

HOUSE BILL 525

J3
HB 1287/06 – HGO

8lr1860

By: **Delegates Kullen, Beitzel, Donoghue, Gilchrist, Kaiser, Mizeur, Pena-Melnyk, Pendergrass, Reznik, Stull, V. Turner, and Weldon**
Introduced and read first time: January 30, 2008
Assigned to: Health and Government Operations

A BILL ENTITLED

1 AN ACT concerning

2 **Prescription Drug Monitoring Program**

3 FOR the purpose of requiring the Department of Health and Mental Hygiene to
4 establish and maintain a certain Prescription Drug Monitoring Program within
5 the Department; establishing the powers and duties of the Secretary of Health
6 and Mental Hygiene under the Program; requiring prescription monitoring data
7 to be destroyed after a certain time period unless a certain request for retention
8 of certain information is submitted to the Department; creating a certain
9 Advisory Board on Prescription Drug Monitoring to assist in the design,
10 implementation, and evaluation of the Program; establishing the chair, the
11 terms of the members, and the responsibilities of the Board; requiring the
12 Secretary to appoint a multidisciplinary consultation team to assist in the
13 interpretation of prescription monitoring data; requiring dispensers to submit
14 electronically certain information to the Program except in certain
15 circumstances; prohibiting the Board and the Secretary from charging a fee or
16 imposing an assessment on certain persons for certain purposes; making
17 prescription monitoring data confidential and privileged and not subject to
18 certain means of legal compulsion except under certain circumstances;
19 authorizing certain agencies and persons to obtain access to prescription
20 monitoring data under certain circumstances; establishing immunity from
21 liability for certain agencies and persons relating to the operation and use of the
22 Program; providing for education and training relating to the Program;
23 establishing penalties for violations of the requirements of the Program;
24 defining certain terms; providing that implementation of the Program is
25 contingent on the Board obtaining certain federal, State, or private funds;
26 prohibiting the Program from collecting prescription monitoring data before a
27 certain date; and generally relating to the creation and operation of the
28 Prescription Drug Monitoring Program.

29 BY adding to

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 Article – Health – General
2 Section 21–2A–01 through 21–2A–09 to be under the new subtitle “Subtitle 2A.
3 Prescription Drug Monitoring Program”
4 Annotated Code of Maryland
5 (2005 Replacement Volume and 2007 Supplement)

6 Preamble

7 WHEREAS, Thousands of Marylanders suffer from chronic pain and other
8 conditions that make access to pain medications and other pharmaceutical therapies
9 necessary and beneficial; and

10 WHEREAS, Increasing numbers of Maryland adults and adolescents are
11 engaging in prescription drug abuse and diversion to the detriment of their health and
12 welfare; and

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

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

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

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

26 **Article – Health – General**

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

28 **21–2A–01.**

29 (A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS
30 INDICATED.

31 (B) “AUTHORIZED RECIPIENT” MEANS:

32 (1) A DISPENSER;

33 (2) A PRESCRIBER;

- 1 **(3) A FEDERAL LAW ENFORCEMENT AGENCY;**
- 2 **(4) A STATE OR LOCAL LAW ENFORCEMENT AGENCY;**
- 3 **(5) A LICENSING ENTITY;**
- 4 **(6) THE MARYLAND MEDICAL ASSISTANCE PROGRAM;**
- 5 **(7) A PATIENT WITH RESPECT TO INFORMATION ABOUT THE**
6 **PATIENT; OR**
- 7 **(8) ANY PERSON UNDER CONTRACT WITH THE DEPARTMENT**
8 **CONCERNING THE OPERATION OF THE PROGRAM.**

9 **(C) “BOARD” MEANS THE ADVISORY BOARD ON PRESCRIPTION DRUG**
10 **MONITORING.**

11 **(D) (1) “DISPENSER” MEANS A PERSON WHO DISPENSES A**
12 **MONITORED PRESCRIPTION DRUG TO A PATIENT OR THE PATIENT’S AGENT IN**
13 **THE STATE.**

14 **(2) “DISPENSER” INCLUDES A PERSON OPERATING BY MAIL OR**
15 **OTHER MEANS FROM A PLACE OF BUSINESS OUTSIDE THE STATE.**

