calendar. Will all Senators please return to the Chamber? An immediate roll call has been ordered in the Senate on the Consent Calendar. Will all Senators please return to the Chamber? Mr. President, those items placed on the first Consent Calendar begin on Calendar page 5. Calendar Number 392, House Bill 6433.

Calendar 397, Substitute for House Bill 5915.

Calendar 405, House Bill 5536.

Calendar page 6, Calendar 406, House Bill 5873.

Calendar 457, substitute for House Bill 6264.

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Calendar page 12. Calendar Number 599,
substitute for House Bill 6463.

Calendar page 13, Calendar 608, House Bill 6640.

Calendar page 14, Calendar 611, substitute for
House Bill 6341.

Calendar 612, substitute for House Bill 6286.

Calendar 620, substitute for House Bill 5664.

Calendar page 15, Calendar 622, substitute for
House Bill 6496.

Calendar page 16, Calendar 628, House Bill 5809.

Calendar 630, substitute for House Bill 5519.

Calendar page 23, Calendar Number 284, substitute
for Senate Bill 290.

Calendar page 24, Calendar 103, Senate Bill 754.

Calendar 120, Senate Bill 818.

Calendar 136, Senate Bill 789.

Calendar page 26, Calendar 179, substitute for
Senate Bill 951.

Calendar page 27, Calendar 207, substitute for
Senate Bill 950.

Calendar page 29, Calendar 252, substitute for
Senate Bill 1068.

Calendar page 34, Calendar Number 420, Senate

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Bill 325.

And Calendar page 40, Calendar Number 541, House
Bill 6076.

Mr. President, that completes the items placed on
the first Consent Calendar.

THE CHAIR:

On the first Consent Calendar, the machine is
open.

THE CLERK:

The Senate is now voting by roll call on the
Consent Calendar. Will all Senators please return to
the Chamber? The Senate is now voting by roll call on
the Consent Calendar. Will all Senators please return
to the Chamber?

THE CHAIR:

Have all the Senators voted? Seeing that all
Senators have voted, the machine will be closed.
Clerk, please announce the tally.

THE CLERK:

Motions on adoption to the Consent Calendar,
number 1.

Total Number Voting 36

Those voting Yea 36

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Those voting Nay 0

Those absent and not voting 0

THE CHAIR:

The Consent Calendar is adopted. Mr. Majority
Leader.

SENATOR LOONEY:

Thank you, Mr. President. Mr. President, a few
more items to be marked "go." First, Calendar page
29, Calendar 249, House Bill 6185. Calendar page 35,
Calendar 424, Senate Bill 1045. Calendar page 36,
Calendar 429, Senate Bill 940. Thank you, Mr.
President.

THE CHAIR:

Thank you, sir. Mr. Clerk.

THE CLERK:

Turning to Calendar page 29, Calendar Number 249,
Files number 49 and 285, House Bill 6185, AN ACT
CONCERNING PENALTIES FOR VIOLATIONS OF CERTAIN
PERSONNEL FILE STATUTES as amended by House Amendment,
Schedule "A". Favorably Reported, Committee on Labor
and Judiciary.

THE CHAIR:

Senator Prague.

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this is written.

So when we are looking at the overall balance here, I think there's a lot of questions that need to go back to each and every one of our boards of education. So I'd like to say thank you very much, Mr. Speaker and I'll sit down now.

DEPUTY SPEAKER McCLUSKEY:

Thank you, madam, for your remarks. Will you remark further on the bill? The distinguished Majority Leader, Representative Merrill, you have the floor, madam.

REP. MERRILL (54th):

Yes. Thank you, Mr. Speaker. I would move that we pass this item temporarily.

DEPUTY SPEAKER McCLUSKEY:

Hearing no objection, it's so ordered.

Will be Clerk please call Calendar 642.

THE CLERK:

On page 44, Calendar 642, Senate Bill Number 325,
AN ACT CONCERNING PHARMACY ERRORS AND PHARMACY
COMMISSION MEETING MINUTES, favorable report of the
Committee on Government Administration and Elections.

DEPUTY SPEAKER McCLUSKEY:

The honorable Chair of the General Law Committee,

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Representative Shapiro, you have the floor, sir.

REP. SHAPIRO (144th):

Thank you, Mr. Speaker. Mr. Speaker, I move acceptance of the joint committee's favorable report and passage of the bill in concurrence with the Senate.

DEPUTY SPEAKER McCLUSKEY:

The question before the chamber is acceptance of the joint committee's favorable report and passage of the bill in concurrence with the senate. Will you remark, sir?

REP. SHAPIRO (144th):

Thank you, Mr. Speaker. This bill permits two important things. It permits the pharmacy commission to disclose information identifying individuals and institutions in a proceeding wherein the commission has recommended formal disciplinary action against the pharmacy or such pharmacist, and that the error has been related to an error in disposing medication -- dispensing medication.

