J3 HB 1287/06 – HGO

By: Delegates Kullen, Beitzel, Donoghue, Gilchrist, Kaiser, Mizeur, Pena-Melnyk, Pendergrass, Reznik, Stull, V. Turner, <del>and Weldon</del> <u>Weldon, Benson, Elliott, Hammen, Kach, Kipke, McDonough,</u> <u>Montgomery, Oaks, and Riley</u>

Introduced and read first time: January 30, 2008 Assigned to: Health and Government Operations

Committee Report: Favorable with amendments House action: Adopted Read second time: March 16, 2008

CHAPTER \_\_\_\_\_

1 AN ACT concerning

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Prescription Drug Monitoring Program Advisory Council on Prescription Drug Monitoring – Study

4 FOR the purpose of requiring the Department of Health and Mental Hygiene to establish and maintain a certain Prescription Drug Monitoring Program within 5 6 the Department; establishing the powers and duties of the Secretary of Health 7 and Mental Hygiene under the Program; requiring prescription monitoring data 8 to be destroyed after a certain time period unless a certain request for retention 9 of certain information is submitted to the Department; creating a certain Advisory Board on Prescription Drug Monitoring to assist in the design, 10 implementation, and evaluation of the Program; establishing the chair, the 11 12 terms of the members, and the responsibilities of the Board; requiring the 13 Secretary to appoint a multidisciplinary consultation team to assist in the interpretation of prescription monitoring data; requiring dispensers to submit 14 electronically certain information to the Program except in certain 15circumstances; prohibiting the Board and the Secretary from charging a fee or 16 17imposing an assessment on certain persons for certain purposes; making prescription monitoring data confidential and privileged and not subject to 18 19 certain means of legal compulsion except under certain circumstances; 20authorizing certain agencies and persons to obtain access to prescription monitoring data under certain circumstances; establishing immunity from 21 liability for certain agencies and persons relating to the operation and use of the 2223Program: providing for education and training relating to the Program;

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.



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1	establishing penalties for violations of the requirements of the Program;
2	<del>defining certain terms; providing that implementation of the Program is</del>
3	<del>contingent on the Board obtaining certain federal, State, or private funds;</del>
4	prohibiting the Program from collecting prescription monitoring data before a
5	certain date; and generally relating to the creation and operation of the
6	Prescription Drug Monitoring Program. FOR the purpose of establishing an
7	Advisory Council on Prescription Drug Monitoring in the Department of Health
8	and Mental Hygiene; establishing the membership and chair of the Council;
9 10	<u>requiring the Council to study the establishment of a certain prescription drug</u> <u>monitoring program; requiring the study to make recommendations to the</u>
10	Secretary of Health and Mental Hygiene for establishing a prescription drug
11	monitoring program for certain purposes; requiring the Council to include
12	certain items in its study and recommendations; requiring the Council to
14	submit a certain interim report and a certain final report on or before certain
15	dates; defining a certain term; providing for the termination of this Act; and
16	generally relating to an Advisory Council on Prescription Drug Monitoring and
17	a study of a prescription drug monitoring program.
18	BY adding to
19	Article – Health – General
20	Section 21–2A–01 <del>through 21–2A–09 to be under the new subtitle "Subtitle 2A.</del>
$\begin{array}{c} 21 \\ 22 \end{array}$	Prescription Drug Monitoring Program to be under the new subtitle
	<u>"Subtitle 2A. Advisory Council on Prescription Drug Monitoring"</u>
92	Annotated ( 'odo at Maryland
$\frac{23}{24}$	Annotated Code of Maryland (2005 Replacement Volume and 2007 Supplement)
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$rac{1}{2}$	research about the effects of the Prescription Drug Monitoring Program itself; now, therefore,
$\frac{3}{4}$	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:
5	Article – Health – General
6	SUBTITLE 2A. <del>Prescription Drug Monitoring Program</del> Advisory
0 7	SUBTILE 2A. FRESCRIPTION DRUG MONITORING PROGRAM ADVISORY COUNCIL ON PRESCRIPTION DRUG MONITORING.
8	21–2A–01.
9 10	(A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.
11	(B) "AUTHORIZED RECIPIENT" MEANS:
12	(1) A DISPENSER;
13	(2) A PRESCRIBER;
14	(3) A FEDERAL LAW ENFORCEMENT AGENCY;
15	(4) A STATE OR LOCAL LAW ENFORCEMENT AGENCY;
16	(5) A LICENSING ENTITY;
17	(6) THE MARYLAND MEDICAL ASSISTANCE PROGRAM;
18	(7) A patient with respect to information about the
19	PATIENT; OR
20	(8) ANY PERSON UNDER CONTRACT WITH THE DEPARTMENT
21	CONCERNING THE OPERATION OF THE PROGRAM.
22	(C) "BOARD" MEANS THE ADVISORY BOARD ON PRESCRIPTION DRUG
23	Monitoring.
24	<del>(d)</del> ( <del>1)</del> "Dispenser" means a person who dispenses a
25	MONITORED PRESCRIPTION DRUG TO A PATIENT OR THE PATIENT'S AGENT IN
26	THE STATE.
27	(2) "DISPENSER" INCLUDES A PERSON OPERATING BY MAIL OR
28	OTHER MEANS FROM A PLACE OF BUSINESS OUTSIDE THE STATE.

