# **SENATE BILL 752**

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## By: **Senator Rosapepe** Introduced and read first time: February 3, 2020 Assigned to: Finance

## A BILL ENTITLED

1 AN ACT concerning

# Public Health - Non-Controlled Dangerous Substance Prescription Record System Program

4 FOR the purpose of establishing the NCDS Prescription Record System Program under the  $\mathbf{5}$ Maryland Health Care Commission; providing for the purpose of the Program; 6 requiring the Commission to implement the Program; requiring the Commission to 7 establish standards for selecting a certain prescription information system and any 8 other means for the transmission of certain information within the Program; 9 requiring that certain standards include certain requirements; requiring the 10 Commission to consider certain information to the extent practicable when making 11 a certain determination; requiring the Commission to make certain determinations; 12requiring a certain dispenser to submit certain information to the Program within a 13 certain period of time; prohibiting a dispenser from submitting certain information 14to the Program; requiring a dispenser to submit certain information electronically 15using a certain method; requiring the State-designated health information exchange 16to accept and store certain information and make certain information available to 17certain persons; prohibiting the State-designated health information exchange from 18 charging a certain fee or other expense or making available or storing certain 19information; requiring each certain dispenser and prescriber to provide consumers 20certain information in a certain manner; requiring the Commission to post certain 21 information on its website; establishing the NCDS Prescription Record System 22Program Advisory Committee; providing for the purpose of the Advisory Committee; 23providing for the composition, chair, and terms of the Advisory Committee; requiring 24the Advisory Committee to meet at least quarterly; requiring the Advisory 25Committee to make certain recommendations; prohibiting a member of the Advisory Committee from receiving certain compensation, but authorizing the reimbursement 2627of certain expenses; requiring the Commission, in consultation with the Secretary of 28Health, to adopt certain regulations; requiring the Commission to annually report to 29certain committees of the General Assembly on the Program beginning on a certain 30 date; defining certain terms; specifying the terms of the initial members of the 31Advisory Committee; requiring the Commission to submit a certain plan to the

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW. [Brackets] indicate matter deleted from existing law.



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of th	eral Assembly for approval; providing for the termination of certain provisions his Act under certain circumstances; and generally relating to the NCDS cription Record System Program.
BY adding to Article – Health – General Section 21–2D–01 through 21–2D–07 to be under the new subtitle "Subtitle 2D. NCDS Prescription Record System Program" Annotated Code of Maryland (2019 Replacement Volume)	
	TION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, aws of Maryland read as follows:
	Article – Health – General
SUBTITLE 2D. NCDS PRESCRIPTION RECORD SYSTEM PROGRAM.	
21–2D–01.	
(A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.	
(B) "ADVISORY COMMITTEE" MEANS THE NCDS PRESCRIPTION RECORD SYSTEM PROGRAM ADVISORY COMMITTEE.	
(C) FOLLOWI	<b>"BOARD-CERTIFIED" MEANS BEING CERTIFIED BY ONE OF THE NG PUBLIC OR PRIVATE CERTIFYING BOARDS:</b>
	(1) THE AMERICAN BOARD OF MEDICAL SPECIALTIES;
BOARD;	(2) THE AMERICAN OSTEOPATHIC ASSOCIATION CERTIFYING
CANADA;	(3) THE ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF OR
	(4) THE COLLEGE OF FAMILY PHYSICIANS OF CANADA.
(D)	"Commission" means the Maryland Health Care Commission.
	(1) "DIGDENGE" MEANS THE DECEDURE THAT DESILTS IN THE

(1) "DISPENSE" MEANS THE PROCEDURE THAT RESULTS IN THE **(E)** RECEIPT OF A PRESCRIPTION OR NONPRESCRIPTION DRUG OR DEVICE BY A PATIENT OR THE PATIENT'S AGENT AND THAT ENTAILS: 

