
By: **Senators Miller, Currie, Frosh, Hollinger, and Middleton**

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Assigned to: Education, Health, and Environmental Affairs

Committee Report: Favorable with amendments

Senate action: Adopted

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CHAPTER _____

1 AN ACT concerning

2 **Prescription Drug Monitoring Program**

3 FOR the purpose of ~~establishing~~ requiring the Department of Health and Mental
 4 Hygiene to establish and maintain a certain Prescription Drug Monitoring
 5 Program within the Department of ~~Health and Mental Hygiene~~; establishing
 6 the powers and duties of the Secretary of Health and Mental Hygiene under the
 7 Program; creating a certain Advisory Board on Prescription Drug Monitoring to
 8 assist in the design, implementation, and evaluation of the Program;
 9 establishing the chair, the terms of the members, and the responsibilities of the
 10 Board; ~~creating~~ requiring the Secretary to appoint a multidisciplinary
 11 consultation team to assist in the interpretation of prescription monitoring data;
 12 requiring dispensers to submit electronically certain information to the Program
 13 except in certain circumstances; making prescription monitoring data
 14 confidential and privileged and not subject to certain means of legal compulsion
 15 except under certain circumstances; authorizing certain agencies and persons to
 16 obtain access to prescription monitoring data under certain circumstances;
 17 establishing immunity from civil liability for certain agencies and persons
 18 relating to the operation and use of the Program; providing for education and
 19 training relating to the Program; establishing penalties for violations of the
 20 requirements of the Program; defining certain terms; providing that
 21 implementation of the Program is contingent on the Board obtaining certain
 22 federal grant money; and generally relating to the creation and operation of the
 23 Prescription Drug Monitoring Program.

24 BY adding to

25 Article - Health - General

26 Section 21-2A-01 through 21-2A-09, inclusive, to be under the new subtitle

27 "Subtitle 2A. Prescription Drug Monitoring Program"

1 Annotated Code of Maryland
2 (2005 Replacement Volume and 2005 Supplement)

3 Preamble

4 WHEREAS, Thousands of Marylanders suffer from chronic pain and other
5 conditions that make access to pain medications and other pharmaceutical therapies
6 necessary and beneficial; and

7 WHEREAS, Increasing numbers of Maryland adults and adolescents are
8 engaging in prescription drug abuse and diversion to the detriment of their health
9 and welfare; and

10 WHEREAS, Maryland should have a Prescription Drug Monitoring Program
11 that supports the lawful use of controlled substances without interfering with
12 legitimate professional practice and patient care; and

13 WHEREAS, A Prescription Drug Monitoring Program should assist health care
14 professionals and law enforcement professionals in the identification, treatment, and
15 prevention of prescription drug abuse and in the identification and investigation of
16 unlawful prescription drug diversion; and

17 WHEREAS, Data concerning monitored prescription drugs under a Prescription
18 Drug Monitoring Program would be available for research purposes, including
19 research about the effects of the Prescription Drug Monitoring Program itself; now,
20 therefore,

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

23 **Article - Health - General**

24 **SUBTITLE 2A. PRESCRIPTION DRUG MONITORING PROGRAM.**

25 21-2A-01.

26 (A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS
27 INDICATED.

28 (B) "AUTHORIZED RECIPIENT" MEANS:

29 (1) A DISPENSER;

30 (2) A PRESCRIBER;

31 (3) A FEDERAL LAW ENFORCEMENT AGENCY;

32 (4) A STATE OR LOCAL LAW ENFORCEMENT AGENCY;

33 (5) A LICENSING ENTITY;

1 (6) THE MARYLAND MEDICAL AND PHARMACEUTICAL ASSISTANCE
2 PROGRAMS;

3 (7) A PATIENT WITH RESPECT TO INFORMATION ABOUT THE PATIENT;
4 OR

5 (8) ANY PERSON UNDER CONTRACT WITH THE DEPARTMENT
6 CONCERNING THE OPERATION OF THE PROGRAM.

7 (C) "BOARD" MEANS THE ADVISORY BOARD ON PRESCRIPTION DRUG
8 MONITORING.

9 (D) (1) "DISPENSER" MEANS A PERSON WHO DISPENSES A MONITORED
10 PRESCRIPTION DRUG TO A PATIENT OR THE PATIENT'S AGENT IN THE STATE.