16 **(3) “DISPENSER” DOES NOT INCLUDE A LICENSED HOSPITAL**
17 **PHARMACY THAT DISPENSES A MONITORED PRESCRIPTION DRUG FOR**
18 **INPATIENT HOSPITAL CARE.**

19 **(E) “DISPENSES” HAS THE MEANING STATED IN § 12-101 OF THE**
20 **HEALTH OCCUPATIONS ARTICLE.**

21 **(F) “FEDERAL LAW ENFORCEMENT AGENCY” MEANS:**

22 **(1) ANY ENTITY WITHIN THE UNITED STATES DEPARTMENT OF**
23 **JUSTICE, INCLUDING:**

24 **(I) THE DRUG ENFORCEMENT ADMINISTRATION;**

25 **(II) THE FEDERAL BUREAU OF INVESTIGATION; AND**

26 **(III) A UNITED STATES ATTORNEY’S OFFICE; OR**

1 **(2) THE OFFICE OF THE INSPECTOR GENERAL OF THE**
2 **DEPARTMENT OF HEALTH AND HUMAN SERVICES.**

3 **(G) “LICENSING ENTITY” MEANS AN ENTITY AUTHORIZED UNDER THE**
4 **HEALTH OCCUPATIONS ARTICLE TO LICENSE, REGULATE, OR DISCIPLINE A**
5 **PRESCRIBER OR DISPENSER.**

6 **(H) “MONITORED PRESCRIPTION DRUG” MEANS A PRESCRIPTION DRUG**
7 **THAT CONTAINS A SUBSTANCE LISTED IN SCHEDULE II THROUGH SCHEDULE**
8 **IV.**

9 **(I) “PRESCRIBER” MEANS A LICENSED HEALTH CARE PROFESSIONAL**
10 **WHO IS AUTHORIZED BY LAW TO PRESCRIBE A MONITORED PRESCRIPTION**
11 **DRUG.**

12 **(J) “PRESCRIPTION DRUG” HAS THE MEANING STATED IN § 21–201 OF**
13 **THIS TITLE.**

14 **(K) “PRESCRIPTION MONITORING DATA” MEANS THE INFORMATION**
15 **SUBMITTED TO THE PROGRAM.**

16 **(L) “PROGRAM” MEANS THE PRESCRIPTION DRUG MONITORING**
17 **PROGRAM ESTABLISHED UNDER THIS SUBTITLE.**

18 **(M) “SCHEDULE II” MEANS THE LIST OF CONTROLLED DANGEROUS**
19 **SUBSTANCES SET FORTH IN § 5–403 OF THE CRIMINAL LAW ARTICLE.**

20 **(N) “SCHEDULE III” MEANS THE LIST OF CONTROLLED DANGEROUS**
21 **SUBSTANCES SET FORTH IN § 5–404 OF THE CRIMINAL LAW ARTICLE.**

22 **(O) “SCHEDULE IV” MEANS THE LIST OF CONTROLLED DANGEROUS**
23 **SUBSTANCES SET FORTH IN § 5–405 OF THE CRIMINAL LAW ARTICLE.**

24 **(P) “STATE OR LOCAL LAW ENFORCEMENT AGENCY” MEANS:**

25 **(1) A STATE, COUNTY, OR MUNICIPAL POLICE DEPARTMENT OR**
26 **AGENCY;**

27 **(2) A SHERIFF’S OFFICE;**

28 **(3) A STATE’S ATTORNEY’S OFFICE; OR**

29 **(4) THE OFFICE OF THE ATTORNEY GENERAL.**

1 **21-2A-02.**

2 (A) THE DEPARTMENT SHALL ESTABLISH AND MAINTAIN, IN
3 CONSULTATION WITH THE BOARD, A PRESCRIPTION DRUG MONITORING
4 PROGRAM THAT ELECTRONICALLY COLLECTS AND STORES DATA CONCERNING
5 MONITORED PRESCRIPTION DRUGS.

6 (B) THE SECRETARY MAY:

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

9 (2) CONTRACT WITH ANY QUALIFIED PERSON AS THE SECRETARY
10 DEEMS NECESSARY FOR THE EFFICIENT AND ECONOMICAL OPERATION OF THE
11 PROGRAM.