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THE INTERPRETATION OF AN AUTHORIZED PRESCRIBER'S 1 **(I)**  $\mathbf{2}$ PRESCRIPTION FOR A DRUG OR DEVICE; 3 **(II)** THE SELECTION AND LABELING OF THE PRESCRIBED DRUG OR DEVICE IN ACCORDANCE WITH THE PRESCRIPTION; AND 4 (III) THE MEASURING AND PACKAGING OF THE PRESCRIBED  $\mathbf{5}$ 6 DRUG OR DEVICE IN ACCORDANCE WITH FEDERAL AND STATE LAWS. (2) "DISPENSE" DOES NOT INCLUDE: 7 DIRECT ADMINISTRATION OF A PRESCRIPTION DRUG TO A 8 **(I)** 9 PATIENT BY A HEALTH CARE PRACTITIONER; OR 10(II) DISTRIBUTION OF A PRESCRIPTION DRUG SAMPLE TO A 11 PATIENT BY A HEALTH CARE PRACTITIONER. "DISPENSER" HAS THE MEANING STATED IN § 21-2A-01 OF THIS TITLE. (F) 12(G) "HEALTH CARE PRACTITIONER" MEANS AN INDIVIDUAL WHO IS 13LICENSED, CERTIFIED, OR OTHERWISE AUTHORIZED UNDER THE HEALTH 14**OCCUPATIONS ARTICLE TO PROVIDE MEDICAL SERVICES IN THE ORDINARY** 15COURSE OF BUSINESS OR PRACTICE OF A PROFESSION. 16 "NCDS PRESCRIPTION DRUG" MEANS A PRESCRIPTION DRUG, AS 17**(H)** DEFINED IN § 21-201 OF THIS TITLE, THAT IS NOT A CONTROLLED DANGEROUS 18 19 SUBSTANCE UNDER TITLE 5, SUBTITLE 4 OF THE CRIMINAL LAW ARTICLE. "PHARMACIST" MEANS AN INDIVIDUAL WHO IS LICENSED UNDER TITLE 20**(I)** 12 OF THE HEALTH OCCUPATIONS ARTICLE TO DISPENSE A MONITORED 2122PRESCRIPTION DRUG. "PRESCRIBER" MEANS A LICENSED HEALTH CARE PRACTITIONER 23**(J)** 24AUTHORIZED BY LAW TO PRESCRIBE NCDS PRESCRIPTION DRUGS. "PRESCRIBER DELEGATE" MEANS AN INDIVIDUAL WHO IS: 25**(K)** 26(1) AUTHORIZED BY A PRESCRIBER TO REQUEST OR ACCESS 27PRESCRIPTION MONITORING DATA; AND 28(2) EMPLOYED BY OR UNDER CONTRACT WITH THE SAME 29**PROFESSIONAL PRACTICE AS THE PRESCRIBER.** 

1 (L) "PRESCRIPTION INFORMATION SYSTEM" MEANS THE SYSTEM AND ANY 2 OTHER MEANS SELECTED BY THE COMMISSION FOR THE TRANSMISSION OF NCDS 3 PRESCRIPTION DRUG INFORMATION.

4 (M) "PROGRAM" MEANS THE NCDS PRESCRIPTION RECORD SYSTEM 5 PROGRAM.

6 (N) "STATE-DESIGNATED HEALTH INFORMATION EXCHANGE" MEANS THE 7 HEALTH INFORMATION EXCHANGE DESIGNATED BY THE COMMISSION UNDER § 8 19–143 OF THIS ARTICLE.

9 **21–2D–02.** 

10(A) THERE IS AN NCDS PRESCRIPTION RECORD SYSTEM PROGRAM11UNDER THE MARYLAND HEALTH CARE COMMISSION.

12 (B) THE PURPOSE OF THE PROGRAM IS TO IMPROVE PATIENT SAFETY AND 13 REDUCE HEALTH CARE COSTS BY ALLOWING A PRESCRIBER AND PRESCRIBER 14 DELEGATE TO ACCESS THE NCDS PRESCRIPTION DRUG HISTORY OF A PATIENT, 15 INCLUDING DRUGS PRESCRIBED BY OTHER PRESCRIBERS.