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$\begin{array}{c}1\\2\\3\end{array}$	(3) "Dispenser" does not include a licensed hospital pharmacy that dispenses a monitored prescription drug for inpatient hospital care.
45	(E) "Dispenses" has the meaning stated in § 12-101 of the Health Occupations Article.
6	(F) "FEDERAL LAW ENFORCEMENT AGENCY" MEANS:
7 8	(1) Any entity within the United States Department of Justice, including:
9	(I) THE DRUG ENFORCEMENT ADMINISTRATION;
10	(II) THE FEDERAL BUREAU OF INVESTIGATION; AND
11	(III) A UNITED STATES ATTORNEY'S OFFICE; OR
12 13	(2) THE OFFICE OF THE INSPECTOR GENERAL OF THE Department of Health and Human Services.
14 15 16	(G) "Licensing entity" means an entity authorized under the Health Occupations Article to License, regulate, or discipline a prescriber or dispenser.
17 18 19	(H) <u>"Monitored prescription drug" means a prescription drug</u> <del>That contains a substance listed in Schedule II through Schedule</del> <del>IV.</del>
20 21 22	(I) "Prescriber" MEANS A LICENSED HEALTH CARE PROFESSIONAL WHO IS AUTHORIZED BY LAW TO PRESCRIBE A MONITORED PRESCRIPTION DRUG.
$\begin{array}{c} 23\\ 24 \end{array}$	<del>(J)</del> "Prescription drug" has the meaning stated in § 21-201 of this title.
25 26	(K) "PRESCRIPTION MONITORING DATA" MEANS THE INFORMATION SUBMITTED TO THE PROGRAM.
27 28	(L) "Program" means the Prescription Drug Monitoring Program established under this subtitle,
29 30	(m) "Schedule II" means the list of controlled dangerous substances set forth in § 5-403 of the Criminal Law Article.

#### 1 (N) "Schedule III" MEANS THE LIST OF CONTROLLED DANGEROUS 2 SUBSTANCES SET FORTH IN § 5-404 OF THE CRIMINAL LAW ARTICLE. 3 <del>(A)</del> "Schedule IV" means the list of controlled dangerous 4 SUBSTANCES SET FORTH IN § 5-405 OF THE CRIMINAL LAW ARTICLE. $\mathbf{5}$ "STATE OR LOCAL LAW ENFORCEMENT AGENCY" MEANS: <del>(P)</del> 6 <del>(1)</del> A STATE, COUNTY, OR MUNICIPAL POLICE DEPARTMENT OR $\overline{7}$ AGENCY; 8 (2) A SHERIFF'S OFFICE; 9 <del>(3)</del> A STATE'S ATTORNEY'S OFFICE: OR 10 <del>(4)</del> THE OFFICE OF THE ATTORNEY GENERAL. 11 <u>21\_2A\_02.</u> 12 <del>(A)</del> THE DEPARTMENT SHALL ESTABLISH AND MAINTAIN, IN 13 **CONSULTATION WITH THE BOARD, A PRESCRIPTION DRUG MONITORING** 14 PROGRAM THAT ELECTRONICALLY COLLECTS AND STORES DATA CONCERNING 15MONITORED PRESCRIPTION DRUCS. 16 (B) THE SECRETARY MAY: 17(1) ASSIGN RESPONSIBILITY FOR THE OPERATION OF THE 18 PROGRAM TO ANY UNIT IN THE DEPARTMENT: AND 19 <del>(2)</del> **CONTRACT WITH ANY QUALIFIED PERSON AS THE SECRETARY** 20 DEEMS NECESSARY FOR THE EFFICIENT AND ECONOMICAL OPERATION OF THE 21 PROGRAM. 22 THE SECRETARY, IN CONSULTATION WITH THE BOARD, SHALL <del>(C)</del> 23ADOPT REGULATIONS TO CARRY OUT THIS SUBTITLE. 24 THE REGULATIONS ADOPTED BY THE SECRETARY SHALL: <del>(D)</del> 25**(1)** ASSIST HEALTH CARE PROVIDERS AND LAW ENFORCEMENT 26 PROFESSIONALS IN: 27<del>(I)</del> THE IDENTIFICATION, TREATMENT, AND PREVENTION