11 (2) "DISPENSER" INCLUDES A PERSON OPERATING BY MAIL OR OTHER
12 MEANS FROM A PLACE OF BUSINESS OUTSIDE THE STATE.

13 (3) "DISPENSER" DOES NOT INCLUDE A LICENSED HOSPITAL PHARMACY
14 THAT DISPENSES A MONITORED PRESCRIPTION DRUG FOR INPATIENT HOSPITAL
15 CARE.

16 (E) "DISPENSES" HAS THE MEANING STATED IN § 12-101 OF THE HEALTH
17 OCCUPATIONS ARTICLE.

18 ~~(F) "DRUG OF CONCERN" MEANS A PRESCRIPTION DRUG THAT:~~

19 ~~(1) DOES NOT CONTAIN A SUBSTANCE LISTED IN SCHEDULE II~~
20 ~~THROUGH SCHEDULE IV; AND~~

21 ~~(2) IS DETERMINED BY THE SECRETARY TO PRESENT AN EMERGING~~
22 ~~THREAT IN THE STATE BECAUSE OF INCREASING ABUSE OR DIVERSION.~~

23 ~~(G)~~ (F) "FEDERAL LAW ENFORCEMENT AGENCY" MEANS ANY ENTITY
24 WITHIN THE UNITED STATES DEPARTMENT OF JUSTICE, INCLUDING:

25 (1) THE DRUG ENFORCEMENT ADMINISTRATION;

26 (2) THE FEDERAL BUREAU OF INVESTIGATION; ~~AND~~

27 (3) A UNITED STATES ATTORNEY'S OFFICE; AND

28 (4) THE OFFICE OF THE INSPECTOR GENERAL OF THE DEPARTMENT OF
29 HEALTH AND HUMAN SERVICES.

30 ~~(H)~~ (G) "LICENSING ENTITY" MEANS AN ENTITY AUTHORIZED UNDER THE
31 HEALTH OCCUPATIONS ARTICLE TO LICENSE, REGULATE, OR DISCIPLINE A
32 PRESCRIBER OR DISPENSER.

33 ~~(I)~~ (H) "MONITORED PRESCRIPTION DRUG" MEANS A PRESCRIPTION DRUG
34 THAT:

1 ~~(H)~~ CONTAINS A SUBSTANCE LISTED IN SCHEDULE II THROUGH
2 SCHEDULE IV;~~OR~~

3 ~~(I)~~ IS A DRUG OF CONCERN.

4 ~~(H)~~ (I) "PRESCRIBER" MEANS A LICENSED HEALTH CARE PROFESSIONAL
5 WHO IS AUTHORIZED BY LAW TO PRESCRIBE A MONITORED PRESCRIPTION DRUG.

6 ~~(K)~~ (J) "PRESCRIPTION DRUG" HAS THE MEANING STATED IN § 21-201 OF
7 THIS TITLE.

8 ~~(L)~~ (K) "PRESCRIPTION MONITORING DATA" MEANS THE INFORMATION
9 SUBMITTED TO THE PROGRAM.

10 ~~(M)~~ (L) "PROGRAM" MEANS THE PRESCRIPTION DRUG MONITORING
11 PROGRAM ESTABLISHED UNDER THIS SUBTITLE.

12 ~~(N)~~ (M) "SCHEDULE II" MEANS THE LIST OF CONTROLLED DANGEROUS
13 SUBSTANCES SET FORTH IN § 5-403 OF THE CRIMINAL LAW ARTICLE.

14 ~~(O)~~ (N) "SCHEDULE III" MEANS THE LIST OF CONTROLLED DANGEROUS
15 SUBSTANCES SET FORTH IN § 5-404 OF THE CRIMINAL LAW ARTICLE.

16 ~~(P)~~ (O) "SCHEDULE IV" MEANS THE LIST OF CONTROLLED DANGEROUS
17 SUBSTANCES SET FORTH IN § 5-405 OF THE CRIMINAL LAW ARTICLE.

18 ~~(Q)~~ (P) "STATE OR LOCAL LAW ENFORCEMENT AGENCY" MEANS:

19 (1) A STATE, COUNTY, OR MUNICIPAL POLICE DEPARTMENT OR AGENCY;

20 (2) A SHERIFF'S OFFICE;

21 (3) A STATE'S ATTORNEY'S OFFICE; OR

22 (4) THE OFFICE OF THE ATTORNEY GENERAL.

