

SENATE BILL 13

J2, J1

(PRE-FILED)

8lr0353
CF HB 115

By: ~~Senator Rosapepe~~ **Senators Rosapepe, Astle, Benson, Feldman, Hershey,
Jennings, Klausmeier, Mathias, Middleton, and Reilly**

Requested: June 9, 2017

Introduced and read first time: January 10, 2018

Assigned to: Finance

Committee Report: Favorable with amendments

Senate action: Adopted

Read second time: March 16, 2018

CHAPTER _____

1 AN ACT concerning

2 **Maryland Health Care Commission – Electronic Prescription Records ~~Cost~~**
3 **~~Saving Act of 2018~~ System – Assessment and Report**

4 FOR the purpose of requiring ~~a dispenser of a prescription drug to submit certain~~
5 ~~prescription information to a certain health information exchange; requiring certain~~
6 ~~prescription information to be submitted in a certain manner; prohibiting a certain~~
7 ~~health information exchange from imposing certain fees or assessments; requiring a~~
8 ~~certain health information exchange to make certain prescription information~~
9 ~~available to a health care provider for certain purposes; requiring the Maryland~~
10 ~~Health Care Commission to adopt certain regulations; requiring that certain~~
11 ~~regulations include certain provisions; stating the purpose of this Act; defining~~
12 ~~certain terms~~ the Maryland Health Care Commission, in consultation with
13 interested stakeholders, to assess the benefits and feasibility of developing an
14 electronic system to allow health care providers to access a patient's prescription
15 medication history; requiring the Commission to report its findings to the Governor
16 and the General Assembly on or before a certain date; specifying the intent of the
17 General Assembly; providing for the termination of this Act; and generally relating
18 to an assessment and report by the Maryland Health Care Commission regarding an
19 electronic prescription information ~~and the health information exchange~~ system.

20 ~~BY adding to~~
21 ~~Article – Health – General~~
22 ~~Section 19-145~~

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

~~Strike out~~ indicates matter stricken from the bill by amendment or deleted from the law by amendment.



~~Annotated Code of Maryland
(2015 Replacement Volume and 2017 Supplement)~~

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
That ~~the Laws of Maryland read as follows:~~

~~Article — Health — General~~

~~19-145.~~

~~(A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.~~

~~(2) (i) "DISPENSE" HAS THE MEANING STATED IN § 12-101 OF THE HEALTH OCCUPATIONS ARTICLE.~~

~~(ii) "DISPENSE" DOES NOT INCLUDE:~~

~~1. DIRECTLY ADMINISTERING A PRESCRIPTION DRUG TO A PATIENT; OR~~

~~2. GIVING OUT PRESCRIPTION DRUG SAMPLES.~~

~~(3) (i) "DISPENSER" MEANS A PERSON AUTHORIZED BY LAW TO DISPENSE A PRESCRIPTION DRUG TO A PATIENT OR THE PATIENT'S AGENT IN THE STATE.~~

~~(ii) "DISPENSER" INCLUDES A NONRESIDENT PHARMACY.~~

~~(iii) "DISPENSER" DOES NOT INCLUDE A PERSON DESCRIBED IN § 21-2A-01(D)(3) OF THIS ARTICLE.~~

~~(4) "PRESCRIPTION DRUG" HAS THE MEANING STATED IN § 21-201 OF THIS ARTICLE.~~

~~(B) THE PURPOSE OF THIS SECTION IS TO ALLOW A HEALTH CARE PROVIDER TO ACCESS A PATIENT'S MEDICATION HISTORY, INCLUDING MEDICATIONS PRESCRIBED FOR THE PATIENT BY ANOTHER HEALTH CARE PROVIDER.~~

~~(C) (1) AFTER DISPENSING A PRESCRIPTION DRUG, A DISPENSER SHALL SUBMIT PRESCRIPTION INFORMATION TO THE HEALTH INFORMATION EXCHANGE DESIGNATED FOR THE STATE UNDER § 19-143(A) OF THIS SUBTITLE.~~

~~(2) THE PRESCRIPTION INFORMATION SHALL BE SUBMITTED:~~

1 ~~(I) BY ELECTRONIC MEANS;~~

2 ~~(II) WITHOUT UNDULY INCREASING THE WORKLOAD AND~~
3 ~~EXPENSE ON A DISPENSER;~~

4 ~~(III) IN A MANNER AS COMPATIBLE AS POSSIBLE WITH EXISTING~~
5 ~~DATA SUBMISSION PRACTICES OF DISPENSERS;~~

6 ~~(IV) USING INFORMATION TECHNOLOGY SOFTWARE PROVIDED~~
7 ~~TO THE DISPENSER BY THE STATE DESIGNATED HEALTH INFORMATION EXCHANGE;~~
8 ~~AND~~

9 ~~(V) AS OTHERWISE REQUIRED THROUGH REGULATIONS~~
10 ~~ADOPTED BY THE COMMISSION.~~

11 ~~(3) THE STATE DESIGNATED HEALTH INFORMATION EXCHANGE MAY~~
12 ~~NOT IMPOSE ANY FEES OR OTHER ASSESSMENTS TO SUPPORT THE OPERATION OF~~
13 ~~THE EXCHANGE ON PRESCRIBERS OR DISPENSERS.~~