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28 OF PRESCRIPTION DRUG ABUSE; AND

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1	(11) The identification and investigation of	
$\frac{1}{2}$	UNLAWFUL PRESCRIPTION DRUG DIVERSION;	
3	(2) PROMOTE A BALANCED USE OF PRESCRIPTION MONITORING	
4	DATA TO ASSIST APPROPRIATE LAW ENFORCEMENT ACTIVITIES WHILE	
5	PRESERVING THE PROFESSIONAL PRACTICE OF HEALTH CARE PROVIDERS AND	
6	THE ACCESS OF PATIENTS TO OPTIMAL PHARMACEUTICAL CARE;	
7	(3) Identify the circumstances under which	
8	PRESCRIPTION MONITORING DATA ARE PROVIDED TO AN AUTHORIZED	
9	RECIPIENT, WITH SUCH CIRCUMSTANCES TO PARALLEL AS CLOSELY AS IS	
10	APPROPRIATE AN AUTHORIZED RECIPIENT'S AUTHORITY TO ACCESS SIMILAR	
11	CONFIDENTIAL INFORMATION UNDER FEDERAL AND STATE LAWS AND	
12	REGULATIONS IN EFFECT AT THE TIME THE PROGRAM WAS ESTABLISHED;	
13	(4) Identify the circumstances under which an	
14	AUTHORIZED RECIPIENT MAY DISCLOSE PRESCRIPTION MONITORING DATA	
15	<del>provided by the Program;</del>	
16	(5) Identify the circumstances under which a federal	
17	LAW ENFORCEMENT AGENCY, A STATE OR LOCAL LAW ENFORCEMENT AGENCY,	
18	OR A LICENSING ENTITY THAT HAS RECEIVED PRESCRIPTION MONITORING	
19	DATA SHALL CONSULT WITH THE MULTIDISCIPLINARY CONSULTATION TEAM	
20	<del>established under § 21-2A-04 of this subtitle about the</del>	
21	INTERPRETATION OF THE PRESCRIPTION MONITORING DATA;	
22	(6) <b>PROMOTE APPROPRIATE AND REAL-TIME, IF FEASIBLE,</b>	
23	ACCESS TO PRESCRIPTION MONITORING DATA BY DISPENSERS AND	
24	PRESCRIBERS TO HELP PREVENT SUBSTANCE ABUSE AND PRESCRIPTION DRUG	
25	<del>DIVERSION;</del>	
26	(7) <b>Require the Board to apply for federal grant</b>	
27	MONEY, AS APPROPRIATE;	
28	(8) Ensure that the Program is designed to:	
29	(1) <b>Prevent, to the fullest extent possible, the</b>	
30	BURDEN ON DISPENSERS IN THEIR COMPLIANCE WITH THE REQUIREMENTS OF	
31	THIS SUBTITLE; AND	
32	(II) <b>Receive prescription monitoring data in a</b>	
33	MANNER COMPATIBLE WITH EXISTING DATA SUBMISSION PRACTICES OF	
34	DISPENSERS; AND	
35	(9) ENSURE THAT:	

