

SB1016 Testimony.pdf

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Position: FAV



Statement of Maryland Rural Health Association (MRHA)

To the Senate Finance Committee

Chair: Senator Pamela Beidle

March 11, 2024

Senate Bill 1016: Health Occupations - Prescriptions for Children Subject to Joint Custody

POSITION: SUPPORT

Chair Beidle, Vice Chair Klausmeier, and members of the committee, the Maryland Rural Health Association (MRHA) is in SUPPORT of Senate Bill 1016: Health Occupations - Prescriptions for Children Subject to Joint Custody.

Medication adherence and treatment compliance is essential in the restoration and maintenance of an individual's health. Compliance to treatment is one of the most important factors that can aid or delay recovery. Although this is important for all individuals, it is especially important for children. Nearly 60% of the pediatric population in the United States is currently living with a chronic illness that requires a strict treatment regimen. Furthermore, the percentage of medication adherence among children with chronic illnesses are extremely variable, ranging from 11% to 93% (El-Rachidi et al., 2017). The wide range of adherence is concerning, as it highlights the presence of barriers that prevent a child from receiving the best care possible.

Barriers to medication adherence include socioeconomic status, culture, and family dynamic. If the child is unable to follow the course of treatment, whether it is pharmacological-centered or not, it can slow recovery time, cause more discomfort to the child, and increase associated costs to both the family and health care system (El-Rachidi et al., 2017). Prolonged discomfort can lead to further progression of disease, and subsequently hinder physiological, emotional, and social development as the child may not have energy to play, attend school, or perform daily activities. There is a direct relationship with the severity of disease and risk of complications in medication nonadherence.

According to an article published by the Journal of Pediatrics and Child Health, it was found that children who were under shared custody among two homes had lower adherence in comparison to their single home family counterparts. Disruptions in adherence included missed doses, lack of knowledge on medication regimen, miscommunication, or medication was forgotten between transfer of parental care (Kalamen et al., 2023). With the passing of SB1016, common barriers such as the ones previously mentioned will be addressed as both guardians who have custody over the child would be able to receive the prescription for the child, removing the risk of forgetting it between transfers of care. With this, the Maryland Rural Health Association is in favor of SB1016.

*On behalf of the Maryland Rural Health Association,
Jonathan Dayton, MS, NREMT, CNE, Executive Director
jdayton@mdruralhealth.org*

El-Rachidi, S., LaRoche, J. M., & Morgan, J. A. (2017). Pharmacists and pediatric medication adherence: bridging the gap. *Hospital Pharmacy*, 52(2), 124-131. <https://doi.org/10.1310/hpj5202-124>

Kalamen, C. R., Ibrahim, N., Shaker, V., Cham, C. Q., Ho, M. C., Visvalingam, U., Shahabuddin, F. A., Abd Rahman, F. N., A Halim, M. R. T., Kaur, M., Azhar, F. L., Yahya, A. N., Sham, R., Siau, C. S., & Lee, K. W. (2023). Parental factors associated with child or adolescent medication adherence: A systematic review. *Healthcare*, 11(4). <https://doi.org/10.3390/healthcare11040501>

SB1016_SponsorAmendment

Uploaded by: Senator Charles

Position: FWA



SB1016/963722/1

AMENDMENTS
PREPARED
BY THE
DEPT. OF LEGISLATIVE
SERVICES

12 FEB 24
12:00:27

BY: Senator Charles
(To be offered in the Finance Committee)

AMENDMENTS TO SENATE BILL 1016
(First Reading File Bill)

AMENDMENT NO. 1

On page 1, in line 2, strike “**Joint**” and substitute “**Shared**”; in the same line, after “**Custody**” insert “**or Visitation Schedules**”; in line 4, strike “double the amount of” and substitute “issue two prescriptions for”; strike beginning with “court” in line 5 down through “making” in line 6 and substitute “court-ordered or court-approved shared custody or visitation schedule”; in line 7, strike “dispense” and substitute “fill”; in the same line, strike “doubled”; and in line 8, strike “joint legal custody” and substitute “shared custody and visitation”.

AMENDMENT NO. 2

On page 1, in line 18, after “(A)” insert “(1)”; in the same line, strike “If” and substitute “SUBJECT TO PARAGRAPH (2) OF THIS SUBSECTION, IF”; strike beginning with “COURT” in line 19 down through “MAKING” in line 20 and substitute “COURT-ORDERED OR COURT-APPROVED SHARED CUSTODY OR VISITATION SCHEDULE”; in line 21, strike “DOUBLE THE AMOUNT OF” and substitute “ISSUE TWO PRESCRIPTIONS FOR”; after line 22, insert:

“(2) THE HEALTH CARE PROVIDER SHALL:

(i) ISSUE A PRESCRIPTION TO BE FILLED BY EACH PARENT;

AND

(ii) WRITE EACH PRESCRIPTION FOR AN AMOUNT OF THE DRUG THAT IS PROPORTIONATE TO THE AMOUNT OF TIME THAT THE PARENT

SPENDS WITH THE CHILD IN ACCORDANCE WITH THE COURT-ORDERED OR COURT-APPROVED SHARED CUSTODY OR VISITATION SCHEDULE.”;

in line 23, after “(B)” insert “(1)”; and in the same line, strike “IF” and substitute “SUBJECT TO PARAGRAPH (2) OF THIS SUBSECTION, IF”.