16 (C) THE COMMISSION SHALL IMPLEMENT THE PROGRAM.

17 **21–2D–03.** 

18 (A) THE COMMISSION SHALL ESTABLISH BY REGULATION STANDARDS FOR 19 SELECTING A PRESCRIPTION INFORMATION SYSTEM THAT MAY ELECTRONICALLY 20 TRANSMIT NCDS PRESCRIPTION DRUG INFORMATION, AND ANY OTHER MEANS FOR 21 THE TRANSMISSION OF NCDS PRESCRIPTION DRUG INFORMATION WITHIN THE 22 PROGRAM.

23(B)THE STANDARDS DEVELOPED UNDER SUBSECTION (A) OF THIS SECTION24SHALL REQUIRE A PRESCRIPTION INFORMATION SYSTEM TO:

25 (1) MEET THE PRIVACY AND SECURITY CONTROL AND TECHNICAL 26 PERFORMANCE STANDARDS ESTABLISHED BY THE COMMISSION;

(2) COMPLY WITH EACH REQUIRED PRIVACY AND SECURITY
 CONTROL AND TECHNICAL PERFORMANCE STANDARD DURING THE PERIOD OF
 RECOGNITION BY THE COMMISSION;

30(3)ACCEPT NCDS PRESCRIPTION DRUG INFORMATION SUBMITTED31BY DISPENSERS;

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1(4) TRANSMIT THE NCDS PRESCRIPTION DRUG INFORMATION2SUBMITTED BY DISPENSERS TO THE STATE-DESIGNATED HEALTH INFORMATION3EXCHANGE; AND

4 (5) MEET AND MAINTAIN COMPLIANCE WITH ANY OTHER STANDARD 5 ESTABLISHED BY THE COMMISSION.

6 (C) TO THE EXTENT PRACTICABLE, WHEN DETERMINING WHETHER TO 7 SELECT A PRESCRIPTION INFORMATION SYSTEM, THE COMMISSION SHALL:

8 (1) CONSIDER THE EXTENT TO WHICH THE PRESCRIPTION 9 INFORMATION SYSTEM IS BEING USED BY DISPENSERS AND PRESCRIBERS; AND

10 (2) MINIMIZE ANY ADVERSE IMPACTS OF IMPLEMENTATION ON 11 DISPENSERS AND PRESCRIBERS.

12 **21–2D–04.** 

- 13 (A) THE COMMISSION SHALL DETERMINE:
- 14 (1) THE CATEGORIES OF PRESCRIBERS AND DISPENSERS WHO ARE:

15 (I) REQUIRED TO PARTICIPATE IN AND COMPLY WITH THE 16 REQUIREMENTS OF THE PROGRAM; AND

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(II) EXCLUDED FROM PARTICIPATING IN THE PROGRAM;

18 (2) THE TIME PERIOD WITHIN WHICH A DISPENSER SHALL TRANSMIT 19 INFORMATION ON A DISPENSED NCDS PRESCRIPTION DRUG TO A PRESCRIPTION 20 INFORMATION SYSTEM; AND

21 (3) THE METHOD BY WHICH PATIENTS MAY OPT OUT OF THE 22 PROGRAM.

(B) (1) (I) EXCEPT AS PROVIDED IN SUBPARAGRAPH (II) OF THIS
PARAGRAPH, AFTER DISPENSING AN NCDS PRESCRIPTION DRUG, A DISPENSER
SHALL SUBMIT ALL REQUIRED INFORMATION ON THE PRESCRIPTION TO THE
PROGRAM WITHIN THE TIME PERIOD ESTABLISHED BY THE COMMISSION.

27(II) A DISPENSER MAY NOT SUBMIT INFORMATION ON AN28NCDS PRESCRIPTION DRUG FROM A PRESCRIBER WHO IS EXCLUDED FROM THE29PROGRAM.