1 <del>(II)</del> **CONFIDENTIAL OR PRIVILEGED PATIENT INFORMATION** 2 IS KEPT CONFIDENTIAL: AND 3 **RECORDS OR INFORMATION PROTECTED BY THE** <del>(III)</del> 4 PRIVILEGE BETWEEN A HEALTH CARE PROVIDER AND A PATIENT, OR  $\mathbf{5}$ OTHERWISE REQUIRED BY LAW TO BE HELD CONFIDENTIAL, IS FILED IN A 6 MANNER THAT, EXCEPT AS OTHERWISE PROVIDED IN § 21-2A-06 OF THIS 7 SUBTITLE, DOES NOT DISCLOSE THE IDENTITY OF THE PERSON PROTECTED. 8 <del>(E)</del> PRESCRIPTION MONITORING DATA SHALL BE DESTROYED AFTER 2 9 YEARS, UNLESS A LAW ENFORCEMENT AGENCY OR A HEALTH OCCUPATIONS 10 BOARD HAS SUBMITTED A WRITTEN REQUEST TO THE DEPARTMENT FOR 11 **RETENTION OF SPECIFIC INFORMATION.** 12 <u>21\_2A\_03</u> IN THIS SUBTITLE, "COUNCIL" MEANS THE ADVISORY COUNCIL ON 13 (A) 14 **PRESCRIPTION DRUG MONITORING.** 15THERE IS AN ADVISORY BOARD COUNCIL ON PRESCRIPTION <del>(A)</del> (B) 16 **DRUG MONITORING IN THE DEPARTMENT.** 17 <del>(B)</del> (C) THE BOARD COUNCIL CONSISTS OF THE FOLLOWING 21 18 **MEMBERS:** 19 THE ATTORNEY GENERAL, OR THE ATTORNEY GENERAL'S (1) 20**DESIGNEE**; 21(2) THE SECRETARY, OR THE SECRETARY'S DESIGNEE; 22THE PRESIDENT OF THE MARYLAND BOARD OF PHARMACY, (3) 23**OR THE PRESIDENT'S DESIGNEE;** 24THE CHAIR OF THE MARYLAND BOARD OF PHYSICIANS, OR (4) 25THE CHAIR'S DESIGNEE; 26 THE PRESIDENT OF THE MARYLAND BOARD OF NURSING, OR (5) 27THE PRESIDENT'S DESIGNEE; 28THE CHAIR OF THE MARYLAND HEALTH CARE COMMISSION, (6) 29 **OR THE CHAIR'S DESIGNEE;** 30 FOUR PHYSICIANS AND ONE NURSE PRACTITIONER WITH (7) 31 EXPERTISE IN AREAS OF PRACTICE THAT INVOLVE PAIN MANAGEMENT AND

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SUBSTANCE ABUSE AND ADDICTION TREATMENT, APPOINTED BY THE

**SECRETARY AFTER CONSULTATION WITH:** 3 **(I)** THE MEDICAL AND CHIRURGICAL FACULTY OF MARYLAND, THE MARYLAND STATE MEDICAL SOCIETY, THE MARYLAND PHYSICAL MEDICINE AND REHABILITATION SOCIETY, AND THE MARYLAND SOCIETY OF ANESTHESIOLOGISTS WITH RESPECT TO THE PHYSICIAN **APPOINTMENTS: AND** THE MARYLAND NURSES COALITION, THE MARYLAND **(II)** 9 COALITION OF NURSE PRACTITIONERS, THE NURSE PRACTITIONER 10 ASSOCIATION OF MARYLAND, THE MARYLAND ASSOCIATION OF NURSE 11 ANESTHETISTS, AND THE MARYLAND NURSES ASSOCIATION WITH RESPECT TO 12THE NURSE PRACTITIONER APPOINTMENT: 13 FOUR PHARMACISTS, APPOINTED BY THE SECRETARY AFTER (8) CONSULTATION WITH THE MARYLAND PHARMACISTS ASSOCIATION, THE 14 15MARYLAND ASSOCIATION OF CHAIN DRUG STORES, EPIC PHARMACIES 16 UNIVERSITY OF MARYLAND SCHOOL OF PHARMACY, AND ANY OTHER 17**APPROPRIATE ORGANIZATION:** 18 **(I)** THREE OF WHOM REPRESENT THE PERSPECTIVE OF INDEPENDENT AND CHAIN PHARMACIES AND PHARMACISTS; AND 20 **(II) ONE OF WHOM REPRESENTS THE PERSPECTIVE OF** 21**HOSPITAL OUTPATIENT PHARMACIES;** 22<del>(9)</del> A FEDERAL LAW ENFORCEMENT OFFICIAL, APPOINTED BY 23THE SECRETARY AFTER CONSULTATION WITH THE DRUG ENFORCEMENT 24**ADMINISTRATION OF THE UNITED STATES DEPARTMENT OF JUSTICE:** A STATE LAW ENFORCEMENT OFFICIAL, APPOINTED BY (10) (9) 26THE SECRETARY AFTER CONSULTATION WITH THE MARYLAND STATE POLICE; (11) (10) A LOCAL LAW ENFORCEMENT OFFICIAL, APPOINTED BY THE SECRETARY AFTER CONSULTATION WITH THE MARYLAND CHIEFS OF 29 **POLICE ASSOCIATION;** (12) (11) A PROSECUTOR, APPOINTED BY THE SECRETARY AFTER CONSULTATION WITH THE MARYLAND STATE'S ATTORNEYS ASSOCIATION; AND 3132(13) (12) TWO MARYLAND CITIZENS WHO REPRESENT THE 33 PERSPECTIVE OF PAIN PATIENTS, APPOINTED BY THE SECRETARY FROM A LIST 34SUBMITTED BY THE MARYLAND PAIN INITIATIVE; AND

