

MedChi

The Maryland State Medical Society

1211 Cathedral Street
Baltimore, MD 21201-5516
410.539.0871
Fax: 410.547.0915

1.800.492.1056

www.medchi.org

TO: The Honorable Thomas M. Middleton, Chairman
Members, Senate Finance Committee
The Honorable Michael Lenett

FROM: Joseph A. Schwartz, III
Pamela Metz Kasemeyer
J. Steven Wise

DATE: March 24, 2010

RE: **OPPOSE** – Senate Bill 1040 – *Prescription Confidentiality Act*

The Maryland State Medical Society (MedChi), which represents over 7,300 Maryland physicians and their patients, opposes Senate Bill 1040.

Senate Bill 1040 seeks to limit distribution of “patient identifiable” or “prescriber identifiable” pharmaceutical information from being licensed, transferred or sold for commercial purposes. MedChi believes that the limitation with respect to “patient identifiable” information is appropriate but Senate Bill 1040 is redundant in that the dissemination of that information is already protected and made illegal pursuant to the Federal HIPAA law.

MedChi disagrees, however, that “prescriber identifiable” information should be limited as proposed in Senate Bill 1040. For any number of reasons, information related to prescriber identity is appropriate to distribute. For instance, pharmaceutical companies may want to notify a physician of a Class I recall, alert a physician to new risk data or track adverse events of marketed prescription drugs.

Moreover, small biotechnology companies may use the prescriber identity to locate physicians who treat a particular patient population or disease state and who could benefit from access to new treatments.

MedChi believes that the only party who should be able to deny access is the physician. To that end, the American Medical Association (AMA), working with Gallup,

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conducted a national survey of physicians. It uncovered one major point of agreement: 84% of physicians either were not concerned or reported that their concerns would be alleviated if they had a chance to opt out of sharing prescribing data with drug company representatives. Accordingly, the AMA House of Delegates approved a plan to create a Physician Data Restriction Program (PDRP). Introduced in July 2006, the PDRP empowers all physicians to make their own choice.

In practice, the program is simple and extremely easy for all physicians to use. Physicians visit a website (www.ama-assn.org/go/prescribingdata) to opt out from having their prescribing data released to pharmaceutical representatives. Pharmaceutical companies are required to check the opt out list a minimum of quarterly, and then they have 90 days to comply with the request.

MedChi believes that the AMA program is the proper way to regulate any perceived abuses by pharmaceutical representatives. Many doctors want to receive information that may benefit their patients, particularly those doctors who specialize in specific disease states. Doctors who don't want the information have an easy way out through the AMA PDRP Program.

MedChi would urge an unfavorable report on Senate Bill 1040.

For more information call:

Joseph A. Schwartz, III
Pamela Metz Kasemeyer
J. Steven Wise
410-269-1618