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

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

15 (1) ASSIST HEALTH CARE PROVIDERS AND LAW ENFORCEMENT
16 PROFESSIONALS IN:

17 (I) THE IDENTIFICATION, TREATMENT, AND PREVENTION
18 OF PRESCRIPTION DRUG ABUSE; AND

19 (II) THE IDENTIFICATION AND INVESTIGATION OF
20 UNLAWFUL PRESCRIPTION DRUG DIVERSION;

21 (2) PROMOTE A BALANCED USE OF PRESCRIPTION MONITORING
22 DATA TO ASSIST APPROPRIATE LAW ENFORCEMENT ACTIVITIES WHILE
23 PRESERVING THE PROFESSIONAL PRACTICE OF HEALTH CARE PROVIDERS AND
24 THE ACCESS OF PATIENTS TO OPTIMAL PHARMACEUTICAL CARE;

25 (3) IDENTIFY THE CIRCUMSTANCES UNDER WHICH
26 PRESCRIPTION MONITORING DATA ARE PROVIDED TO AN AUTHORIZED
27 RECIPIENT, WITH SUCH CIRCUMSTANCES TO PARALLEL AS CLOSELY AS IS
28 APPROPRIATE AN AUTHORIZED RECIPIENT'S AUTHORITY TO ACCESS SIMILAR
29 CONFIDENTIAL INFORMATION UNDER FEDERAL AND STATE LAWS AND
30 REGULATIONS IN EFFECT AT THE TIME THE PROGRAM WAS ESTABLISHED;

1 (4) IDENTIFY THE CIRCUMSTANCES UNDER WHICH AN
2 AUTHORIZED RECIPIENT MAY DISCLOSE PRESCRIPTION MONITORING DATA
3 PROVIDED BY THE PROGRAM;

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

10 (6) PROMOTE APPROPRIATE AND REAL-TIME, IF FEASIBLE,
11 ACCESS TO PRESCRIPTION MONITORING DATA BY DISPENSERS AND
12 PRESCRIBERS TO HELP PREVENT SUBSTANCE ABUSE AND PRESCRIPTION DRUG
13 DIVERSION;

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

16 (8) ENSURE THAT THE PROGRAM IS DESIGNED TO:

17 (I) PREVENT, TO THE FULLEST EXTENT POSSIBLE, THE
18 BURDEN ON DISPENSERS IN THEIR COMPLIANCE WITH THE REQUIREMENTS OF
19 THIS SUBTITLE; AND

20 (II) RECEIVE PRESCRIPTION MONITORING DATA IN A
21 MANNER COMPATIBLE WITH EXISTING DATA SUBMISSION PRACTICES OF
22 DISPENSERS; AND

23 (9) ENSURE THAT:

24 (I) CONFIDENTIAL OR PRIVILEGED PATIENT INFORMATION
25 IS KEPT CONFIDENTIAL; AND

26 (II) RECORDS OR INFORMATION PROTECTED BY THE
27 PRIVILEGE BETWEEN A HEALTH CARE PROVIDER AND A PATIENT, OR
28 OTHERWISE REQUIRED BY LAW TO BE HELD CONFIDENTIAL, IS FILED IN A
29 MANNER THAT, EXCEPT AS OTHERWISE PROVIDED IN § 21-2A-06 OF THIS
30 SUBTITLE, DOES NOT DISCLOSE THE IDENTITY OF THE PERSON PROTECTED.

31 (E) PRESCRIPTION MONITORING DATA SHALL BE DESTROYED AFTER 2
32 YEARS, UNLESS A LAW ENFORCEMENT AGENCY OR A HEALTH OCCUPATIONS
33 BOARD HAS SUBMITTED A WRITTEN REQUEST TO THE DEPARTMENT FOR
34 RETENTION OF SPECIFIC INFORMATION.