On pages 1 and 2, strike beginning with “COURT” in line 24 on page 1 down through “MAKING” in line 1 on page 2 and substitute “COURT-ORDERED OR COURT-APPROVED SHARED CUSTODY OR VISITATION SCHEDULE”.

On page 2, in line 2, strike “AUTHORIZED” and substitute “ISSUED”; and after line 3, insert:

“(2) A HEALTH CARE PROVIDER AUTHORIZED TO DISPENSE PRESCRIPTION DRUGS OR DEVICES UNDER THIS ARTICLE MAY FILL FOR THE PARENT ONLY THE PRESCRIPTION THAT IS FOR THE AMOUNT OF THE DRUG THAT IS PROPORTIONATE TO THE TIME THE PARENT SPENDS WITH THE CHILD IN ACCORDANCE WITH THE COURT-ORDERED OR COURT-APPROVED SHARED CUSTODY OR VISITATION SCHEDULE.”.

SB1016.jointcustodyrx.MPhA.pdf

Uploaded by: Aliyah Horton

Position: UNF



Date: March 12, 2024

To: The Honorable Pamela Beidle, Chair

From: Aliyah N. Horton, FASAE, CAE, Executive Director, MPhA, 240-688-7808

Cc: Members, Senate Finance Committee

Re: UNFAVORABLE - SB 1016 - Health Occupations - Prescriptions for Children Subject to Joint Custody

The members of the Maryland Pharmacists Association (MPhA) recognize the challenges of managing child health and welfare under joint custody agreements and understand the intent of the legislation. However, we respectfully request and **unfavorable report of SB 1016 – Health Occupations-Prescriptions for Children Subject to Joint Custody.**

- MPhA members from independent, chain and hospital system pharmacies are unanimous in their response that the bill is not necessary to achieve the intended goal and that there are unintended challenges and consequences.
- One parent would have to pay out of pocket as the pharmacy benefit manager (PBM) will not approve an overlapping supply.
- On the pharmacy side, it would be an operational nightmare to process and document, while also raising an unnecessary red flag for PBM audits. PBM audits cost the pharmacies value time and staff resources to address.

What can be done without legislation:

Parents may currently do the following, without legislation in any hospital, chain or independent pharmacy:

1. Request the pharmacy to provide an additional labeled vial. The parent can split the medication, as needed.
2. Request the pharmacy to put the medication in blister packs. The appropriate amount of medication can be torn off and shared, as needed.

SB1016_UNF_MedChi, MDAAP_Health Occs - Prescriptio

Uploaded by: Christine Krone

Position: UNF

MedChi

The Maryland State Medical Society

1211 Cathedral Street
Baltimore, MD 21201-5516
410.539.0872
Fax: 410.547.0915

1.800.492.1056

www.medchi.org



TO: The Honorable Pam Beidle, Chair
Members, Senate Finance Committee
The Honorable Nick Charles

FROM: Christine K. Krone
Pamela Metz Kasemeyer
J. Steven Wise
Danna L. Kauffman
Andrew G. Vetter
410-244-7000

DATE: March 12, 2024

RE: **OPPOSE** – Senate Bill 1016 – *Health Occupations – Prescriptions for Children
Subject to Joint Custody*

The Maryland State Medical Society (MedChi) and the Maryland Chapter of the American Academy of Pediatrics (MDAAP) **oppose** Senate Bill 1016.

Senate Bill 1016 would mandate that if a minor patient is subject to a court order of joint legal custody with the right of medical decision making, a health care provider must double the amount of any drug the provider prescribes for the minor. MedChi and MDAAP have significant concerns about the bill and believe it creates many unintended consequences. First, concerning opioids and other controlled substances; the bill puts even more drugs in circulation unnecessarily. Second, insurers are not going to authorize a double prescription for the same patient. It puts the provider in a very uncomfortable position between the patient and the insurance company, where the patient is going to demand that the provider fill the prescription under the authorization of the bill. Finally, should someone overdose, there is nothing in the bill that addresses disciplinary action against the provider for dispensing more drugs than what are proper under the standard of care. As an alternative to the bill, our physicians routinely write out instructions for the pharmacist on dividing one prescription into two labeled bottles. For these reasons, MedChi and MDAAP urge an unfavorable report.

