

September 29, 2017

Weekly Legislative Wrap-Up

State of the States



Last Thursday, the Philadelphia Inquirer [published](#) an article examining physician and attorney owned pharmacies in the Philadelphia area.

The article reignited conversations in the Pennsylvania legislature about HB 18, the workers' comp formulary bill, and discussions about the ethical implications of such ownership arrangements. The legislature is unlikely to pass the bill this late in their session but efforts may resurface in 2018. Meanwhile, Pond Lehocky, a firm highlighted in the article, issued a [response](#) on their website.



Missouri's efforts to join the rest of the country and establish a PDMP might have hit yet another bump. The Governor's office is

[planning](#) to use unexpected federal money to establish the PDMP but the legislators are questioning whether the Governor has the authority to spend the money without legislative approval. The federal money comes for the state's Children's Health Insurance Program (CHIP) but since it was unexpected the CHIP program doesn't need it so the Governor's office plans to redirect the funds.



On Tuesday, the Assembly's Standing Committee on Labor held a [hearing](#) on the

Workers' Comp Board's (WCB) recent proposed changes to their impairment guidelines. The changes, pushed by the New York Business Council, were part of the state's 2017-2018 budget and have drawn strong criticism from labor and claimants attorneys, arguing it takes away too many benefits and protections from injured workers. At the hearing, Democratic legislators argued that the Board may have overstepped their authority in creating the proposals and labor requested the legislature kill the proposal and force the WCB to start from scratch.





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The Arkansas Workers' Compensation Commission **announced** a delayed implementation

of their new drug formulary from September 1, 2017 to January 1, 2018. The Commission will be adopting the Arkansas Public Employee Claims Division formulary. The **formulary** will limit initial opioid fills to 90 MEDs for the first five days and require physicians to check the Prescription Drug Monitoring Program before prescribing an opioid.



On Tuesday, Governor Scott **extended** the state's opioid emergency epidemic, freeing up millions in

federal funding to address the opioid problem. Governor Scott also announced intentions to introduce legislation in 2018 that would limit opioid fills to a three (3) day supply and require use of the state's Prescription Drug Monitoring Program.

Where in the U.S.A. are Jayne & Danielle?

Jayne and Danielle will be in the home office next week.



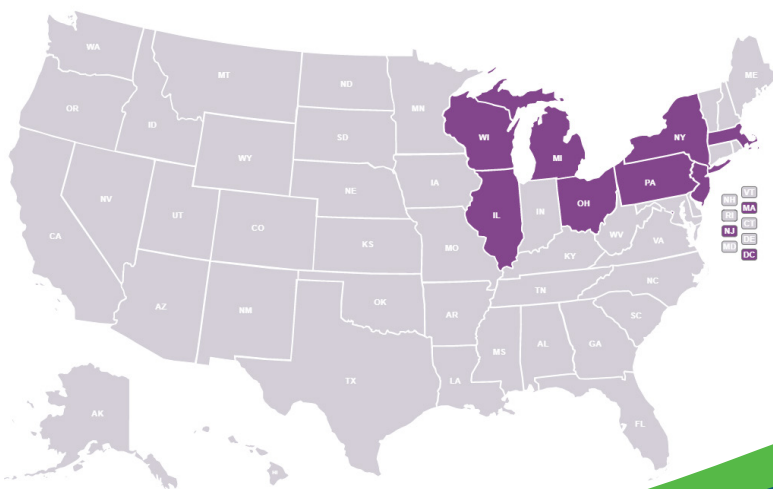
Articles of Interest

The New York Times and ProPublica **examine** how insurers and pharmacy benefit managers may play a role in the country's opioid epidemic.

States in Session

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Questions, Concerns, Suggestions? Let Us Know.

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