1 **21-2A-03.**

2 (A) **THERE IS AN ADVISORY BOARD ON PRESCRIPTION DRUG**
3 **MONITORING IN THE DEPARTMENT.**

4 (B) **THE BOARD CONSISTS OF THE FOLLOWING 21 MEMBERS:**

5 (1) **THE ATTORNEY GENERAL, OR THE ATTORNEY GENERAL'S**
6 **DESIGNEE;**

7 (2) **THE SECRETARY, OR THE SECRETARY'S DESIGNEE;**

8 (3) **THE PRESIDENT OF THE MARYLAND BOARD OF PHARMACY,**
9 **OR THE PRESIDENT'S DESIGNEE;**

10 (4) **THE CHAIR OF THE MARYLAND BOARD OF PHYSICIANS, OR**
11 **THE CHAIR'S DESIGNEE;**

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

14 (6) **THE CHAIR OF THE MARYLAND HEALTH CARE COMMISSION,**
15 **OR THE CHAIR'S DESIGNEE;**

16 (7) **FOUR PHYSICIANS AND ONE NURSE PRACTITIONER WITH**
17 **EXPERTISE IN AREAS OF PRACTICE THAT INVOLVE PAIN MANAGEMENT AND**
18 **SUBSTANCE ABUSE AND ADDICTION TREATMENT, APPOINTED BY THE**
19 **SECRETARY AFTER CONSULTATION WITH:**

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

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

27 (8) **FOUR PHARMACISTS, APPOINTED BY THE SECRETARY AFTER**
28 **CONSULTATION WITH THE MARYLAND PHARMACISTS ASSOCIATION, THE**
29 **MARYLAND ASSOCIATION OF CHAIN DRUG STORES, EPIC PHARMACIES, AND**
30 **ANY OTHER APPROPRIATE ORGANIZATION:**

1 (I) **THREE OF WHOM REPRESENT THE PERSPECTIVE OF**
2 **INDEPENDENT AND CHAIN PHARMACIES AND PHARMACISTS; AND**

3 (II) **ONE OF WHOM REPRESENTS THE PERSPECTIVE OF**
4 **HOSPITAL OUTPATIENT PHARMACIES;**

5 (9) **A FEDERAL LAW ENFORCEMENT OFFICIAL, APPOINTED BY**
6 **THE SECRETARY AFTER CONSULTATION WITH THE DRUG ENFORCEMENT**
7 **ADMINISTRATION OF THE UNITED STATES DEPARTMENT OF JUSTICE;**

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

10 (11) **A LOCAL LAW ENFORCEMENT OFFICIAL, APPOINTED BY THE**
11 **SECRETARY AFTER CONSULTATION WITH THE MARYLAND CHIEFS OF POLICE**
12 **ASSOCIATION;**

13 (12) **A PROSECUTOR, APPOINTED BY THE SECRETARY AFTER**
14 **CONSULTATION WITH THE MARYLAND STATE'S ATTORNEYS ASSOCIATION; AND**

15 (13) **TWO MARYLAND CITIZENS WHO REPRESENT THE**
16 **PERSPECTIVE OF PAIN PATIENTS, APPOINTED BY THE SECRETARY FROM A LIST**
17 **SUBMITTED BY THE MARYLAND PAIN INITIATIVE.**

18 (C) **THE SECRETARY SHALL DESIGNATE THE CHAIR OF THE BOARD.**

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

21 (2) **IF A VACANCY OCCURS DURING THE TERM OF AN APPOINTED**
22 **MEMBER, THE SECRETARY SHALL APPOINT A SUCCESSOR WHO SHALL SERVE**
23 **UNTIL THE TERM EXPIRES.**

24 (E) **THE BOARD SHALL:**

25 (1) **MEET NOT FEWER THAN THREE TIMES ANNUALLY;**

26 (2) **MAKE RECOMMENDATIONS TO THE SECRETARY REGARDING**
27 **THE DESIGN AND IMPLEMENTATION OF THE PROGRAM, IN ACCORDANCE WITH**
28 **THE PROVISIONS OF THIS SUBTITLE, INCLUDING RECOMMENDATIONS ABOUT:**

29 (I) **REGULATIONS AND THE NEED FOR ANY FURTHER**
30 **LEGISLATION CONCERNING THE PROGRAM; AND**

1 **(II) SOURCES OF FUNDING, INCLUDING GRANT FUNDS**
2 **UNDER THE HAROLD ROGERS PRESCRIPTION DRUG MONITORING PROGRAM**
3 **AND OTHER SOURCES OF FEDERAL, PRIVATE, OR STATE FUNDS;**