SB 1016 - Oppose - MPS WPS.pdf

Uploaded by: Thomas Tompsett

Position: UNF



March 11, 2024

The Honorable Pamela Beidle
Senate Finance Committee
Miller Senate Office Building – 3 East
Annapolis, MD 21401

RE: Oppose – Senate Bill 1016: Health Occupations - Prescriptions for Children Subject to Joint Custody

Dear Chair Beidle and Honorable Members of the Committee:

The Maryland Psychiatric Society (MPS) and the Washington Psychiatric Society (WPS) are state medical organizations whose physician members specialize in diagnosing, treating, and preventing mental illnesses, including substance use disorders. Formed more than sixty-five years ago to support the needs of psychiatrists and their patients, both organizations work to ensure available, accessible, and comprehensive quality mental health resources for all Maryland citizens; and strive through public education to dispel the stigma and discrimination of those suffering from a mental illness. As the district branches of the American Psychiatric Association covering the state of Maryland, MPS/WPS represent over 1000 psychiatrists and physicians currently in psychiatric training.

MPS/WPS oppose Senate Bill 1016: Health Occupations - Prescriptions for Children Subject to Joint Custody (SB 1016). While psychotropic drugs can be valuable tools in the treatment of mental health conditions, they should be used and dispensed judiciously. SB 1016 removes clinical decisions and mandates that a clinician prescribe a double dosage of a medication when a child is in a joint custody situation. MPS/WPS understand that it can be complicated to maintain compliance with medications when switching between different households, but SB 1016 is a step too far in trying to remedy that issue. For example, one household might have a different set of medications than the other, and the custody might not be split 50 - 50, so medications would run out at one house before the other. It is important to remember that certain psychotropic drugs, such as stimulants used to treat attention-deficit/hyperactivity disorder (ADHD), have a potential for misuse and addiction, especially when used improperly or by individuals without a prescription. Having extra prescription drugs accessible only creates an unnecessary temptation for the adolescent patient or those not prescribed the drug to use it outside of the recommended treatment regimen. MPS/WPS believe that a better approach may be to ask the pharmacist to provide an extra pill bottle and divide up the medication that way

Therefore, for all the reasons above, MPS/WPS ask the committee for an unfavorable report on SB 1016. If you have any questions regarding this testimony, please contact Thomas Tompsett Jr. at tommy.tompsett@mdlobbyist.com.

Respectfully submitted,
The Maryland Psychiatric Society and the Washington Psychiatric Society
Legislative Action Committee

SB 1016_FLSC_Info.pdf

Uploaded by: Lindsay Parvis

Position: INFO

To: Members of Finance Committee

From: Family Law Section Council

Date: March 12, 2024

Subject: **Senate Bill 1016:
Health Occupations – Prescriptions for Children Subject to Joint Custody**

Position: **INFORMATION**

The Maryland State Bar Association (MSBA) Family Law Section Council (FLSC) **submits this Information paper regarding Senate Bill 1016: Health Occupations – Prescriptions for Children Subject to Joint Custody.**

The FLSC is the formal representative of the Family Law Section of the MSBA, which promotes the objectives of the MSBA by improving the administration of justice in the field of family and juvenile law and, at the same time, tries to bring together the members of the MSBA who are concerned with family and juvenile laws and in reforms and improvements in such laws through legislation or otherwise. The FLSC is charged with the general supervision and control of the affairs of the Section and authorized to act for the Section in any way in which the Section itself could act. The Section has over 1,200 attorney members.

SB1016 proposes a path to address a common dispute between separated parents: filling prescriptions & transferring them between separated households. The law is undeveloped about this type of situation. A law guiding parents has the potential to reduce parental conflict & facilitate children’s access to prescriptions.

How this would work in action remains to be seen. For example:

- The impact on insurance coverage (which is beyond the FLSC);
- How half of the doubled prescription will be provided to the other parent;
- Treatment of families with sole legal custody.

Should you have any questions, please contact:

Lindsay Parvis

240-399-7900

lparvis@jgllaw.com

Joseph Greenwald & Laake

111 Rockville Pike, Suite 975

Rockville, MD 20850

9b - SB 1016 - FIN - PHARM - LOI.pdf

Uploaded by: Maryland State of

Position: INFO



DEPARTMENT OF HEALTH

Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

MARYLAND BOARD OF PHARMACY

2024 SESSION POSITION PAPER

BILL NO.: SB 1016 – Health Occupations – Prescriptions for Children Subject to Joint Custody
COMMITTEE: Finance
POSITION: Letter of Information

TITLE: Health Occupations – Prescriptions for Children Subject to Joint Custody

POSITION & RATIONALE:

The Maryland Board of Pharmacy (Board) respectfully submits this letter of information for SB 1016 – Health Occupations – Prescriptions for Children Subject to Joint Custody (SB 1016).

