

COUNCIL OF THE CITY OF PHILADELPHIA
COMMITTEE ON PUBLIC HEALTH AND
HUMAN SERVICES

Room 400, City Hall
Philadelphia, Pennsylvania
Tuesday, November 13, 2018
1:15 p.m.

PRESENT:

COUNCILWOMAN CINDY BASS, CHAIR
COUNCILMAN DEREK S. GREEN
COUNCILMAN WILLIAM K. GREENLEE
COUNCILWOMAN HELEN GYM
COUNCILWOMAN BLONDELL REYNOLDS BROWN
COUNCILMAN AL TAUBENBERGER

BILL 180695 - An ordinance amending Title 9,
"Regulation of Businesses, Trades and
Professions," of The Philadelphia Code to add
a new Section 9-637, entitled "Opioid Antidote
Availability"...

- - -

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2 COUNCILWOMAN BASS: Good
3 afternoon. This hearing is called to
4 order. This is a public hearing of the
5 City Council Committee on Public health
6 and Human Services, and the purpose of
7 this public hearing is to hear testimony
8 on Bill No. 180695.

9 I want to recognize the
10 presence of a quorum of Committee
11 members, and the members in attendance
12 are Councilman Al Taubenberger,
13 Councilman Bill Greenlee, and
14 Councilwoman Helen Gym.

15 And if we can now have the
16 Clerk read the title of Bill No. 180695.

17 THE CLERK: Bill No. 180695,
18 amending Title 9, "Regulation of
19 Businesses, Trades and Professions," of
20 The Philadelphia Code to add a new
21 Section 9-637, entitled "Opioid Antidote
22 Availability," to require pharmacies to
23 stock opioid antidotes and display signs
24 giving notice of opioid antidote
25 availability to customers, all under

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2 certain terms and conditions.

3 COUNCILWOMAN BASS: Thank you.

4 And does any member of the
5 panel have an opening remark?

6 (No response.)

7 COUNCILWOMAN BASS: Okay. And
8 if we can have the Clerk now call the
9 first witness to testify and I believe
10 the only.

11 THE CLERK: Dr. Thomas Farley,
12 Health Commissioner, City of
13 Philadelphia.

14 (Witness approached witness
15 table.)

16 COUNCILWOMAN BASS: Good
17 afternoon.

18 COMMISSIONER FARLEY: Good
19 afternoon.

20 COUNCILWOMAN BASS: Please
21 state your name for the record and begin
22 your testimony.

23 COMMISSIONER FARLEY: Good
24 afternoon, Chairwoman Bass and members of
25 the Public Health and Human Services

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2 Committee. I'm Dr. Thomas Farley, Health
3 Commissioner for Philadelphia. Thank you
4 for allowing me to testify on Bill No.
5 180695, which was sponsored by Councilman
6 Henon. This bill would require that
7 retail pharmacies stock naloxone nasal
8 spray so that this life-saving treatment
9 is more widely available. We are
10 supportive of this bill as one of many
11 steps needed to address the opioid crisis
12 in Philadelphia.

13 As I'm sure you know, in 2017
14 over 1,200 people in Philadelphia died of
15 drug overdose, and opioids were involved
16 in nearly 90 percent of those deaths.
17 Naloxone, which is sold under the trade
18 name Narcan, is a medication that can
19 successfully reverse an opioid overdose
20 and save a person's life. It takes no
21 special expertise or training to save a
22 life with naloxone. Anyone can do it.

23 One of the many actions
24 recommended by the Mayor's Task Force to
25 Combat the Opioid Epidemic was to make

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2 greater use of this medication to prevent
3 fatal drug overdoses. City agencies are
4 doing that. Philadelphia's emergency
5 medical services teams use naloxone
6 extensively, and Philadelphia police
7 officers carry it and reverse many
8 overdoses. And my department is working
9 with the Department of Behavioral Health
10 and Intellectual disAbility Services to
11 make naloxone more available to the
12 friends and family members of drug users
13 and to encourage those people to carry it
14 and use it.

15 Since June of 2017, we have
16 distributed 57,000 doses of naloxone to
17 people in a position to treat drug
18 overdose. We have also run ads on
19 billboards and through social media
20 showing people exactly how to use
21 naloxone to save lives.

22 In 2015, Pennsylvania Physician
23 General Dr. Rachel Levine signed a
24 standing order that allows anyone to
25 purchase naloxone from a pharmacy without

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2 a prescription. Unfortunately, not all
3 pharmacies in Philadelphia are stocking
4 the medication. In the fall of 2016,
5 researchers from the University of
6 Pennsylvania found that only 40 percent
7 of pharmacies it contacted had naloxone
8 in stock. Zip code 19134, an area with
9 the greatest overdose threat, had the
10 lowest percentage of pharmacies with
11 naloxone in stock.