23 21-2A-02.

24 (A) THE DEPARTMENT SHALL ESTABLISH AND MAINTAIN, IN CONSULTATION
25 WITH THE BOARD, A PRESCRIPTION DRUG MONITORING PROGRAM THAT
26 ELECTRONICALLY COLLECTS AND STORES DATA CONCERNING MONITORED
27 PRESCRIPTION DRUGS.

28 (B) THE SECRETARY MAY:

29 (1) ASSIGN RESPONSIBILITY FOR THE OPERATION OF THE PROGRAM TO
30 ANY UNIT IN THE DEPARTMENT; AND

31 (2) CONTRACT WITH ANY QUALIFIED PERSON AS THE SECRETARY
32 DEEMS NECESSARY FOR THE EFFICIENT AND ECONOMICAL OPERATION OF THE
33 PROGRAM.

1 (C) THE SECRETARY, IN CONSULTATION WITH THE BOARD, SHALL ADOPT
2 REGULATIONS TO CARRY OUT THIS SUBTITLE.

3 (D) THE REGULATIONS ADOPTED BY THE SECRETARY SHALL:

4 (1) PROMOTE A BALANCED USE OF PRESCRIPTION MONITORING DATA
5 TO ASSIST APPROPRIATE LAW ENFORCEMENT ACTIVITIES WHILE PRESERVING THE
6 PROFESSIONAL PRACTICE OF HEALTH CARE PROVIDERS AND THE ACCESS OF
7 PATIENTS TO OPTIMAL PHARMACEUTICAL CARE;

8 (2) IDENTIFY THE CIRCUMSTANCES UNDER WHICH PRESCRIPTION
9 MONITORING DATA ARE PROVIDED TO AN AUTHORIZED RECIPIENT, WITH SUCH
10 CIRCUMSTANCES TO PARALLEL AS CLOSELY AS IS APPROPRIATE AN AUTHORIZED
11 RECIPIENT'S AUTHORITY TO ACCESS SIMILAR CONFIDENTIAL INFORMATION UNDER
12 CURRENT FEDERAL AND STATE LAWS AND REGULATIONS;

13 (3) IDENTIFY THE CIRCUMSTANCES UNDER WHICH AN AUTHORIZED
14 RECIPIENT MAY DISCLOSE PRESCRIPTION MONITORING DATA PROVIDED BY THE
15 PROGRAM;

16 (4) IDENTIFY THE CIRCUMSTANCES UNDER WHICH A FEDERAL LAW
17 ENFORCEMENT AGENCY, A STATE OR LOCAL LAW ENFORCEMENT AGENCY, OR A
18 LICENSING ENTITY THAT HAS RECEIVED PRESCRIPTION MONITORING DATA SHALL
19 CONSULT WITH THE MULTIDISCIPLINARY CONSULTATION TEAM ESTABLISHED
20 UNDER § 21-2A-04 OF THIS SUBTITLE ABOUT THE INTERPRETATION OF THE DATA;

21 (5) PROMOTE APPROPRIATE AND REAL-TIME, IF FEASIBLE, ACCESS TO
22 PRESCRIPTION MONITORING DATA BY DISPENSERS AND PRESCRIBERS TO HELP
23 PREVENT SUBSTANCE ABUSE AND PRESCRIPTION DRUG DIVERSION;

24 ~~(6) IDENTIFY THE MECHANISM BY WHICH A PRESCRIPTION DRUG IS~~
25 ~~IDENTIFIED AS A DRUG OF CONCERN;~~

26 (6) DETERMINE A PERIOD OF TIME AFTER WHICH THE INFORMATION
27 COLLECTED IN THE DATABASE WILL BE DESTROYED;

28 (7) REQUIRE THE BOARD TO APPLY FOR FEDERAL GRANT MONEY, AS
29 APPROPRIATE;

30 ~~(7)~~ (8) ENSURE THAT THE PROGRAM IS DESIGNED TO:

31 (I) MINIMIZE, TO THE FULLEST EXTENT POSSIBLE, THE BURDEN
32 ON DISPENSERS IN THEIR COMPLIANCE WITH THE REQUIREMENTS OF THIS
33 SUBTITLE; AND

34 (II) PROMOTE SUBMISSION OF PRESCRIPTION MONITORING DATA
35 IN A MANNER COMPATIBLE WITH EXISTING DATA SUBMISSION PRACTICES OF
36 DISPENSERS; AND

1 ~~(8)~~ (9) ENSURE, TO THE FULLEST EXTENT POSSIBLE, THAT PATIENT
2 CONFIDENTIALITY IS PROTECTED.