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1 (13) ANY OTHER INDIVIDUAL OR REPRESENTATIVE AT THE 2 **SECRETARY'S DISCRETION.** 3 (C) (D) THE SECRETARY SHALL DESIGNATE THE CHAIR OF THE BOARD 4 COUNCIL.  $\mathbf{5}$ <del>(D)</del> <del>(1)</del> THE TERM OF A MEMBER APPOINTED BY THE SECRETARY IS 3 6 YEARS. 7 <del>(2)</del> IF A VACANCY OCCURS DURING THE TERM OF AN APPOINTED 8 **MEMBER, THE SECRETARY SHALL APPOINT A SUCCESSOR WHO SHALL SERVE** 9 UNTIL THE TERM EXPIRES. 10 **(E)** THE BOARD COUNCIL SHALL: 11 <del>(1)</del> **MEET NOT FEWER THAN THREE TIMES ANNUALLY;** 12<del>(2)</del> Make recommendations to the Secretary recarding 13 THE DESIGN AND IMPLEMENTATION OF THE PROGRAM, IN ACCORDANCE WITH 14 THE PROVISIONS OF THIS SUBTITLE. INCLUDING RECOMMENDATIONS ABOUT: 15**REGULATIONS AND THE NEED FOR ANY FURTHER** <del>(I)</del> 16 **LEGISLATION CONCERNING THE PROGRAM; AND** STUDY THE ESTABLISHMENT 17 OF A PRESCRIPTION DRUG MONITORING PROGRAM THAT ELECTRONICALLY 18 COLLECTS AND STORES DATA CONCERNING MONITORED PRESCRIPTION DRUGS. 19 **(F)** THE COUNCIL SHALL MAKE RECOMMENDATIONS TO THE 20SECRETARY FOR ESTABLISHING A PRESCRIPTION DRUG MONITORING PROGRAM 21THAT: 22(1) ASSISTS HEALTH CARE PROVIDERS AND LAW ENFORCEMENT 23**PROFESSIONALS IN:** 24**(I)** THE IDENTIFICATION, TREATMENT, AND PREVENTION 25OF PRESCRIPTION DRUG ABUSE: AND 26THE IDENTIFICATION AND INVESTIGATION **(II)** OF 27**UNLAWFUL PRESCRIPTION DRUG DIVERSION;** 28(2) **PROMOTES A BALANCED USE OF PRESCRIPTION DRUG** 29 MONITORING DATA TO ASSIST APPROPRIATE LAW ENFORCEMENT ACTIVITIES 30 WHILE PRESERVING THE PROFESSIONAL PRACTICE OF HEALTH CARE 31PROVIDERS AND THE ACCESS OF PATIENTS TO OPTIMAL PHARMACEUTICAL 32CARE: AND