4 **(3) (I) PROVIDE WITHIN 180 DAYS AFTER ITS FIRST MEETING,**
5 **IN ACCORDANCE WITH § 2-1246 OF THE STATE GOVERNMENT ARTICLE, AN**
6 **INTERIM REPORT TO THE GENERAL ASSEMBLY SETTING FORTH THE BOARD'S**
7 **ANALYSIS AND RECOMMENDATIONS UNDER ITEM (2) OF THIS SUBSECTION**
8 **REGARDING THE DESIGN, IMPLEMENTATION, AND FUNDING OF THE PROGRAM;**
9 **AND**

10 **(II) PROVIDE ANNUALLY TO THE GOVERNOR AND, IN**
11 **ACCORDANCE WITH § 2-1246 OF THE STATE GOVERNMENT ARTICLE, THE**
12 **GENERAL ASSEMBLY AN ANALYSIS OF THE IMPACT OF THE PROGRAM ON**
13 **PATIENT ACCESS TO PHARMACEUTICAL CARE AND ON CURBING PRESCRIPTION**
14 **DRUG DIVERSION IN THE STATE, INCLUDING ANY RECOMMENDATIONS RELATED**
15 **TO MODIFICATION OR CONTINUATION OF THE PROGRAM; AND**

16 **(4) PROVIDE ONGOING ADVICE AND CONSULTATION ON THE**
17 **IMPLEMENTATION AND OPERATION OF THE PROGRAM, INCLUDING**
18 **RECOMMENDATIONS REGARDING:**

19 **(I) CHANGES IN THE PROGRAM TO REFLECT ADVANCES IN**
20 **TECHNOLOGY AND BEST PRACTICES IN THE FIELD OF ELECTRONIC HEALTH**
21 **RECORDS AND ELECTRONIC PRESCRIPTION MONITORING; AND**

22 **(II) THE DESIGN AND IMPLEMENTATION OF AN ONGOING**
23 **EVALUATION COMPONENT OF THE PROGRAM.**

24 **21-2A-04.**

25 **(A) THE SECRETARY SHALL APPOINT A MULTIDISCIPLINARY**
26 **CONSULTATION TEAM.**

27 **(B) THE MULTIDISCIPLINARY CONSULTATION TEAM SHALL REFLECT**
28 **THE DIVERSITY AND BALANCE OF PERSPECTIVES REPRESENTED ON THE**
29 **BOARD.**

30 **(C) THE MULTIDISCIPLINARY CONSULTATION TEAM SHALL CONSIST OF:**

31 **(1) PROGRAM STAFF;**

32 **(2) MEMBERS OF THE BOARD; AND**

1 **(3) ANY CONSULTANTS THAT THE SECRETARY DETERMINES WILL**
2 **HELP ACHIEVE THE DIVERSITY AND BALANCE OF PERSPECTIVES REPRESENTED**
3 **ON THE BOARD.**

4 **(D) IN ACCORDANCE WITH REGULATION, THE MULTIDISCIPLINARY**
5 **CONSULTATION TEAM SHALL ASSIST A FEDERAL LAW ENFORCEMENT AGENCY, A**
6 **STATE OR LOCAL LAW ENFORCEMENT AGENCY, OR A LICENSING ENTITY THAT**
7 **HAS RECEIVED PRESCRIPTION MONITORING DATA FROM THE PROGRAM IN**
8 **INTERPRETING THE DATA AND CONSIDERING WHETHER THE DATA, IN THE**
9 **CONTEXT OF THE NATURE OF A PRESCRIBER'S OR A DISPENSER'S PRACTICE, A**
10 **PATIENT'S MEDICAL CONDITION, OR ANY OTHER RELEVANT FACTS, SUGGEST**
11 **THE NEED FOR FURTHER INVESTIGATION.**

12 **21-2A-05.**

13 **(A) FOR EACH MONITORED PRESCRIPTION DRUG THAT IS DISPENSED, A**
14 **DISPENSER SHALL SUBMIT TO THE PROGRAM INFORMATION SPECIFIED BY THE**
15 **SECRETARY, INCLUDING:**