12 Since then, the number of
13 pharmacies stocking naloxone appears to
14 have increased. However, earlier this
15 year our department called over 200
16 pharmacies and found that nearly 25
17 percent of them still did not stock the
18 medication. There are over 400
19 pharmacies in Philadelphia, meaning that
20 more than 100 do not have naloxone in
21 stock. And we know that City residents
22 are having difficulty obtaining naloxone
23 because community members continue to
24 contact our office after not being able
25 to get it from their pharmacy.

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Bill No. 180695 would require that retail pharmacies keep two kits of naloxone in stock. It would also require the pharmacies to post a sign indicating that naloxone is available for purchase. We do not think the stocking requirement places much burden on pharmacies, especially since three-quarters of pharmacies are already in compliance. At the same time, we believe that ensuring that every pharmacy in Philadelphia has this medication available will encourage more people to purchase and use naloxone, and that has the potential to save lives that we are currently losing to drug overdose.

Thank you for the opportunity to testify. I'm happy to answer any questions.

COUNCILWOMAN BASS: Thank you, Commissioner. Thank you for this information and the idea that 25 percent of the pharmacies here in Philadelphia do not currently stock this medication. It

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2 is disturbing. You would think in a city
3 that's known for its eds and meds, so to
4 speak, that we would have a much broader
5 level of coverage, especially in the
6 areas where it's needed in the 19134 zip
7 code. And so I am glad to see that that
8 is something that the Health Department
9 is pushing, that this is something that
10 we can actually get pharmacies to do.

11 One of the questions or
12 concerns I have is regarding the attack
13 or the interest or the -- let me find the
14 correct word here, because I don't want
15 to mess up. But how do we make sure that
16 we get the same level of comprehensive
17 coverage on some of the other substance
18 abuse issues that we are facing here in
19 the City, such as alcohol abuse and
20 there's always, for a long time, in many
21 communities the crack cocaine epidemic
22 and things of that nature? Do you have
23 any ideas or suggestions on things that
24 we can do to effectively find ways to
25 draw attention or treatment to those as

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2 well? Because I think that this is going
3 to make a big difference, and if we can
4 make a big difference in all communities
5 where there are substance abuse issues,
6 it could really go a long way in helping
7 our city.

8 COMMISSIONER FARLEY: Yeah.

9 Thank you. So opioids are -- there are
10 many different addictive drugs. Opioids
11 are unique in that they can cause very
12 frequently fatal drug overdose, and
13 that's a bad side of them. One positive
14 side, though, is that there is this drug
15 naloxone which is this incredible
16 antidote that works in a matter of
17 seconds.

18 There isn't any equivalent for
19 cocaine. Most people -- it's rare to
20 overdose from cocaine. It sometimes
21 happens that people have an unusual
22 reaction and die suddenly, but there's no
23 specific antidote for that. So there's
24 no equivalent other drug that we would
25 want to require pharmacies to carry for

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2 cocaine or other addictive drugs.

3 So for the other addictive
4 drugs, our approach has to boil down to
5 just simply making all forms of drug
6 treatment more widely available and
7 encouraging more people to take advantage
8 of that.

9 Our department is not the one
10 that provides drug treatment in the City.
11 That's the Department of Behavioral
12 Health and Intellectual disAbility
13 Services, but I know that they're working
14 hard to try to increase the accessibility
15 of drug treatment, and I'm hopeful in the
16 wake of the opioid crisis that that
17 really benefits people regardless of
18 whatever drug that they're addicted to.

19 COUNCILWOMAN BASS: Okay.
20 Well, we certainly want to, again, be --
21 I'm appreciative of the work that you all
22 have done on this, and I certainly do
23 understand that this has a reaction that
24 other substances do not have, that sort
25 of threat of immediate overdose that the

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other substances do not have, but we want to make sure that we can try to draw attention to the overall problem, because one of the things that I'm sure that you know is that you may start out on one drug or one other substance and gradually work your way into an opioid or a heroin situation. So if we can kind of catch people before they get to that point, that would be a great thing.

COMMISSIONER FARLEY: Well, many people who are addicted to drugs use many different drugs. They're just not using one versus the other. And so naloxone to deal with drug overdoses is dealing with just one little piece of the problem. It's a little stop-gap measure to try to keep people alive long enough to get them into treatment. It doesn't address all the many other things we need to do, and we do need to work on all those things to make it less likely that people become addicted in the first place and make it easier for them to get

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2 treatment if they do become addicted.

3 COUNCILWOMAN BASS: Well, it
4 would be a great thing if we can stop the
5 number of overdose deaths here in the
6 City and that we can get folks to the
7 hospital and into treatment so that we
8 can reverse some of the numbers that
9 we're seeing. So thank you very much.

