HCS HB 1193 -- PRESCRIPTION DRUG MONITORING PROGRAM ACT

SPONSOR: Brandom (Frederick)

COMMITTEE ACTION: Voted "do pass" by the Committee on Professional Registration and Licensing by a vote of 18 to 0.

This substitute changes the laws regarding the dispensing of controlled substances and establishes the Prescription Drug Monitoring Program Act.

The substitute specifies that a pharmacist, in good faith, may sell and dispense controlled substances to any person upon a prescription of a licensed practitioner located in another state if the prescription was issued in compliance with the applicable laws of that state and the United States and it meets the quantity limitations of this state.

The Prescription Drug Monitoring Program Act is established which:

- (1) Requires the Department of Health and Senior Services to establish and maintain a program to monitor the prescribing and dispensing of all Schedule II through Schedule IV controlled substances by all licensed professionals who prescribe or dispense these substances in Missouri. All funding must be from gifts, grants, and donations;
- (2) Requires a dispenser to electronically submit to the department specified information for each prescription in accordance with transmission methods and frequency as established by the department;
- (3) Allows the department to issue a waiver to a dispenser who is unable to submit the required information electronically. If a waiver is obtained, a dispenser can submit the required information in a paper format or by other approved means;
- (4) Requires the department to reimburse each dispenser for the fees and other direct costs of transmitting the required information;
- (5) Requires all submitted prescription information to be confidential with specified exceptions. The department must review the dispensation information and, if there is reasonable cause to believe a violation of law or breach of professional standards may have occurred, must notify the appropriate law enforcement or professional regulatory entity and provide dispensation information required for an investigation;

- (6) Requires the department to maintain a registry of persons who it has reasonable cause to believe may have violated the law or been in breach of professional standards. Any such person identified will remain on the registry for a minimum of three years;
- (7) Allows the department to release non-personal, general information for statistical, educational, and research purposes;
- (8) Authorizes the department to contract with any other state agency or with a private vendor, as necessary, to administer the program;
- (9) Specifies that a person who violates a provision of the act will be subject to an administrative penalty in the amount of \$1,000 for each violation;
- (10) Requires the department to implement educational courses regarding the provisions of the act and, when appropriate, to work with associations for impaired professionals to ensure the intervention, treatment, and ongoing monitoring and followup of patients who have been identified as being addicted to substances monitored by the act and encourage them to receive addiction treatment; and
- (11) Requires the Bureau of Narcotics and Dangerous Drugs within the department to establish by January 1, 2014, a two-year statewide pilot project for the reporting of fraudulently obtained prescription controlled substances. The bureau must submit by February 1, 2014, and February 1, 2015, a report to the General Assembly detailing specified information regarding the pilot project. Any person who in good faith reports to the bureau will be immune from any civil or criminal liability as a result of the reporting.

The substitute requires a physician assistant to include his or her federal Drug Enforcement Administration registration number on all prescriptions for controlled substances.

The provisions of the substitute regarding the Bureau of Narcotics and Dangerous Drugs pilot project will expire three years after the effective date and the remaining provisions of the Prescription Drug Monitoring Program Act will expire six years after the effective date.

FISCAL NOTE: No impact on state funds in FY 2013, FY 2014, and FY 2015.

PROPONENTS: Supporters say that the bill creates a monitoring program that allows the sharing of information among providers.

There are many people who go to several different doctors in order to gain access to multiple prescriptions for controlled substances and the bill will provide a tool to help curb this problem. More than 40 states currently operate a drug monitoring program.

Testifying for the bill were Representative Frederick; Stephen Littlejohn, Covidien Pharmaceuticals; Missouri Retailers Association; Missouri Pharmacy Association; Missouri Association of Physicians and Surgeons; and Michael Szewczyck, M.D.

OPPONENTS: There was no opposition voiced to the committee.