14 ~~(D) THE STATE DESIGNATED HEALTH INFORMATION EXCHANGE SHALL~~
15 ~~MAKE PRESCRIPTION INFORMATION SUBMITTED UNDER SUBSECTION (C) OF THIS~~
16 ~~SECTION AVAILABLE TO A HEALTH CARE PROVIDER FOR PURPOSES OF TREATMENT~~
17 ~~AND CARE COORDINATION OF A PATIENT.~~

18 ~~(E) THE COMMISSION, IN CONSULTATION WITH STAKEHOLDERS, SHALL~~
19 ~~ADOPT REGULATIONS TO CARRY OUT THIS SECTION.~~

20 ~~(F) THE REGULATIONS ADOPTED BY THE COMMISSION UNDER SUBSECTION~~
21 ~~(E) OF THIS SECTION SHALL INCLUDE:~~

22 ~~(1) THE SPECIFIC PRESCRIPTION INFORMATION REQUIRED TO BE~~
23 ~~SUBMITTED UNDER SUBSECTION (C) OF THIS SECTION;~~

24 ~~(2) THE TIME FRAME FOR SUBMITTING PRESCRIPTION INFORMATION~~
25 ~~UNDER SUBSECTION (C) OF THIS SECTION;~~

26 ~~(3) THE ELECTRONIC MEANS AND MANNER BY WHICH PRESCRIPTION~~
27 ~~INFORMATION IS TO BE SUBMITTED UNDER SUBSECTION (C) OF THIS SECTION;~~

28 ~~(4) WHO MAY ACCESS PRESCRIPTION INFORMATION AFTER IT IS~~
29 ~~SUBMITTED UNDER SUBSECTION (C) OF THIS SECTION;~~

1 ~~(5) PERMISSIBLE USES OF PRESCRIPTION INFORMATION SUBMITTED~~
2 ~~UNDER THIS SECTION; AND~~

3 ~~(6) PRESCRIPTION INFORMATION SUBMISSION REQUIREMENTS THAT~~
4 ~~ALIGN WITH THE DATA SUBMISSION REQUIREMENTS ON DISPENSERS OF~~
5 ~~MONITORED PRESCRIPTION DRUGS UNDER TITLE 21, SUBTITLE 2A OF THIS~~
6 ~~ARTICLE.~~

7 (a) The Maryland Health Care Commission shall convene interested stakeholders
8 to assess the benefits and feasibility of developing an electronic system to allow health care
9 providers to access a patient's prescription medication history, including assessing:

10 (1) whether the health information exchange designated for the State
11 under § 19-143 of the Health – General Article is capable of including a patient's
12 prescription medication history;

13 (2) the enhancements to the State-designated health information
14 exchange required to ensure that the exchange is able to continue to meet other State
15 mandates, including operating an effective Prescription Drug Monitoring Program;

16 (3) the resources required for individual health care practitioners, health
17 care facilities, prescription drug dispensers, and pharmacies to provide the information
18 collected in a statewide repository of prescription medication information;

19 (4) the cost to the State to develop and maintain an electronic prescription
20 medication system and the cost to prescribers to access the system;

21 (5) the resources required to ensure that health care practitioners and
22 prescription drug dispensers can maximize the benefit of using the system to improve
23 patient care;

24 (6) the scope of prescription medication information that should be
25 collected in the system, including any specific exemptions;

26 (7) the scope of health care providers that would report prescription
27 medication information in the system, including any specific exemptions;

28 (8) the potential for development or use of systems other than the
29 State-designated health information exchange for access to patients' prescription
30 medication history;

31 (9) the privacy protections required for the system, including the ability of
32 consumers to choose not to share prescription data, to ensure the prescription data is used
33 in a manner that is compliant with State and federal privacy requirements, including 42
34 U.S.C. § 290dd-2 and 42 C.F.R. Part 2;

1 (10) the feasibility of ensuring that the data in the system is used only by
2 health care practitioners to coordinate the care and treatment of patients;

3 (11) the standards for prohibiting the use of the data in the system by a
4 person or an entity other than a health care practitioner, including any exceptions for the
5 use of data with identifying information removed for bona fide research; and

6 (12) any other matters of interest identified by the Commission or the
7 stakeholders.

8 (b) On or before January 1, 2020, the Maryland Health Care Commission, in
9 consultation with interested stakeholders, shall report its findings and recommendations
10 to the Governor and, in accordance with § 2-1246 of the State Government Article, the
11 General Assembly.

12 SECTION 2. AND BE IT FURTHER ENACTED, That it is the intent of the General
13 Assembly that the Maryland Health Care Commission work toward the development of an
14 electronic system within the health information exchange designated for the State under §
15 19-143 of the Health – General Article for the purpose of providing a health care provider
16 access to a patient’s medication history, including medications prescribed to a patient by
17 another health care provider, to coordinate the care of or provide treatment to the patient.

18 SECTION ~~2~~ 3. AND BE IT FURTHER ENACTED, That this Act shall take effect
19 ~~October 1, 2018~~ July 1, 2018. It shall remain effective for a period of 2 years and, at the end
20 of June 30, 2020, this Act, with no further action required by the General Assembly, shall
21 be abrogated and of no further force and effect.

Approved:

Governor.

President of the Senate.

Speaker of the House of Delegates.