10 I want to acknowledge
11 Councilwoman Blondell Reynolds Brown has
12 joined us and also Councilman Derek
13 Green.

14 Councilman Taubenberger had a
15 comment.

16 COUNCILMAN TAUBENBERGER: I do.
17 Actually a question. Well, and a comment
18 as well.

19 Dr. Farley, thank you very much
20 for your efforts in ridding Philadelphia
21 of this awful epidemic. It's no question
22 about it. A little bit about -- or a
23 question on naloxone. Is that a
24 prescription drug?

25 COMMISSIONER FARLEY: It is

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2 still a prescription drug. It has not
3 been changed by the FDA to being an
4 over-the-counter drug. However, the
5 Pennsylvania Physician General has
6 written a standing order, so anybody can
7 purchase it without a prescription. They
8 need to go to the pharmacy counter within
9 the pharmacy and say, I want to purchase
10 naloxone, and the pharmacist can dispense
11 it.

12 COUNCILMAN TAUBENBERGER: Sure.
13 Okay. Makes sense to me.

14 The other question I have, is
15 there any effect from naloxone if you
16 just want to take it for taking's sake?

17 COMMISSIONER FARLEY: Good
18 question. It's completely safe. So if
19 you have someone who hasn't been taking
20 opioids and they were to get a nasal
21 spray of naloxone, it would have no
22 effect whatsoever.

23 COUNCILMAN TAUBENBERGER: Or
24 how about for someone that just says, oh,
25 this sounds pretty neat, maybe I'll take

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2 this?

3 COMMISSIONER FARLEY: No effect
4 whatsoever. And naloxone in some other
5 countries in the world is sold over the
6 counter.

7 COUNCILMAN TAUBENBERGER: Okay.
8 That's all very, very good to know.

9 Doctor, thank you very much.

10 Madam Chair, thank you.

11 COUNCILWOMAN BASS: Thank you.

12 One other quick question.
13 What's the cost? What's the average cost
14 of the treatment at pharmacies in
15 Philadelphia? So if I just walked in
16 without a prescription.

17 COMMISSIONER FARLEY: They're
18 going to charge different amounts, and
19 most health plans are going to pay for it
20 with a co-pay. That co-pay could be
21 anywhere from zero dollars to maybe \$25
22 or \$50. So we obviously prefer to have
23 very little co-pay.

24 The actual retail price for a
25 kit, which has two doses in it, I believe

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2 is \$150 typically. So that's a lot of
3 money for most people to pay, but
4 thankfully most health plans are going to
5 pay for that. Now, Medicaid, if I'm not
6 mistaken, covers it with no pay, no
7 co-pay.

8 COUNCILWOMAN BASS: Okay.

9 Councilwoman Brown.

10 COUNCILWOMAN BROWN: Yes. Good
11 afternoon, Commissioner. I have a
12 general question given this crisis that
13 is facing us locally and nationally.

14 What grade would you give
15 Philadelphia right now around our
16 handling of the opioid crisis as it
17 relates to, item one, collaboration
18 with -- well, you can't say the
19 community, because there's so many
20 communities being impacted. So generally
21 what grade would you give us compared to
22 how well other municipalities are doing
23 with regard to this crisis?

24 Why I ask is, I was invited to
25 a forum that was held at the Kimmel

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2 Center led by Independence Blue Cross
3 Foundation, Lorina Marshall-Blake,
4 whereby folks from across the spectrum
5 came to the Kimmel Center to hear all the
6 aspects about this crisis, including
7 those who are in recovery and those who
8 are seeking recovery. So they actually
9 had individuals on stage who were giving
10 their testimony.

11 And so for me, while we read
12 about it and I had my staff actually do a
13 full-day retreat in the Kensington area
14 underneath that bridge this past June so
15 that we could see it up close and
16 personal -- we were escorted by the local
17 police captain there -- it's
18 heart-wrenching when you see the scale of
19 this problem. So given the scale of it
20 and the fact that even the federal
21 government is trying to figure out how to
22 handle it, what grade would you give us,
23 our city, right now, stacked against
24 other situated municipalities?

25 COMMISSIONER FARLEY: Well, so

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2 you're right, this is a national crisis,
3 upwards of 70,000 people dying of drug
4 overdose in a single year in the United
5 States as a whole. Those numbers
6 continue to rise. So I don't know that
7 there's any city in the United States
8 that has gotten ahead of this problem and
9 said that they have solved this problem.