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(2) A DISPENSER SHALL SUBMIT THE REQUIRED INFORMATION ON A 1  $\mathbf{2}$ DISPENSED NCDS PRESCRIPTION DRUG UNDER PARAGRAPH (1) OF THIS 3 SUBSECTION ELECTRONICALLY USING A PRESCRIPTION INFORMATION SYSTEM. EXCEPT AS PROVIDED IN PARAGRAPH (2)(II) OF THIS 4 **(C)** (1) SUBSECTION, THE STATE-DESIGNATED HEALTH INFORMATION EXCHANGE SHALL: 56 **(I)** ACCEPT AND STORE NCDS PRESCRIPTION DRUG 7 INFORMATION SUBMITTED THROUGH A PRESCRIPTION INFORMATION SYSTEM 8 UNDER THIS SUBTITLE; AND

9 (II) MAKE NCDS PRESCRIPTION DRUG INFORMATION 10 AVAILABLE TO PRESCRIBERS, PHARMACISTS, PRESCRIBER DELEGATES, AND 11 PHARMACIST DELEGATES IN ACCORDANCE WITH REGULATIONS.

12 (2) THE STATE-DESIGNATED HEALTH INFORMATION EXCHANGE 13 MAY NOT:

14(I)CHARGE ANY OF THE FOLLOWING A FEE OR OTHER15EXPENSE FOR THE TRANSMISSION OR RETRIEVAL OF NCDS PRESCRIPTION DRUG16INFORMATION WITHIN THE PROGRAM:

- 17 **1.** A DISPENSER OR PRESCRIBER; OR
- 18 **2. A PRESCRIPTION INFORMATION SYSTEM; OR**

19 (II) MAKE AVAILABLE OR STORE NCDS PRESCRIPTION DRUG 20 INFORMATION FOR ANY INDIVIDUAL WHO HAS OPTED OUT OF THE PROGRAM OR 21 THE STATE-DESIGNATED HEALTH INFORMATION EXCHANGE.

22 **21–2D–05.** 

23 (A) EACH DISPENSER AND PRESCRIBER WHO PARTICIPATES IN THE 24 PROGRAM SHALL PROVIDE CONSUMERS:

(1) NOTICE THAT INFORMATION ON AN NCDS PRESCRIPTION DRUG
 DISPENSED OR PRESCRIBED BY THE DISPENSER OR PRESCRIBER WILL BE
 SUBMITTED TO THE PROGRAM UNLESS THE CONSUMER OPTS OUT OF THE
 PROGRAM OR THE PRESCRIBER IS EXCLUDED FROM THE PROGRAM;

29 (2) A DESCRIPTION OF HOW THE PROGRAM MAY USE THE RECORD 30 OF A DISPENSED OR PRESCRIBED NCDS PRESCRIPTION DRUG;

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1 (3) NOTICE THAT NCDS PRESCRIPTION DRUG INFORMATION WILL 2 BE SHARED WITH HEALTH CARE PRACTITIONERS ENGAGED IN THE PATIENT'S CARE 3 UNLESS THE CONSUMER OPTS OUT OF THE PROGRAM OR THE HEALTH CARE 4 PRACTITIONER IS EXCLUDED FROM THE PROGRAM;

5 (4) THE WEBSITE THROUGH WHICH THE PATIENT MAY OPT OUT OF 6 PARTICIPATION IN THE PROGRAM; AND

7 (5) ANY INFORMATION REQUIRED BY THE COMMISSION, AFTER 8 CONSULTATION WITH THE ADVISORY COMMITTEE.

9 (B) EACH DISPENSER AND PRESCRIBER SHALL PROVIDE THE 10 INFORMATION REQUIRED UNDER SUBSECTION (A) OF THIS SECTION BY POSTING A 11 SIGN IN A LOCATION CONSPICUOUS TO THE CONSUMER AT THE DISPENSER'S OR 12 PRESCRIBER'S PLACE OF BUSINESS AND BY OTHER APPROPRIATE METHODS.