3 21-2A-03.

4 (A) THERE IS AN ADVISORY BOARD ON PRESCRIPTION DRUG MONITORING IN
5 THE DEPARTMENT.

6 (B) THE BOARD CONSISTS OF THE FOLLOWING ~~15~~ 20 MEMBERS:

7 (1) THE ATTORNEY GENERAL OR THE ATTORNEY GENERAL'S DESIGNEE;

8 (2) THE SECRETARY OR THE SECRETARY'S DESIGNEE;

9 (3) THE PRESIDENT OF THE MARYLAND BOARD OF PHARMACY OR THE
10 PRESIDENT'S DESIGNEE;

11 (4) THE CHAIRMAN OF THE MARYLAND BOARD OF PHYSICIANS OR THE
12 CHAIRMAN'S DESIGNEE;

13 (5) THE PRESIDENT OF THE MARYLAND BOARD OF NURSING, OR THE
14 PRESIDENT'S DESIGNEE;

15 ~~(5)~~ (6) THE CHAIRMAN OF THE MARYLAND HEALTH CARE
16 COMMISSION OR THE CHAIRMAN'S DESIGNEE;

17 ~~(6)~~ (7) ~~TWO FOUR PHYSICIANS AND ONE NURSE PRACTITIONER WITH~~
18 ~~EXPERTISE IN PHYSICAL MEDICINE AND REHABILITATION~~ AREAS OF PRACTICE THAT
19 INVOLVE PAIN MANAGEMENT AND SUBSTANCE ABUSE AND ADDICTION TREATMENT,
20 APPOINTED BY THE SECRETARY AFTER CONSULTATION WITH:

21 (I) THE MEDICAL AND CHIRURGICAL FACULTY OF MARYLAND,
22 THE MARYLAND STATE MEDICAL SOCIETY, THE MARYLAND PHYSICAL MEDICINE
23 AND REHABILITATION SOCIETY, AND THE MARYLAND SOCIETY OF
24 ANESTHESIOLOGISTS WITH RESPECT TO THE PHYSICIAN APPOINTMENTS; AND

25 (II) THE MARYLAND NURSES ASSOCIATION WITH RESPECT TO THE
26 NURSE PRACTITIONER APPOINTMENT;

27 ~~(7)~~ (8) ~~TWO THREE PHARMACISTS WHO REPRESENT THE~~
28 ~~PERSPECTIVE OF INDEPENDENT AND CHAIN PHARMACIES AND PHARMACISTS,~~
29 APPOINTED BY THE SECRETARY AFTER CONSULTATION WITH THE MARYLAND
30 PHARMACISTS ASSOCIATION, THE MARYLAND ASSOCIATION OF CHAIN DRUG STORES,
31 EPIC PHARMACIES, AND ANY OTHER APPROPRIATE ORGANIZATION;

32 (I) TWO OF WHOM REPRESENT THE PERSPECTIVE OF
33 INDEPENDENT AND CHAIN PHARMACIES AND PHARMACISTS; AND

34 (II) ONE OF WHOM REPRESENTS THE PERSPECTIVE OF HOSPITAL
35 OUTPATIENT PHARMACIES;

1 ~~(8)~~ (9) A FEDERAL LAW ENFORCEMENT OFFICIAL, APPOINTED BY THE
2 SECRETARY AFTER CONSULTATION WITH THE DRUG ENFORCEMENT
3 ADMINISTRATION OF THE UNITED STATES DEPARTMENT OF JUSTICE;

4 ~~(9)~~ (10) A STATE LAW ENFORCEMENT OFFICIAL, APPOINTED BY THE
5 SECRETARY AFTER CONSULTATION WITH THE MARYLAND STATE POLICE;

6 ~~(10)~~ (11) A LOCAL LAW ENFORCEMENT OFFICIAL, APPOINTED BY THE
7 SECRETARY AFTER CONSULTATION WITH THE MARYLAND CHIEFS OF POLICE
8 ASSOCIATION;

9 ~~(11)~~ (12) A PROSECUTOR, APPOINTED BY THE SECRETARY AFTER
10 CONSULTATION WITH THE MARYLAND STATE'S ATTORNEYS ASSOCIATION; AND

11 ~~(12)~~ (13) TWO MARYLAND CITIZENS WHO REPRESENT THE PERSPECTIVE
12 OF PAIN PATIENTS, APPOINTED BY THE SECRETARY FROM A LIST SUBMITTED BY THE
13 MARYLAND PAIN INITIATIVE.