In addition, it allows the commission to make records of its proceedings available to the public upon request. It actually requires them to do so, and it can contain the name and the license number of the

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pharmacist or the name of the pharmacy against whom the action has been formally recommended. The need for this has been well established.

We had testimony at public hearing, just compelling testimony about errors that were made that could have affected children; ear medication being told that it would go in a child's eye, dosages that were way too high for children. And we think that this is a very important issue for parents to be able to notice information and shop for their children. We do it for doctors. We should do it here. There's no reason not to. And I urge passage of the bill, Mr. Speaker.

DEPUTY SPEAKER McCLUSKEY:

The question before the chamber is passage. Will you remark? Representative Sharkey, you have the floor, sir.

REP. SHARKEY (88th):

Thank you, madam -- thank you, Mr. Speaker. Very briefly, I want to rise in support of this bill. Actually, the case that there good distinguished Chairman of the General Law Committee referred to actually was a case of a constituent of mine who brought this issue to my attention. And the bill

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itself was something that we all believed made a lot of sense that we should be doing.

It was really a horrific story that she told about her circumstance. And the sense of cover up that was occurring with regard to some of these errors, that the chains themselves as well as the pharmacists were offering as excuses and reasons for why these issues couldn't be resolved, really, I think, put a lot of, and continues to put a lot of children and other users of pharmaceuticals at risk.

So I fully support the bill. I think the -- and I commend the Chairman for his work on this. And hopefully we can prevent these problems in the future. Thank you, Mr. Chairman.

DEPUTY SPEAKER McCLUSKEY:

Thank you, sir, for your remarks. Will you remark further on the bill? The Representative from the 52nd District, Representative Bacchiochi, you have the floor, madam.

REP. BACCHIOCHI (52nd):

Thank you, Mr. Speaker. Due to the late hour I almost forgot what district I do represent.

I also rise in support of this bill. The constituent that Representative Sharkey spoke of was

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very diligent. I believe she came back, not just for one public hearing, but for two. And her compelling story could help us move this bill forward to. I do have just one question, through you, Mr. Speaker to the Chairman of General Law.

DEPUTY SPEAKER McCLUSKEY:

Please proceed, madam.

REP. BACCHIOCHI (52nd):

I just want to confirm that both the pharmacy and the pharmacist would be reported in a disciplinary action that the consumer would be able to get both the pharmacy's name as well as the pharmacist's license number. Through you, Mr. Speaker.

DEPUTY SPEAKER McCLUSKEY:

Representative Shapiro.

REP. SHAPIRO (144th):

Thank you, Mr. Speaker, and through you to the questioner, the answer is yes. You would be able to get the pharmacist's name if action was taken against -- recommended against him or the pharmacy if action was recommended by the commission against the pharmacy itself.

And the information that would be disclosed would contain the pharmacist's license number, which is

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important, because that's national and if the pharmacist moves from location to location, you'd be able to track him or her in this way. Thank you. Through you, Mr. Speaker.

DEPUTY SPEAKER McCLUSKEY:

Representative Bacchiochi.

REP. BACCHIOCHI (52nd):

Thank you, and actually, just one other question. Could the Chairman please tell us how the consumer would go about getting information regarding a specific pharmacy or pharmacist? Through you, Mr. Speaker.

DEPUTY SPEAKER McCLUSKEY:

Representative Shapiro.

REP. SHAPIRO (144th):

Through you, Mr. Speaker, the particular person would petition through letter or through telephone call for information through the pharmacy commission requesting the information and because of this statute the commission would be required to disclose it. Through you, Mr. Speaker.

DEPUTY SPEAKER McCLUSKEY:

Representative Bacchiochi.

REP. BACCHIOCHI (52nd):

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Thank you, Mr. Speaker. This is a good bill and I urge passage of the bill. Thank you.

DEPUTY SPEAKER McCLUSKEY:

Thank you, madam for your remarks. Will you remark further on the bill? Will you remark further on the bill? If not, will staff and guests please come to the well of the House. Will members take your seats. The machine will be open.

THE CLERK:

The House of Representatives is voting by roll call. Members to the chamber. The House is voting by roll call. Members to the chamber.

DEPUTY SPEAKER McCLUSKEY:

Have all the members voted? Have all the members voted? Will the members please check the board to determine if your vote is properly just. All the members voted. The machine will be locked. Will the Clerk please take a tally. Will the Clerk please announce the tally.

THE CLERK:

Senate number -- Senate Bill Number 325, in concurrence with the Senate.

Total Number Voting	144
Necessary for Passage	73

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Those voting Yea	144
Those voting Nay	0
Those absent and not voting	7

DEPUTY SPEAKER McCLUSKEY:

Passes in concurrence with the Senate.

Will the chamber please stand at ease.

(Chamber at ease.)

DEPUTY SPEAKER McCLUSKEY:

Will the House please come back to order.