10 I don't know in detail what
11 other cities are doing. I'm sure that
12 there are other cities that are ahead of
13 us in some ways and there are other
14 places where we're ahead of other cities,
15 but it's clear that our efforts as yet
16 are not big enough to really turn this
17 problem around. The numbers of people
18 who are becoming addicted and are
19 addicted I think continues to rise. I
20 think that is mainly due to the
21 overprescribing of prescription
22 painkillers, secondarily due to the
23 availability of fentanyl, which is now
24 very cheap and easy to get on the street.
25 So the number of people who are dependent

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2 is on the rise, and even if a small
3 fraction of them die of drug overdose,
4 that's a lot of people.

5 So I'm not sure I can grade us,
6 other than to say that we are definitely
7 not ahead of this problem. There's a lot
8 more work we need to do. I will give us
9 good marks for at least working together
10 across multiple agencies and at least
11 trying to grapple with the problem. I
12 think that the current emphasis on
13 creating an emergency declaration to get
14 all the agencies in the same room
15 together is one additional step to really
16 help that cooperation work.

17 COUNCILWOMAN BROWN: Is DHS at
18 that table?

19 COMMISSIONER FARLEY: They are.
20 I don't know all the details of what
21 committees they sit on, but they are.

22 COUNCILWOMAN BROWN: Okay. All
23 right, then. Thank you for an honest
24 view of how huge it is and how we're not
25 yet in front of it. Thank you.

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COMMISSIONER FARLEY: Thank
you.

COUNCILWOMAN BASS: Thank you.
Councilman Taubenberger.

COUNCILMAN TAUBENBERGER: One
last question, I think, and you've
answered everything to my satisfaction.
But most people would go into a pharmacy
to get naloxone, they would be trying to
help someone; is that correct?

COMMISSIONER FARLEY: Yes.

COUNCILMAN TAUBENBERGER:
Because the person that really is
overdosing would rarely be able to do it.

COMMISSIONER FARLEY: Yeah.
The typical situation would be, say, a
family member of someone who knows his
family member is addicted and either
injecting heroin or taking pills every
day and is worried that they might die of
a drug overdose, so they want to have
that at hand should that happen.

COUNCILMAN TAUBENBERGER:
Correct. Or maybe they're at home and

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2 you could see something is going wrong

3 and they run out to the closest pharmacy.

4 COMMISSIONER FARLEY: They're
5 not going to have time to do that.

6 COUNCILMAN TAUBENBERGER:
7 They're not going to have time to do
8 that?

9 COMMISSIONER FARLEY: Yeah.
10 When someone overdoses, they stop
11 breathing, and they'll die in a matter of
12 minutes.

13 COUNCILMAN TAUBENBERGER:
14 Really?

15 COMMISSIONER FARLEY: Really.
16 They have to have that dose with them,
17 which is why we encourage people to carry
18 it.

19 COUNCILMAN TAUBENBERGER:
20 You've educated me quite well now. Okay.
21 I thank you.

22 Madam Chair, thank you.

23 COUNCILWOMAN BASS: No more
24 questions?

25 (No response.)

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COUNCILWOMAN BASS: Okay.

Thank you very much for your testimony.

COMMISSIONER FARLEY: Thank
you.

COUNCILWOMAN BASS: And is
there anyone else to testify on this
bill?

(No response.)

COUNCILWOMAN BASS: Okay. Then
this concludes the public hearing on Bill
No. 180695. We'll now go into a public
meeting to consider the action to be
taken on this bill.

The Chair recognizes
Councilmember Bill Greenlee for a motion
on Bill No. 180695.

COUNCILMAN GREENLEE: Thank
you, Madam Chair. I move that Bill No.
180695 be reported out of this Committee
with a favorable recommendation and that
the rules of Council be suspended to
allow for first reading at our next
session of Council.

(Duly seconded.)

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2 COUNCILWOMAN BASS: It's been
3 moved and properly seconded that Bill No.
4 180695 be reported from this Committee
5 with a favorable recommendation and
6 further moved that the rules of Council
7 be suspended to permit first reading of
8 this bill at the next session of Council.

9 All of those in favor of this
10 motion will signify by saying aye.

11 (Aye.)

12 COUNCILWOMAN BASS: Anyone
13 opposed?

14 (No response.)

15 COUNCILWOMAN BASS: The ayes
16 have it and the motion carries, and Bill
17 No. 180695 will be reported from this
18 Committee with a favorable recommendation
19 with a request that the rules of Council
20 be suspended to permit first reading at
21 the next session of Council.

22 This concludes the public
23 meeting of the Committee on Public Health
24 and Human Services. And there being no
25 further business before the Committee,

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thank you very much for attending.

(Committee on Public Health and
Human Services concluded at 1:30 p.m.)

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CERTIFICATE

I HEREBY CERTIFY that the
proceedings, evidence and objections are
contained fully and accurately in the
stenographic notes taken by me upon the
foregoing matter, and that this is a true and
correct transcript of same.

MICHELE L. MURPHY
RPR-Notary Public

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