14 (C) THE SECRETARY SHALL DESIGNATE THE CHAIR OF THE BOARD.

15 (D) (1) THE TERM OF A MEMBER APPOINTED BY THE SECRETARY IS 3 YEARS.

16 (2) IF A VACANCY OCCURS DURING THE TERM OF AN APPOINTED
17 MEMBER, THE SECRETARY SHALL APPOINT A SUCCESSOR WHO SHALL SERVE UNTIL
18 THE TERM EXPIRES.

19 (E) THE BOARD SHALL:

20 (1) MEET NOT FEWER THAN THREE TIMES ANNUALLY;

21 (2) MAKE RECOMMENDATIONS TO THE SECRETARY REGARDING THE
22 DESIGN AND IMPLEMENTATION OF A PRESCRIPTION MONITORING PROGRAM, IN
23 ACCORDANCE WITH THE PROVISIONS OF THIS SUBTITLE, INCLUDING
24 RECOMMENDATIONS ABOUT:

25 (I) REGULATIONS AND THE NEED FOR ANY FURTHER
26 LEGISLATION CONCERNING THE PROGRAM; AND

27 (II) SOURCES OF FUNDING, INCLUDING GRANT FUNDS UNDER THE
28 HAROLD ROGERS PRESCRIPTION DRUG MONITORING PROGRAM AND OTHER
29 FEDERAL OR STATE PROGRAMS, WITH THE OBJECTIVE OF AVOIDING ANY FEE OR
30 ASSESSMENT AGAINST DISPENSERS OR PRESCRIBERS;

31 (3) PROVIDE ANNUALLY TO THE GOVERNOR AND THE GENERAL
32 ASSEMBLY AN ANALYSIS OF THE IMPACT OF THE PROGRAM ON PATIENT ACCESS TO
33 PHARMACEUTICAL CARE AND ON CURBING PRESCRIPTION DRUG DIVERSION IN THE
34 STATE, INCLUDING ANY RECOMMENDATIONS RELATED TO MODIFICATION OR
35 CONTINUATION OF THE PROGRAM; AND

1 (4) PROVIDE ONGOING ADVICE AND CONSULTATION ON THE
2 IMPLEMENTATION AND OPERATION OF THE PROGRAM, INCLUDING
3 RECOMMENDATIONS REGARDING:

4 (I) CHANGES IN THE PROGRAM TO REFLECT ADVANCES IN
5 TECHNOLOGY AND BEST PRACTICES IN THE FIELD OF ELECTRONIC HEALTH
6 RECORDS AND ELECTRONIC PRESCRIPTION MONITORING; AND

7 ~~(H) EMERGING DRUGS OF CONCERN THAT SHOULD BE IDENTIFIED~~
8 ~~AS MONITORED PRESCRIPTION DRUGS; AND~~

9 ~~(HH)~~ (II) THE DESIGN AND IMPLEMENTATION OF AN ONGOING
10 EVALUATION COMPONENT OF THE PROGRAM.

11 21-2A-04.

12 (A) THE SECRETARY SHALL APPOINT A MULTIDISCIPLINARY CONSULTATION
13 TEAM ~~WITHIN THE PROGRAM.~~

14 (B) THE MULTIDISCIPLINARY CONSULTATION TEAM SHALL REFLECT THE
15 DIVERSITY AND BALANCE OF PERSPECTIVES REPRESENTED ON THE ADVISORY
16 BOARD.