Representative Merrill.

REP. MERRILL (54th):

Yes, Mr. Speaker. I would move for the
suspension of the rules for immediate consideration of
Senate Bill 1127.

DEPUTY SPEAKER McCLUSKEY:

The question before the chamber is suspension of
the rules for the consideration of the item. Are
there any objections? Are there any objections? If
not, the rules are suspended for consideration of the
item.

Will the Clerk please call 1127.

THE CLERK:

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request, and all responses came back the same, that they -- and I don't understand why you're going to spend time to look at how much time it's going to take to go find our answers. You would think in our day and age that all closed cases would be pretty easily and readily available. I think it would take more time to investigate how much time it's going to take. It kind of doesn't make sense.

PHIL BENOIT: Senator --

SENATOR COLAPIETRO: Yes.

PHIL BENOIT: -- can I just -- Phil Benoit. I just want to echo what the electrician said about two hours ago. We were kept out of the loop. We have no idea what's going on with the commissioner, if he's fining people. Like he just said, he sent complaints up there and nothing is happening. In the meantime, the general public is at risk, and it's very important to me as a member of that board that we do the right thing.

SENATOR COLAPIETRO: I understand. Any further questions?

Thank you for your testimony.

PHIL BENOIT: Thank you.

SENATOR COLAPIETRO: Diana and Stephen Hendersen.

DIANA HENDERSEN: First I'd like to apologize, it's a very unfortunate timing for laryngitis, so I hope you can hear me. Thank you Senator Colapietro and Senator Shapiro. My name is Diana Hendersen, and I'm here today to testify in support of SB 325, An Act Concerning a Pharmacy Error Database and Pharmacy Commission Meeting Minutes.

I'm speaking to you as a mother of a baby who was the victim of not one, but two pharmacy errors. These errors occurred at the same time, at the same pharmacy. In one error, a medication intended for use in her ear was mislabeled with instructions that it be placed in her eye. In the second, she was given a completely wrong medication. I have since come to find out that the state of Connecticut offers very little protection to consumers in the area of pharmacy errors.

I contacted the Department of Consumer Protection Drug Control Division and followed through with everything I was asked to do. I spoke with an agent, both on the phone and in person. I turned over the prescription bottles to help with the investigation. I made myself available in case my testimony would be needed at any hearings, and then I discovered the citizens of the state of Connecticut are not entitled to any information at all concerning pharmacy errors even if the victims of these errors. We were not entitled to any information about how they could have occurred or what has been done to ensure that they do not happen again. All investigations are considered confidential. We could not ascertain if this pharmacy or this pharmacist had a history of these types of errors. We could not even find out if this case led to any sort of sanctions, retraining or even investigation. In fact, at one point when we tried to retrieve our bottles of medication, we were told that there was no history of our ever having filed a complaint, and this has to change.

Each month I read the minutes of the pharmacy commission meetings to see if I could find any information on what, if any, action may have

been taken. Surely, I thought, they were such egregious errors, two such egregious errors, something had to be done. What I discovered was that all pharmacy errors are recorded only by case number, and that case number is also kept confidential.

No identifying information concerning the pharmacist, the pharmacy or even the town where the error occurred is listed. As long as the pharmacist completes the continuing education course on prescription errors, that case is dismissed. A pharmacist who commits two errors in a three-year period may have their name published if they are subject of a hearing. Apparently my daughter's two errors on the same evening did not merit a hearing, though. Our pharmacist and pharmacy were mentioned only one time in these minutes, and that was when the pharmacy commission approved this pharmacist's promotion to pharmacy manager five months after these errors occurred.

I have come to ask that you allow consumers access to error history of pharmacies and pharmacists so that we have the opportunity to make informed decisions about an important part of our healthcare. There were five other pharmacies located within two blocks of this one where I could have had those prescriptions filled. We can make these informed decisions about doctors and hospitals, so why not pharmacies?

An agent with Drug Control told me that the only way the public can learn about errors is to hope that victims go public, and also that since many errors are the result of pharmacists who have developed substance abuse issues, they want to protect them in hope that they seek treatment. I'm all for people

seeking treatment for substance abuse issues, but I think it's more important to protect the consumer, and I do not want my daughter to be the victim, to be the next victim of somebody who's already got a history of errors. My daughter has been victimized enough. Thank you.

SENATOR COLAPIETRO: Thank you. I think I -- I think I understood this committee did about, oh, maybe four years ago or six years ago where you have -- if you know of a pharmacy makes an error, in that envelope is an 800 number you can call. Has anybody ever heard of that or called?

DIANA HENDERSEN: Oh, oh, oh, I'm so glad you asked that question, Senator. I've gotten such an education through this, it's amazing. In the last 48 hours alone I have had three different people tell me about -- actually, somebody just outside in the hallway told me about a pharmacy error, so four in the past 48 hours have told me about pharmacy errors.

