



## Everything is Relative

BY SHEILA BUSH



**H**ow often do we all hear that everything is relative? Many of us attribute this perspective to stresses in our personal lives, financial status or even political frustrations. There's always benefit in gaining perspective and recognizing that something that could be seen as a loss, after gaining this relative perspective, is really a win.

This concept of relativity applies to much of what WMS deals with in our state's policy debates, and is particularly pertinent in the ongoing legislative discussions addressing Wyoming's opioid abuse and addiction concerns.


State Senate President Eli Bebout championed a bill in the 2018 Legislative Session to establish a legislative taskforce to deep dive into Wyoming's opioid abuse issues. The taskforce was composed of practicing physicians, the state health officer, pharmacists, nurses, members of the public and legislative leadership and was tasked with drafting legislative recommendations to be considered ultimately by the full legislature.

Almost a dozen legislative proposals were considered which, after long discussions, were condensed into four bills. Two of these legislative proposals have the greatest potential to impact medicine, one to limit prescribing authority for all prescribers and another bill that combined several ideas together including CME requirements, Rx database (PDMP) mandates and more.

The larger combination bill will be debated further at a November hearing and WMS members will hear more about that bill later. The bill that did earn approval to move forward was one to limit prescribing authority and it is here that the earlier-mentioned perspective in relativity is key.

WMS is keenly aware of our membership's resistance to government intrusion into the practice of medicine and recognize that prescribing limits are no exception. We worked diligently with lawmakers to find a space of compromise and are proud of what we were able to accomplish. The taskforce did their best to balance the desires of their constituencies with the perspec-

tives that medicine brought to the conversation. The result was taking an original bill that limited all opiate prescriptions to 100 morphine milligram equivalents (MME) per day for no more than a seven-day supply in a seven-day period without any exceptions for chronic pain to a bill that limits prescribers to a 14-day supplies in a 14-day period only in treating acute pain among the opioid naïve using a 45-day look back. The success for medicine is stripping the bill of MME limitations, doubling the supply window from 7 to 14 days and narrowing the limitation to only the opioid naïve for treating acute pain.

Seeing announcements of new prescribing limits likely strikes a chord with all of us, but understanding the context and history of the issue hopefully shines new light and allows this policy proposal to stand as a demonstration of what good advocates and well-intentioned lawmakers can do when we listen to each other and work toward common solutions together. Thank you for allowing WMS to represent your voice in these important discussions and never doubt how grateful we are to be fighting your fight on behalf of Wyoming medicine. 



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