Currently, a licensed pharmacist may dispense in a single dispensing the total number of dosage units authorized by a prescriber on an original prescription plus any refills, provided that the quantity dispensed does not exceed a 90-day supply. See Health Occ. 12-512.

To the extent a prescription written for “double the amount,” is inconsistent with the requirement that a prescription for a controlled substance be issued only for a legitimate medical purpose by a practitioner acting in the usual course of professional practice, it may be subject to additional scrutiny as required by federal law. 21 C.F.R. 1306.04(a).

Please note, many insurance companies limit the quantity of controlled substances dispensed to a 30-day supply.

The opinion of the Board expressed in this document does not necessarily reflect that of the Maryland Department of Health or the Administration.

If you would like to discuss this further, please do not hesitate to contact Deena Speights-Napata, MA, Executive Director, at deena.speights-napata@maryland.gov or (410) 764-4753.

Sincerely,



Deena Speights-Napata, MA
Executive Director
Maryland Board of Pharmacy

The opinion of the Board expressed in this document does not necessarily reflect that of the Maryland Department of Health or the Administration.

9b - SB 1016 - FIN - PHARM - LOI.pdf

Uploaded by: State of Maryland (MD)

Position: INFO



DEPARTMENT OF HEALTH

Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

MARYLAND BOARD OF PHARMACY

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Sincerely,



Deena Speights-Napata, MA
Executive Director
Maryland Board of Pharmacy

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INF SB1016 (2024) JPR vmcavoy.pdf

Uploaded by: vince mcavoy

Position: INFO

INFORMATIONAL on SB1016

Health Occupations - Prescriptions for Children Subject to Joint Custody

vince mcavoy baltimore maryland

Dear Senators of JPR,

Right after the House Judiciary heard Delegate (now Senator) Charles' HB1036(2022), they heard a bill I drafted. The bill was ignored amid Larry Hogan's efforts to bask in the final fetid fumes of his tyrannical COVID regime.

The bill draft I inked was improved upon by Delegate Dan Cox producing HB0564(2022).

https://mgaleg.maryland.gov/2022RS/fnotes/bil_0004/hb0564.pdf

His corrections, no doubt, were what garnered 8 delegates co-sponsoring HB0564.

We lined up a number of fatherhood advocates.

<https://mgahouse.maryland.gov/mga/Play/755843ac5b1941c2b056b31ea3f76e881d?playFrom=7021738&popout=true> I feel this was a proper bill to prevent unilateral, single-mother actions involving child medical care.

"Gatekeeping" is established Parental Alienation maladaptive behavior. Family Law court judges should not be weighing in when they haven't an appropriate background of family law code, much less working through often-cited (and wrongfully so) [Jacobson v. Massachusetts](#).

I drafted the bill at the request of someone who's suffered great civil rights hardships from Maryland's family law courts amid ongoing family law battle. He was *pro se* for a moment there and ended up conceding to a 30-day stint in jail over a Facebook post, if memory serves. Judge after *en banc* judge mishandled his case; if it was any of "thy people", you know you would – as Dan Cox did – get involved. Sadly, this dad is now homeless, extremely ill and unresponsive to communicate.

So, then, another tip-of-the-hat to Maryland's Family Law feminists, (goyim) family-hating lawyers and other Maryland misandrists ...together they helped to destroy yet another dad just trying to do his best by his child. Well, you have to hand it to these people; there is no respite for these demons helping to destroy family, one family law case at a time. Their hell-wrought inspiration to destroy family is, indeed, fiery.

In any case, HB0564 (2022) was brought to prevent unilateral medical treatment/course of conduct.

A variety of testimony (some from out of state) was provided during the bill hearing to give balance and overall foresightedness to medical action taken as part of parents' roles.

While Senator Charles' bill SB1016 is not as complicated a matter as COVID-era tyranny, I feel that it will quickly enter the weeds. We had multiple electronic prescription validation problems in our office (from different pharmacies) just last week; review of who was at fault/what countermeasures could have proactively been taken gets murky. Overlaid murkiness atop problematic child custody cases may cause more problems that it solves. Thus, I reference the testimony, bill text and intentions of this bill HB0564(2022).

Perhaps pharmacists will see his bill can help pharmacists, who knows? In either case,

I, of course, wish to end unilateral decision making for children by single-moms, who are objectively-speaking, doing a horrible job by America's children, nationwide, through over-medication, over-eating, modeling dystopic behavior and allowing entirely too much screentime. Think about a few common meds given widely to children and ask yourselves if positive/correct lifestyle changes would do more for children than medications.

humbly offered

~vince