My understanding -- and this is -- I have no medical background, no pharmaceutical background, I'm just a mom who has educated myself on this -- the pharmacy where these errors occurred, that phone number was printed on the information packet that was folded up and put inside the bag. When I switched to a new pharmacy, they had the phone number emblazoned on the outside of the bag. So it depends on which pharmacy you go to. But nobody I've spoken to, nobody has been aware that that number exists. Everybody just returns their -- their prescription to the pharmacist and says, Oh, we have the wrong drug, and they change it out, and unless that pharmacist makes some sort of a report themselves, there's no documentation.

SENATOR COLAPIETRO: Well, they're supposed to put that in there. That's the law.

DIANA HENDERSEN: Yes, the number is there, but the public doesn't know about it, Senator. If we could somehow make the public aware of it.

SENATOR COLAPIETRO: I hear this all the time. I can't tell 97,000 people to listen to me. You know; they won't pay any attention. But we did -- we were sensitive to the woman that had the wrong prescription, I think it was in Southington, and that's why the law came out. As a matter of fact, I remember that clearly because a girl from Poland was the one that suggested putting the number on -- on the labels rather than putting it --

DIANA HENDERSEN: Right, and I'm telling you what happens after you call that number and report it.

SENATOR COLAPIETRO: Well, that's something we'd like to know. Thank you for your testimony. Anybody got any questions? Representative Witkos.

SENATOR WITKOS: Thank you, Mr. Chairman. What's the period that they said that you're allowed to have two mishaps or mistakes, do you know?

DIANA HENDERSEN: It's two errors in three years. Tomorrow, coincidentally, would be the three-year anniversary of my daughter's errors, so as of the next day the pharmacist would be free to do it again.

SENATOR WITKOS: And then it's expunged from a record or it just doesn't count so you get two more --

DIANA HENDERSEN: As I said, I have no pharmacy background. Just from reading those minutes monthly, just throwing myself into it, it looks like one error is just deleted. The second error -- what the agents explained to me is that if somebody puts themselves through the process of a hearing, things can go public, but it's exceptionally rare for a pharmacist to choose to put themselves through the error -- through the hearing. They would just choose to acknowledge the error and accept -- reach a deal for a letter of reprimand or some sort of finer penalty. And the agent who told me about the substance abuse problem told me also, once they get enough, once we get enough on them, then we ask them to turn in their license. And, I'm sorry, as a mom, that's not good enough for me.

SENATOR COLAPIETRO: Thank you. Go ahead, Representative Reed.

REP. REED: Thank you, Mr. Chairman. Just a quick question. How is your daughter?

DIANA HENDERSEN: Thank you very much for asking. I can -- through pure dumb luck, I can tell you she is a happy, healthy four-year old, and it was just pure dumb luck that the medication she received in error and that she completed an entire bottle of was one that was approved for a child her age, although she received it at four times the appropriate dosage, and she could not receive the appropriate medication for a certain period of time because her little body had just been given so much of this other medication and hadn't had time to process it. But knock on wood, she's a happy, healthy four-year-old.

REP. REED: That's great. She's got a great role

model for a mom.

DIANA HENDERSEN: Thank you.

SENATOR COLAPIETRO: Thank you. Any further questions?

Thank you for your testimony.

DIANA HENDERSEN: Thank you very much.

SENATOR COLAPIETRO: Bob Duguay, I believe it's Duguay.

BOB DUGUAY: Thank you, Mr. Chairman. Senator Witkos has been very helpful to me.

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My name is Bob Duguay. I live in Simsbury. I'm a small businessman. I own a florist/fruit basket business, actually in Beacon Falls. The name of the company is Fruit Baskets Unlimited, and primarily we do fruit baskets and gift baskets in general.

I, too, like an earlier person, am seeking a level playing field. We package fruit and cheese and nuts, mints, chocolates, whatever, and apple cider -- if those people are still here -- not Connecticut-based, I must admit, apple cider, and we ship it, and we deliver it and we ship it, and we're happy to do so.

If I chose -- if one of my clients calls me and says that they'd like to send a fruit and wine cheese basket, with wine, I have to say, Thank you, but no thank you because that's against the law.

I can't -- they can bring, if they choose -- my business is in Beacon Falls, so it's a long way from anywhere, but they can choose to bring wine, and I can package it then, and

Thank you for your testimony.

BRIAN HARTGRAVES: Thank you.

SENATOR COLAPIETRO: We hear you. Carrie Rand.

CARRIE RAND: Good afternoon, Senator Colapietro and members of the committee and Representative Shapiro. I'm Carrie Rando-Anastasiades, and I'm here to testify on Senate Bill 325, An Act Concerning Pharmacy Error Database and Pharmacy Commission Meetings. You have my written testimony, so I'll just briefly summarize.

