

## Section 17 – Appropriations

(a) \$250,000 for evidence-based education program for inclusion of evidence-based information about safe prescribing of controlled substances and alternatives to opioids for treating pain.

*The UVM College of Medicine currently operates an academic detailing program funded in part by a \$200,000 annual grant from the Health Department with funding from the Evidence Based Education & Advertising Fund. The program's current offerings do not include the topic areas referenced in S.243. If this additional appropriation is authorized, the Department would plan to increase the fiscal year 2017 grant award to UVM and request the development of content and offering of detailing sessions on the topics.*

(b) \$625,000 for statewide unused prescription drug disposal initiatives;

- \$100,000 for a MedSafe collection and disposal program and program coordinator,
- \$50,000 for unused medication envelopes for a mail-back program,
- \$225,000 for a public information campaign on the safe disposal of controlled substances,
- \$250,000 for a public information campaign on the responsible use of prescription drugs.

*The Health Department currently works with community prevention partners to encourage safe disposal of prescription drugs; and the FY '17 budget includes \$50,000 from the Evidence Based Education & Advertising Fund to expand these efforts. The appropriation included in this bill would allow the program to expand statewide and would provide crucial funding for a public information campaign.*

(c) \$150,000 to purchase and distribute opioid antagonist rescue kits;

*The Health Department currently runs an opioid overdose rescue program on a pilot basis, and the FY '17 budget includes \$200,000 from the Evidence Based Education & Advertising Fund to continue the program on a permanent basis. At the current rate of program growth, the additional funding included in this bill will likely be needed to adequately meet the demand for rescue kits.*

(d) \$250,000 to establish a hospital antimicrobial program to reduce 18 hospital-acquired infections;

*Antibiotic resistance is one of the world's most pressing public health problems. Antibiotics are among the most commonly prescribed drugs, but they are not optimally prescribed up to 50% of the time. As of December 2014 only 7.1% of acute care hospitals in Vermont had antibiotic stewardship programs that incorporated all seven of the CDC's "Core Elements of Antibiotic Stewardship Programs". The funding proposed in this bill would fund efforts to improve antibiotic prescribing and reduce the incidence of resistant pathogens, as well as to improve surveillance for antibiotic resistant organisms by adding additional testing capacity at our public health laboratory.*

(e) \$32,000 to provide naloxone to emergency medical services providers;

*This is the estimated annual cost to provide naloxone to every provider and replace as needed.*

(f) \$200,000 to the Department of Vermont Health Access for the pilot project described in Sec. 15a to evaluate the use of acupuncture in treating chronic pain in Medicaid beneficiaries.

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