17 ~~(B)~~ (C) THE MULTIDISCIPLINARY CONSULTATION TEAM SHALL CONSIST OF:

18 (1) PROGRAM STAFF;

19 (2) MEMBERS OF THE BOARD; AND

20 (3) ANY CONSULTANTS THAT THE SECRETARY DETERMINES WILL
21 ~~PROVIDE BROAD EXPERIENCE IN PAIN MANAGEMENT, SUBSTANCE ABUSE, AND~~
22 ~~PRESCRIPTION DRUG DIVERSION~~ HELP ACHIEVE THE DIVERSITY AND BALANCE OF
23 PERSPECTIVES REPRESENTED ON THE ADVISORY BOARD.

24 ~~(C)~~ (D) IN ACCORDANCE WITH REGULATION, THE MULTIDISCIPLINARY
25 CONSULTATION TEAM SHALL ASSIST A FEDERAL LAW ENFORCEMENT AGENCY, A
26 STATE OR LOCAL LAW ENFORCEMENT AGENCY, OR A LICENSING ENTITY THAT HAS
27 RECEIVED PRESCRIPTION MONITORING DATA FROM THE PROGRAM IN
28 INTERPRETING THE DATA AND CONSIDERING WHETHER THE DATA, IN THE CONTEXT
29 OF THE NATURE OF A PRESCRIBER'S OR A DISPENSER'S PRACTICE, A PATIENT'S
30 MEDICAL CONDITION, OR ANY OTHER RELEVANT FACTS, SUGGEST THE NEED FOR
31 FURTHER INVESTIGATION.

32 21-2A-05.

33 (A) FOR EACH MONITORED PRESCRIPTION DRUG THAT IS DISPENSED, A
34 DISPENSER SHALL SUBMIT TO THE PROGRAM INFORMATION SPECIFIED BY THE
35 SECRETARY, INCLUDING:

36 (1) A PATIENT IDENTIFIER;

- 1 (2) THE PRESCRIPTION DRUG DISPENSED;
- 2 (3) THE DATE OF DISPENSING;
- 3 (4) THE QUANTITY DISPENSED;
- 4 (5) THE PRESCRIBER; AND
- 5 (6) THE PHARMACY FROM WHICH THE DRUG IS DISPENSED; ~~AND~~
- 6 ~~(7) THE PRESCRIBER'S DIAGNOSIS CODE, IF SUCH CODE IS PART OF THE~~
- 7 ~~ELECTRONIC RECORD CREATED BY THE DISPENSER.~~

8 (B) EXCEPT AS PROVIDED IN SUBSECTION (C) OF THIS SECTION, A DISPENSER
9 SHALL SUBMIT PRESCRIPTION MONITORING DATA TO THE PROGRAM BY
10 ELECTRONIC SUBMISSION.

11 (C) THE PROGRAM, FOR GOOD CAUSE SHOWN, MAY AUTHORIZE A DISPENSER
12 TO:

- 13 (1) SUBMIT PRESCRIPTION MONITORING DATA BY AN ALTERNATIVE
- 14 FORM OF SUBMISSION; OR
- 15 (2) OMIT ONE OR MORE ELEMENTS OF PRESCRIPTION MONITORING
- 16 DATA.

17 21-2A-06.

18 (A) PRESCRIPTION MONITORING DATA:

19 (1) ARE CONFIDENTIAL AND PRIVILEGED, AND NOT SUBJECT TO
20 DISCOVERY, SUBPOENA, OR OTHER MEANS OF LEGAL COMPULSION IN CIVIL
21 LITIGATION;

22 (2) ARE NOT PUBLIC RECORD; AND

23 (3) EXCEPT AS PROVIDED IN SUBSECTIONS (B) AND (D) OF THIS SECTION
24 OR AS OTHERWISE PROVIDED BY LAW, MAY NOT BE DISCLOSED TO ANY PERSON.

25 (B) THE PROGRAM MAY, IN ACCORDANCE WITH REGULATION, DISCLOSE
26 PRESCRIPTION MONITORING DATA TO AN AUTHORIZED RECIPIENT:

27 (1) IN CONNECTION WITH THE MEDICAL CARE OF A PATIENT;

28 (2) IN CONNECTION WITH THE DISPENSING OF A MONITORED
29 PRESCRIPTION DRUG; OR

30 (3) FOR THE PURPOSE OF FURTHERING AN INDIVIDUAL
31 INVESTIGATION.

1 (C) EXCEPT AS PROVIDED BY REGULATION, AN AUTHORIZED RECIPIENT WHO
2 RECEIVES PRESCRIPTION MONITORING DATA FROM THE PROGRAM MAY NOT
3 DISCLOSE THE DATA.