I represent chain pharmacies, Connecticut Association of Chain Pharmacies -- Community Pharmacies, which are chain pharmacies, CVS, Walgreen's and the like, and we're very concerned about this bill because it does deal with the publishing of an error that is made by a pharmacist. And pharmacists fill thousands of prescriptions every day, and we have grave concerns of their identity being put out there to the general public because we have a grave concern about them burying errors. And we try really hard to correct errors with our systems and work with manufacturers. There are many reasons why an error may take place. The names of the drugs could be similar, they could be shelved inappropriately, there could be illegible handwriting by the physician, and we try really hard for a pharmacist not to make errors, and we feel that if you had a punitive process such as this where their names are published, that they'll just bury the error and we will then be unable to correct it.

We feel that the Department of Consumer Protection does have -- does take the

appropriate steps. They investigate each error that is given to them, and then they -- if there is errors found, there are punitive actions that they do take, that the pharmacy commission will take against the individual, as well as helping them to relearn better systems, going to different classes and things like that. We feel that that's the more appropriate way so that we can deal with the error and then correct it and not have pharmacists bury them so we have no ability to change the system or work with drug manufacturers to change names and the like. So...

SENATOR COLAPIETRO: Carrie, one of the things that I think you might have been involved in when we changed it where you had to put the telephone number in --

CARRIE RAND: Uh-huh.

SENATOR COLAPIETRO: -- to call if they make mistakes --

CARRIE RAND: Yes.

SENATOR COLAPIETRO: -- the young lady that was here earlier said that's not working and you can't get ahold of anybody if that happens. Have you heard that yet?

CARRIE RAND: We have not because we actually get the drug control agents that come into our stores, and many of the time it is through that hotline that they --

SENATOR COLAPIETRO: Would you be opposed -- would you be opposed to mandating, say, the Department of Consumer Protection keeping errors made by pharmacies for a certain amount of time, rather than like the BBB, the Better

Business Bureau?

CARRIE RAND: Yeah, I don't know that we would. I'd have to go back and, again, check with my client, but I think that they already do that, because they follow the individual to see, again, if there's another error that's committed because if your error is serious enough, you should be losing your license. If you're not being judicious or you're being negligent in dispensing, then you have the potential to lose your license. So I think that they do follow people currently.

SENATOR COLAPIETRO: Well, that woman said that they go away after a certain period of time, and maybe the time limit is too short.

CARRIE RAND: I don't know. We'd have to ask John Geday of Drug Control what the timeframe is, but to my knowledge if you have punitive action against your license --

SENATOR COLAPIETRO: I see.

CARRIE RAND: -- I think -- I think that stays with you.

SENATOR COLAPIETRO: I hear you, but I mean that's why they put erasers on pencils, that's what I always say, because people make mistakes, but these are serious mistakes, and we thought we took care of that seriousness with the bill that we passed before, and if they're not abiding by it, I would like to know.

CARRIE RAND: Yeah, I think that they are in most cases, but confidentiality for us is really key to figuring out whether it be a system problem or the drug name issue to reducing the amount of errors that are committed. I mean, pharmacists are human, and errors -- errors

are committed, but it doesn't mean that you're not a competent person delivering quality health care. When there are serious -- serious issues that arise, Drug Control is on top of them, and you can face loss of license and the ability to work, so...

SENATOR COLAPIETRO: Questions?

REP. SHAPIRO: I do. Carrie, you've referenced a couple of times, you said that there's concern that if something like this was put in place, that errors would be buried, but it sounds to a certain degree like they're buried now, but maybe I just don't understand the process for bumping up the chain these errors. Could you explain that to me?

CARRIE RAND: Yeah, well, there's -- there's kind of two -- two processes. We have internal errors in -- in our pharmacy that -- that get reported within -- in our own pharmacies, and a lot of times those errors come to light through the checking of the prescription, which the pharmacist actually does, whether it be there was a wrong dosage prescribed, then they have to repackage the prescription, or when the individual comes in they say, Oh, I don't think this is right, it goes back. And some of those errors are -- are never reported to -- to Department of Consumer Protection because they're dealt with within the pharmacy, and there's been no harm. So there are those types of errors.

And then there are the other type where they are sent to the Department of Consumer Protection. Drug Control investigates each and every error, even if it's a false claim. So you could have someone that's under investigation through the pharmacy commission right now, it's done by a docket number

assigned to the case, everything is confidential, And then they investigate through the pharmacy and interviews and whatnot if -- if the claim is legitimate. So we don't want -- and in many cases they may not be. The error may not have been the pharmacist's error. It may have been the physician's error in prescribing or -- or whatnot. So --

REP. SHAPIRO: Is harm defined as actual harm incurred or a mistake that could have caused grievous harm if a patient didn't actually notice it, a medicine that could have caused great harm if they had taken it but they noticed that it was wrong. Is that harmful or not harmful?