13(c) The Commission shall post information on the Program on14ITS WEBSITE, INCLUDING:

15 (1) A DESCRIPTION OF HOW AN INDIVIDUAL CAN OPT OUT OF THE 16 PROGRAM; AND

17 (2) A LINK TO THE FORM THAT MUST BE USED BY A CONSUMER TO 18 OPT OUT OF THE PROGRAM LOCATED ON THE WEBSITE OF THE 19 STATE-DESIGNATED HEALTH INFORMATION EXCHANGE.

20 **21–2D–06.** 

21 (A) THERE IS AN NCDS PRESCRIPTION RECORD SYSTEM PROGRAM 22 Advisory Committee.

23 (B) THE PURPOSE OF THE ADVISORY COMMITTEE IS TO PROVIDE 24 CLINICAL AND OPERATIONAL RECOMMENDATIONS TO THE COMMISSION IN THE 25 DEVELOPMENT AND IMPLEMENTATION OF THE PROGRAM.

- 26 (C) THE ADVISORY COMMITTEE CONSISTS OF:
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(1) THE FOLLOWING MEMBERS DESIGNATED BY THE COMMISSION:

28 (I) ONE BOARD-CERTIFIED FAMILY MEDICINE PHYSICIAN 29 LICENSED AND PRACTICING IN THE STATE, NOMINATED BY THE MARYLAND 30 ACADEMY OF FAMILY MEDICINE; 1 (II) ONE BOARD-CERTIFIED INTERNAL MEDICINE PHYSICIAN 2 LICENSED AND PRACTICING IN THE STATE, NOMINATED BY THE MARYLAND 3 CHAPTER OF THE AMERICAN COLLEGE OF PHYSICIANS;

4 (III) ONE PHYSICIAN LICENSED AND PRACTICING IN THE 5 STATE, NOMINATED BY MEDCHI;

6 (IV) ONE ENDOCRINOLOGIST LICENSED AND PRACTICING IN 7 THE STATE WHO TREATS PATIENTS WITH DIABETES, NOMINATED BY THE 8 MID-ATLANTIC CHAPTER OF THE AMERICAN COLLEGE OF CLINICAL 9 ENDOCRINOLOGISTS;

10 (V) ONE PSYCHIATRIST LICENSED AND PRACTICING IN THE 11 STATE, NOMINATED BY THE MARYLAND PSYCHIATRIC SOCIETY;

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(VI) ONE MEMBER NOMINATED BY THE ATTORNEY GENERAL;

(VII) ONE MEMBER WITH EXPERTISE IN HEALTH INFORMATION
 TECHNOLOGY, NOMINATED BY THE MARYLAND CHAPTER OF THE HEALTHCARE
 INFORMATION AND MANAGEMENT SYSTEMS SOCIETY;

16 (VIII) ONE PHARMACIST LICENSED AND PRACTICING IN THE 17 STATE, NOMINATED BY THE MARYLAND PHARMACISTS ASSOCIATION;

18 (IX) ONE REPRESENTATIVE OF THE PRESCRIPTION DRUG 19 MONITORING PROGRAM, NOMINATED BY THE DEPUTY SECRETARY FOR 20 BEHAVIORAL HEALTH;

21 (X) ONE RESIDENT OF THE STATE WHO HAS EXPERIENCE WITH 22 HEALTH ISSUES IMPACTING CONSUMERS, NOMINATED BY THE SECRETARY OF 23 HEALTH; AND

24(XI) ONE RESIDENT OF THE STATE WHO HAS EXPERTISE IN25HEALTH INFORMATION TECHNOLOGY AND CYBERSECURITY, NOMINATED BY THE26SECRETARY OF INFORMATION TECHNOLOGY; AND

27(2)ONE MEMBER OF THE COMMISSION, DESIGNATED BY THE CHAIR28OF THE COMMISSION.

29 (D) THE MEMBER OF THE COMMISSION DESIGNATED TO SERVE ON THE 30 ADVISORY COMMITTEE SHALL SERVE AS THE CHAIR OF THE ADVISORY 31 COMMITTEE. 1 (E) (1) THE TERM OF A MEMBER DESIGNATED UNDER SUBSECTION 2 (C)(1) OF THIS SECTION IS 4 YEARS.