16 **(1) A PATIENT IDENTIFIER;**

17 **(2) THE PRESCRIPTION DRUG DISPENSED;**

18 **(3) THE DATE OF DISPENSING;**

19 **(4) THE QUANTITY DISPENSED;**

20 **(5) THE PRESCRIBER; AND**

21 **(6) THE PHARMACY FROM WHICH THE DRUG IS DISPENSED.**

22 **(B) EXCEPT AS PROVIDED IN SUBSECTION (C) OF THIS SECTION, A**
23 **DISPENSER SHALL SUBMIT PRESCRIPTION MONITORING DATA TO THE**
24 **PROGRAM BY ELECTRONIC SUBMISSION.**

25 **(C) THE PROGRAM, FOR GOOD CAUSE SHOWN, MAY AUTHORIZE A**
26 **DISPENSER TO:**

27 **(1) SUBMIT PRESCRIPTION MONITORING DATA BY AN**
28 **ALTERNATIVE FORM OF SUBMISSION; OR**

29 **(2) OMIT ONE OR MORE ELEMENTS OF PRESCRIPTION**
30 **MONITORING DATA.**

1 (D) THE BOARD AND THE SECRETARY MAY NOT CHARGE A FEE OR
2 IMPOSE AN ASSESSMENT ON A HOSPITAL, DISPENSER, OR PRESCRIBER FOR:

3 (1) THE ESTABLISHMENT, MAINTENANCE, OR ADMINISTRATION
4 OF THE PROGRAM; OR

5 (2) THE TRANSMISSION OF INFORMATION TO OR FROM THE
6 PROGRAM.

7 **21-2A-06.**

8 (A) PRESCRIPTION MONITORING DATA:

9 (1) ARE CONFIDENTIAL AND PRIVILEGED, AND NOT SUBJECT TO
10 DISCOVERY, SUBPOENA, OR OTHER MEANS OF LEGAL COMPULSION IN CIVIL
11 LITIGATION;

12 (2) ARE NOT PUBLIC RECORDS; AND

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

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

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

19 (2) IN CONNECTION WITH THE DISPENSING OF A MONITORED
20 PRESCRIPTION DRUG; OR

21 (3) FOR THE PURPOSE OF FURTHERING AN EXISTING BONA FIDE
22 INDIVIDUAL INVESTIGATION.

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

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

29 **21-2A-07.**

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

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

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

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

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

11 (2) ACTING, OR FAILING TO ACT, ON THE BASIS OF PRESCRIPTION
12 MONITORING DATA PROVIDED BY THE PROGRAM.

13 **21-2A-08.**

14 (A) THE PROGRAM, IN CONSULTATION WITH THE BOARD, SHALL
15 DEVELOP AND IMPLEMENT, OR CONTRACT WITH A VENDOR TO DEVELOP AND
16 IMPLEMENT, EDUCATION AND TRAINING COURSES RELATING TO THE
17 PROGRAM.

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

20 (1) THE TRANSMISSION, ACCESS, AND USE OF PRESCRIPTION
21 MONITORING DATA;

22 (2) ISSUES ARISING IN PRESCRIBING AND DISPENSING
23 MONITORED PRESCRIPTION DRUGS;

24 (3) ISSUES CONCERNING IDENTIFYING AND TREATING
25 SUBSTANCE ABUSE AND ADDICTION; AND

26 (4) THE ROLE OF MONITORED PRESCRIPTION DRUGS IN THE
27 MANAGEMENT OF PAIN, INCLUDING THE DISTINCTION BETWEEN ADDICTION
28 AND PHYSICAL DEPENDENCE.

29 **21-2A-09.**

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

5 (B) AN AUTHORIZED RECIPIENT WHO KNOWINGLY DISCLOSES OR USES
6 PRESCRIPTION MONITORING DATA IN VIOLATION OF THIS SUBTITLE SHALL BE
7 GUILTY OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO
8 IMPRISONMENT NOT EXCEEDING 1 YEAR OR A FINE NOT EXCEEDING \$10,000 OR
9 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 Department of Health and Mental Hygiene obtaining federal, private, or State funds
14 to carry out the purposes of this Act.

15 SECTION 3. AND BE IT FURTHER ENACTED, That the Prescription Drug
16 Monitoring Program to be established under § 21-2A-02 of the Health – General
17 Article, as enacted by Section 1 of this Act, may not collect prescription monitoring
18 data before June 1, 2009.

19 SECTION 4. AND BE IT FURTHER ENACTED, That, subject to Section 2 of
20 this Act, this Act shall take effect October 1, 2008.