CARRIE RAND: I don't know. We'd have to ask the attorney at Consumer Protection. I would say that that would be harm because if the person didn't catch it, then -- but, again, I'm not the attorney, so I would have to get clarification on that.

REP. SHAPIRO: Okay. And then you said once there has been an internal determination that a grievous error was made and something is reported to Drug Control or DCP, enforcement action is taken, how do we explain what happened in the woman's case who testified where there was clearly actual harm to her daughter, there was not one but two errors, and I believe the punishment was he got promoted?

CARRIE RAND: Oh. Well, on that I don't know the individual -- individual situation, but in most times they're sent to classes, they pay fines and they -- they lose their license. In many cases, in some of the pharmacies, even errors that haven't been reported to DCP, they

lost their employment. So, you know, they're taken very seriously. In that case I -- I'm not sure why -- how they would have gotten promoted for -- for an error or two errors that --

REP. SHAPIRO: I would imagine it wasn't for but in spite of, but --

CARRIE RAND: Yeah, I don't know about that, but I know that they do take it -- take it extremely, extremely seriously.

REP. SHAPIRO: Okay. Do we have other questions on the committee? Representative Nicastro.

REP. NICASTRO: Thank you, Mr. Chairman.

Carrie, I'm playing devil's advocate, okay?

CARRIE RAND: Yeah.

REP. NICASTRO: You stated that sometimes they can't understand the doctor's handwriting. I never saw a doctor that could write good anyhow. You look at their prescriptions, you've got to be a genius to try and read what the prescription says; it's true. But what does it take to pick up a phone, for the pharmacist to pick up a phone and call the doctor and say, We can't read this, and make sure that they've got it correct? We're talking about somebody's life. We're not talking about -- we're talking about human life value here. And -- and if you can't read something, you pick up the phone and call.

We're responsible for our actions and how we vote. We have to answer to our constituents. I mean, to say that, I mean, that they sometimes can't read the doctor's handwriting, that bothers me.

CARRIE RAND: I think more what I meant was sometimes you misinterpret the doctor's handwriting. The names of the drugs are -- are very long and many times very similar. I can't think of an example right off the top of my head because I'm not a pharmacist, but there are two drugs that you may think by looking at the handwriting they meant one drug, when they meant another, and that's the error that's made. I don't think it's done willingly. I think that they do have responsibility, and if they can't read it or -- you know, they don't want to take the time, then they should be held accountable for that.

REP. NICASTRO: In the pharmacies today, is it strictly the pharmacist who is packaging these prescriptions? I know when you go into a pharmacy today, you see -- you know, there's several people working in the pharmacy --

CARRIE RAND: Yes.

REP. NICASTRO: -- and some are clerks, yes, I understand that, but do you have to be a registered pharmacist to -- to package that?

CARRIE RAND: Not to package. In many cases, technicians, pharmacy technicians are allowed to package the prescription in terms of counting out the pills, but the clinical judgment of whether -- and the checking of whether the dosage, the individual drug and whatnot, that's always done by a pharmacist. So they -- they have a more -- a clinical role. That checking is always done by them.

REP. NICASTRO: Like I see sometimes where they have college students -- and I mean no disrespect for college students, you've got to

learn somewhere -- they're like interns, and they're --

CARRIE RAND: Yes.

REP. NICASTRO: -- in there. You know, that's -- that's my concern also, is who puts that prescription in those -- you know --

CARRIE RAND: The pharmacy tech may put it in the bottle, but the pharmacist, who has the advanced degree and six years of schooling, is the one that double checks it to make sure that it's entirely correct. So -- and then the liability falls on the pharmacist because they're the last one to check the prescription.

So, you know, a pharmacist has gone through six years of schooling and is very competent and knowledgeable. For them to sit and count pills all day is not the best use of -- of their time, when they could be counseling people on how to use their medication and the like. So that's the function of the tech or the intern, and then the pharmacist is the final check of the prescription to ensure that it is correct.

REP. NICASTRO: Thank you. Thank you, Mr. Chairman.

REP. SHAPIRO: Thank you. Representative Reed.

REP. REED: Thank you, Mr. Chairman.

Just a quick question. I guess I'm confused as to why it's adjudicated by a public agency, and someone is found to be guilty, and something happens, why that information is not accessible to the public in a database, that they couldn't dial up the Consumer Protection

division and just find out which pharmacies may have had some -- some problems.

CARRIE RAND: I think for two reasons. One, the devil is kind of in the details of the bill. The bill is three lines long, and it doesn't state that if someone has been found guilty of making an error. A lot of the claims that come through are false, and there hasn't been an error that's made on the pharmacist's part, so the way the pharmacy commission works is these dockets, which are confidential, go before the board, and it's through every piece of the process, from the initial complaint to the investigation and the like. So if at the end the person is found not guilty, then you've just put this person's name out and given the appearance that they were -- made a judgment error.