3 (2) THE TERMS OF MEMBERS DESIGNATED UNDER SUBSECTION
4 (C)(1) OF THIS SECTION ARE STAGGERED AS REQUIRED BY THE TERMS PROVIDED
5 FOR MEMBERS OF THE ADVISORY COMMITTEE ON OCTOBER 1, 2020.

6 (3) AT THE END OF A TERM, A MEMBER DESIGNATED UNDER
7 SUBSECTION (C)(1) OF THIS SECTION CONTINUES TO SERVE UNTIL A SUCCESSOR IS
8 DESIGNATED AND QUALIFIES.

9 (4) A MEMBER WHO IS DESIGNATED AFTER A TERM HAS BEGUN 10 SERVES ONLY FOR THE REST OF THE TERM AND UNTIL A SUCCESSOR IS 11 DESIGNATED AND QUALIFIES.

12 (5) A MEMBER DESIGNATED UNDER SUBSECTION (C)(1) OF THIS 13 SECTION MAY SERVE NOT MORE THAN TWO CONSECUTIVE 4-YEAR TERMS.

14 (F) THE ADVISORY COMMITTEE SHALL MEET AT LEAST QUARTERLY.

15 (G) THE ADVISORY COMMITTEE SHALL:

16 (1) MAKE POLICY AND OPERATIONAL RECOMMENDATIONS TO THE 17 COMMISSION REGARDING THE ESTABLISHMENT AND OPERATION OF THE 18 PROGRAM; AND

19 (2) MAKE RECOMMENDATIONS REGARDING WHICH HEALTH CARE 20 PRACTITIONERS WHO DISPENSE OR PRESCRIBE NCDS PRESCRIPTION DRUGS 21 SHOULD BE EXCLUDED FROM THE PROGRAM.

22 (H) A MEMBER OF THE ADVISORY COMMITTEE:

23 (1) MAY NOT RECEIVE COMPENSATION AS A MEMBER OF THE 24 ADVISORY COMMITTEE; BUT

25 (2) IS ENTITLED TO REIMBURSEMENT FOR EXPENSES UNDER THE 26 STANDARD STATE TRAVEL REGULATIONS, AS PROVIDED IN THE STATE BUDGET.

27 **21–2D–07.** 

28 (A) THE COMMISSION, IN CONSULTATION WITH THE SECRETARY, SHALL 29 ADOPT REGULATIONS TO IMPLEMENT THIS SUBTITLE. 1 (B) BEGINNING JANUARY 1, 2021, THE COMMISSION SHALL ANNUALLY 2 REPORT TO THE SENATE FINANCE COMMITTEE AND THE HOUSE HEALTH AND 3 GOVERNMENT OPERATIONS COMMITTEE, IN ACCORDANCE WITH § 2–1257 OF THE 4 STATE GOVERNMENT ARTICLE, ON THE PROGRAM.

5 SECTION 2. AND BE IT FURTHER ENACTED, That the terms of the initial 6 members of the NCDS Prescription Record System Program Advisory Committee shall 7 expire as follows:

- 8 (1) three members in 2023;
- 9 (2) three members in 2024;
- 10 (3) three members in 2025; and
- 11 (4) two members in 2026.

# 12 SECTION 3. AND BE IT FURTHER ENACTED, That:

(a) The Maryland Health Care Commission shall submit a plan for funding the
 NCDS Prescription Record System Program to the General Assembly for approval.

15 (b) If the Maryland Health Care Commission does not submit a plan in 16 accordance with this section or the General Assembly does not approve a plan submitted 17 by the Maryland Health Care Commission on or before April 15, 2022, Sections 1 and 2 of 18 this Act, with no further action required by the General Assembly, shall be abrogated and 19 of no further force and effect.

20 SECTION 4. AND BE IT FURTHER ENACTED, That this Act shall take effect 21 October 1, 2020.