4 (D) THE PROGRAM MAY DISCLOSE PRESCRIPTION MONITORING DATA AFTER
5 REDACTION OF ALL INFORMATION THAT COULD IDENTIFY A PATIENT, PRESCRIBER,
6 DISPENSER, OR OTHER INDIVIDUAL.

7 21-2A-07.

8 (A) THE DEPARTMENT AND ITS AGENTS AND EMPLOYEES ARE NOT SUBJECT
9 TO LIABILITY ARISING FROM:

10 (1) THE INACCURACY OF ANY INFORMATION SUBMITTED TO THE
11 PROGRAM IN ACCORDANCE WITH THIS SUBTITLE; AND

12 (2) THE UNAUTHORIZED USE OR DISCLOSURE OF PRESCRIPTION
13 MONITORING DATA PROVIDED TO AN AUTHORIZED RECIPIENT.

14 (B) AN AUTHORIZED RECIPIENT, ACTING IN GOOD FAITH, IS NOT SUBJECT TO
15 LIABILITY ARISING SOLELY FROM:

16 (1) REQUESTING OR RECEIVING, OR FAILING TO REQUEST OR RECEIVE,
17 PRESCRIPTION MONITORING DATA FROM THE PROGRAM; OR

18 (2) ACTING, OR FAILING TO ACT, ON THE BASIS OF PRESCRIPTION
19 MONITORING DATA PROVIDED BY THE PROGRAM FAILURE TO TAKE ACTION ON THE
20 BASIS OF PRESCRIPTION MONITORING DATA PROVIDED BY THE PROGRAM.

21 21-2A-08.

22 (A) THE PROGRAM, IN CONSULTATION WITH THE BOARD, SHALL DEVELOP
23 AND IMPLEMENT, OR CONTRACT WITH A VENDOR TO DEVELOP AND IMPLEMENT,
24 EDUCATION AND TRAINING COURSES RELATING TO THE PROGRAM.

25 (B) THE COURSES REQUIRED UNDER SUBSECTION (A) OF THIS SECTION MAY
26 RELATE TO:

27 (1) THE TRANSMISSION, ACCESS, AND USE OF PRESCRIPTION
28 MONITORING DATA;

29 (2) ISSUES ARISING IN PRESCRIBING AND DISPENSING MONITORED
30 PRESCRIPTION DRUGS; ~~AND~~

31 (3) ISSUES CONCERNING IDENTIFYING AND TREATING SUBSTANCE
32 ABUSE AND ADDICTION; AND

33 (4) THE ROLE OF MONITORED PRESCRIPTION DRUGS IN THE
34 MANAGEMENT OF PAIN, INCLUDING THE DISTINCTION BETWEEN ADDICTION AND
35 PHYSICAL DEPENDENCE.

1 21-2A-09.

2 (A) A DISPENSER WHO KNOWINGLY FAILS TO SUBMIT PRESCRIPTION
3 MONITORING DATA TO THE PROGRAM AS REQUIRED UNDER THIS SUBTITLE SHALL
4 BE SUBJECT TO A CIVIL PENALTY NOT EXCEEDING \$500 FOR EACH FAILURE TO
5 SUBMIT REQUIRED INFORMATION.

6 (B) AN AUTHORIZED RECIPIENT WHO KNOWINGLY DISCLOSES OR USES
7 PRESCRIPTION MONITORING DATA IN VIOLATION OF THIS SUBTITLE SHALL BE
8 GUILTY OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO IMPRISONMENT
9 NOT EXCEEDING 1 YEAR OR A FINE NOT EXCEEDING \$10,000 OR BOTH.

10 SECTION 2. AND BE IT FURTHER ENACTED, That implementation of the
11 Prescription Drug Monitoring Program to be established under § 21-2A-02 of the
12 Health - General Article, as enacted by Section 1 of this Act, is contingent on the
13 Advisory Board on Prescription Drug Monitoring established under § 21-2A-03 of the
14 Health - General Article, as enacted by Section 1 of this Act, obtaining some federal
15 grant money in accordance with regulations adopted under § 21-2A-02(d) of the
16 Health - General Article.

17 SECTION ~~2-3~~. AND BE IT FURTHER ENACTED, That this Act shall take
18 effect October 1, 2006.