So I think the difference is whether they've been found guilty of -- of an error as opposed to being investigated by one or the other, saying -- especially in our pharmacies, because we're multi-city and state operators, pharmacists move from locations fairly regularly. So if you were to, you know, call up something and -- I think you're from the Branford area, you know, that pharmacist may not work in that location anymore or even for that employer, as people do -- do change jobs. Their license number would always be the same.

But our -- our real concern is when you start, especially on those claims that are found to be innocent, if you're putting out somebody's name, it scares other pharmacists, and they don't want to bring to light errors or deal with the errors in a safe way. We don't want that to happen at all.

REP. REED: Is there any kind of language that you

would agree with if the bill were fine-tuned?

CARRIE RAND: I would be happy to sit down with members of the committee to -- to try to work something out. You know, again, the devil is kind of in the details. So we would love to sit down and try to work something out if you felt strongly that you wanted to bring the bill forward.

REP. REED: Thank you.

CARRIE RAND: You're welcome.

REP. SHAPIRO: All right, thank you for your testimony.

We have Steve Guveyan, followed by Rob Claremont.

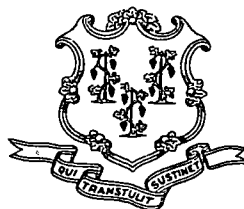
STEVE GUYEVAN: Good afternoon Chairman Colapietro, Chairman Shapiro, members of the committee. I'm Steve Guveyan from the Connecticut Petroleum Council. We're a trade association representing major oil companies, suppliers, terminal operators. We're here testifying in opposition to the petroleum terminal bill, House Bill 5160.

The bill says that a terminal operator will not be able to deny access to a hauler -- a hauler would be a home heating oil company, a gasoline distributor or a trucking company -- at that terminal operator's terminal, even if licensed -- if licensed and insured and meeting the terminal operator requirements. Our concern is that owning the property, we can't keep somebody off it.

As a starting point, we want people coming onto the property. We can't sell you gasoline, home heating oil or diesel fuel

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February 5, 2009

Good Afternoon Senator Colapietro, Representative Shapiro and members of the General Law Committee. I am here to testify in support of SB 325, AN ACT CONCERNING A PHARMACY ERROR DATABASE AND PHARMACY COMMISSION MEETING MINUTES. This issue was brought to my attention by a constituent. At present, there is no way for consumers to discover which pharmacists and pharmacies have the best or worst safety records. Most healthcare providers are regulated by the Department of Public Health and last year in PA 08-109 the General Assembly extended the requirement that DPH collect certain information to create an individual public profile on each physician licensed to practice medicine in Connecticut to also include dentists, chiropractors, optometrists, podiatrists, naturopaths, dental hygienists, advanced practice registered nurses, and physical therapists licensed to practice in Connecticut. DPH also provides access to reports of discipline and consent orders on its website. I believe that the Department of Consumer Protection

should provide consumers with the same information with regard to pharmacists and pharmacies.

The constituent received two incorrect prescriptions for her infant daughter. She received **ear** drops which were marked "Put 3 drops in left **eye** every 2 hours" and she received an incorrect antibiotic which was given at 4X the appropriate dose. Fortunately, she called the pharmacy in regard to the ear drops as she could not understand why she was being instructed to put drops in the eyes of a child with an ear infection; the pharmacy admitted that the label was in error and that the drops should go in the ears. Unfortunately, the second error of type and dose of antibiotic was not apparent to a layperson. She administered the dose listed on the label and became concerned when the drug ran out days before it should have. Ultimately she discovered that her daughter should have been administered Augmentin, but the bottle contained Zithromax. The directions were for a dose that would have been appropriate for Augmentin but was far too high a dose for Zithromax. The infant then could not be given Augmentin immediately for fear of side effects from the mega-dose of Zithromax. The child has had persistent problems with her ears ever since.

After this experience, she attempted to look up the safety records of pharmacists and pharmacies. She discovered that there are no profiles for pharmacists such as the ones DPH maintains on physicians.

She contacted the Department of Consumer Protection's Drug Control Division and followed through with everything she was asked to do. She turned over the medications to help with the investigation and made herself available in case she would be needed for any hearings only to discover that citizens of the state of Connecticut are not entitled to information concerning pharmacy errors. I urge you to pass this important legislation which would provide increased transparency and allow more informed decision making by consumers.

Thank you.

Diana Henderson
Hamden, CT
RE: SB 325
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Thank you Senator Colapietro and Representative Shapiro. My name is Diana Henderson and I am here today to testify in support of SB 325, AN ACT CONCERNING A PHARMACY ERROR DATABASE AND PHARMACY COMMISSION MEETING MINUTES.

I am speaking to you as the mother of a baby who was the victim of not one but two (2) pharmacy errors. These errors occurred at the same time at the same national chain pharmacy. In one error a medication intended for use in her ear was mislabeled with instructions that it be placed in her eye. In the second she was given a completely wrong medication. I have since come to find out that the State of Connecticut offers very little protection to consumers in the arena of pharmacy errors.

I contacted the Department of Consumer Protection's Drug Control Division and followed through with everything I was asked to do. I spoke with an agent both on the phone and in person. I turned over the prescription bottles to help with their investigation. I made myself available in case I would be needed for any hearings. Then I discovered that citizens of the state of Connecticut are not entitled to ANY information concerning pharmacy errors.

Even as the victim of these errors we were not entitled to ANY information about how they could have occurred or what has been done to ensure that they do not happen again. All investigations are considered confidential. We could not ascertain if this pharmacy or this pharmacist has a history of these types of errors. We could not even find out if this case led to any sort of sanctions, retraining or investigation. At one point when trying to retrieve our bottles of medication we were even told that there was no history of our ever having filed a complaint. Clearly this must change.

Each month I read the minutes of the Pharmacy Commission meetings to see if I could find any information on what, if any action may have been taken. Surely, I thought, with two such egregious errors something had to be done. I discovered that all pharmacy errors are recorded only by case number, which is also kept confidential. No identifying information

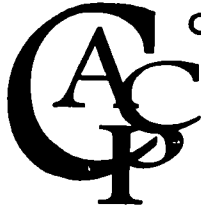
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concerning the pharmacist, the pharmacy or even the town where the error occurred is listed. As long as the pharmacist completes a continuing education course on prescription errors the case is dismissed. A pharmacist who commits 2 errors in a three year period may have their name published if they are the subject of a hearing. Apparently 2 errors occurring on the same evening did not merit a hearing, though. Our pharmacist and pharmacy were mentioned only one time in the minutes – when the Pharmacy Commission approved her promotion to pharmacy manager 5 months after these errors occurred.

I have come to ask that you allow consumers access to error histories for pharmacies and pharmacists so we have the opportunity to make informed decisions about an important part of our health care. There were 5 other pharmacies located within 2 blocks where I could have filled these prescriptions. We can make such informed decisions concerning doctors and hospitals so why not pharmacists?

An agent with Drug Control told me that the only way to learn about errors is to hope that victims go public. Also, since many errors are committed by pharmacists who have developed substance abuse issues they protect them in hopes that they will seek treatment. While I am all for people seeking help with substance abuse issues I believe that it is more important to protect the innocent consumer.

I do not want my daughter to be the next victim of someone with a history of errors. She has already been victimized enough.



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Carrie Rand-Anastasiades

Executive Director of the Connecticut Association of Community Pharmacians

Testimony before the General Law Committee on SB 325

An Act Concerning a Pharmacy Error Database and Pharmacy Commission Meeting Minutes

Representative Shapiro, Senator Colapietro and members of the General Law Committee, my name is Carrie Rand-Anastasiades and I am the Executive Director and lobbyist for the Connecticut Association of Community Pharmacians, a trade association which represents chain pharmacies across the state such as CVS, Rite-Aid, Walgreens, Shaw's, Price Chopper, Stop and Shop and Big Y. I am here today in opposition to SB 325 An Act Concerning Pharmacy Error Database and Pharmacy Commission Meeting Minutes.

Although the bill is well intentioned we feel that the effect of publishing the pharmacist's name and license numbers on public records would be disastrous. Pharmacies as well as the Pharmacy Commission and Drug Control work very hard to ensure that medication errors are not made, but because we are human they exist. We feel it is not only in the pharmacist's best interest, but also the patient's best interest if an error is admitted and dealt so we can determine why it occurred and rectify it. Confidentiality is essential to this process. If names and license numbers are published this will scare the pharmacist and will be an incentive for them to cover up or bury errors that they may have committed. This is the worst thing that could happen and is counter-intuitive to correction.

There are many reasons why an error is committed. The pharmacist may accidentally give the wrong strength of a medication, or grab a medication with a similar name. It could also be that the incorrect drug or dosage was prescribed by the physician. The Department of Consumer Protection does investigate each and every error that is reported to them. They also monitor individuals that have made errors to ensure they are making the appropriate steps to correct them or are abiding by the punitive action decided by the Pharmacy Commission.

We feel that there are many ways to correct errors without embarrassment. Pharmacists are responsible, highly educated professionals who try their best and dispense accurate prescriptions by the thousands per day. Just because a pharmacist makes an error does not mean they are not competent at their job. We are happy to work with the committee on alternate ways to achieve the same goal, preventing errors and providing the consumer the confidence that the appropriate oversight is in place. Thank you for allowing me to discuss this matter.

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• FAMILYMEDS • RITE AID CORPORATION • SHAW'S SUPERMARKETS •
• THE STOP & SHOP SUPERMARKET COMPANY • WAL-MART •
• WALGREEN COMPANY • NATIONAL ASSOCIATION OF CHAIN DRUG STORES •