1	(3) <b>PROMOTES APPROPRIATE AND REAL-TIME ACCESS TO</b>
2	PRESCRIPTION DRUG MONITORING DATA BY DISPENSERS AND PRESCRIBERS TO
3	HELP PREVENT SUBSTANCE ABUSE AND PRESCRIPTION DRUG DIVERSION.
4	(G) IN ITS STUDY AND RECOMMENDATIONS, THE COUNCIL SHALL:
5	(1) <b>IDENTIFY THE PRESCRIPTION DRUGS TO BE MONITORED;</b>
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6	(2) IDENTIFY THE TYPES OF DISPENSERS THAT SHALL BE
7	REQUIRED TO SUBMIT INFORMATION TO A PRESCRIPTION DRUG MONITORING
8	PROGRAM;
9	
9 10	(3) DETERMINE THE DATA A DISPENSER MUST SUBMIT TO A
	PRESCRIPTION DRUG MONITORING PROGRAM FOR A MONITORED
11	PRESCRIPTION DRUG;
12	(4) <b>DETERMINE THE PROCESS FOR SUBMITTING PRESCRIPTION</b>
12 13	
10	DRUG MONITORING DATA TO A PRESCRIPTION DRUG MONITORING PROGRAM;
14	(5) SPECIFY RECIPIENTS AUTHORIZED TO RECEIVE
15	PRESCRIPTION DRUG MONITORING DATA FROM A PRESCRIPTION DRUG
16	MONITORING PROGRAM;
10	
17	(6) IDENTIFY THE CIRCUMSTANCES UNDER WHICH
18	PRESCRIPTION DRUG MONITORING DATA ARE PROVIDED TO AN AUTHORIZED
19	RECIPIENT;
20	(7) Identify the circumstances under which an
21	AUTHORIZED RECIPIENT MAY DISCLOSE PRESCRIPTION DRUG MONITORING
22	DATA PROVIDED BY A PRESCRIPTION DRUG MONITORING PROGRAM;
23	(8) <b>DETERMINE HOW TO ENSURE THAT CONFIDENTIAL OR</b>
24	PRIVILEGED PATIENT INFORMATION IS KEPT CONFIDENTIAL;
25	(9) <b>DEFINE THE PROCESS FOR INTERPRETING PRESCRIPTION</b>
26	DRUG MONITORING DATA FOR DISCIPLINARY OR LAW ENFORCEMENT
27	PURPOSES;
00	
28	(10) DETERMINE THE MOST EFFICIENT AND EFFECTIVE
29	<b>OPERATION OF A PRESCRIPTION DRUG MONITORING PROGRAM;</b>
30	
$\frac{30}{31}$	(11) DETERMINE THE COST OF AND SOURCES OF FUNDS FOR
$\frac{31}{32}$	ESTABLISHING AND OPERATING A PRESCRIPTION DRUG MONITORING
34	PROGRAM, INCLUDING THE COST OF AND SOURCES OF FUNDS FOR SUBMITTING

34 TO MODIFICATION OR CONTINUATION OF THE PROGRAM; AND

	12 HOUSE BILL 525	
1	(4) <b>Provide ongoing advice and consultation on th</b>	
2	IMPLEMENTATION AND OPERATION OF THE PROGRAM, INCLUDING	
3	<b>RECOMMENDATIONS REGARDING:</b>	
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	(11) The design and implementation of an ongoing	
8	EVALUATION COMPONENT OF THE PROGRAM.	
9	<del>21–2A–04.</del>	
10		
10	(A) THE SECRETARY SHALL APPOINT A MULTIDISCIPLINARY	
11	CONSULTATION TEAM.	
12	(b) The multidisciplinary consultation team shall reflect	
13	THE DIVERSITY AND BALANCE OF PERSPECTIVES REPRESENTED ON TH	
14	Board.	
15	(C) THE MULTIDISCIPLINARY CONSULTATION TEAM SHALL CONSIST OF	
16	(1) Program staff:	
10	(1) PROGRAM STAFF;	
17	(2) Members of the Board; and	
18	(3) ANY CONSULTANTS THAT THE SECRETARY DETERMINES WILL	
19	HELP ACHIEVE THE DIVERSITY AND BALANCE OF PERSPECTIVES REPRESENTED	
20	<del>on the Board.</del>	
21	( <del>d)</del> In accordance with regulation, the multidisciplinary	
$\frac{21}{22}$	CONSULTATION TEAM SHALL ASSIST A FEDERAL LAW ENFORCEMENT AGENCY, /	
$\frac{22}{23}$	STATE OR LOCAL LAW ENFORCEMENT AGENCY, OR A LICENSING ENTITY THAT	
24 24	HAS RECEIVED PRESCRIPTION MONITORING DATA FROM THE PROGRAM IN	
25	INTERPRETING THE DATA AND CONSIDERING WHETHER THE DATA, IN THE	
26	CONTEXT OF THE NATURE OF A PRESCRIBER'S OR A DISPENSER'S PRACTICE, A	
$\frac{20}{27}$	PATIENT'S MEDICAL CONDITION, OR ANY OTHER RELEVANT FACTS, SUGGEST	
28	THE NEED FOR FURTHER INVESTIGATION.	
29	<u>21-2A-05.</u>	

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

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1	(1) A PATIENT IDENTIFIER;
2	(2) THE PRESCRIPTION DRUG DISPENSED;
3	(3) THE DATE OF DISPENSING;
4	(4) THE QUANTITY DISPENSED;
5	(5) THE PRESCRIBER; AND
6	(6) THE PHARMACY FROM WHICH THE DRUG IS DISPENSED.
7	(B) EXCEPT AS PROVIDED IN SUBSECTION (C) OF THIS SECTION, A
8	DISPENSER SHALL SUBMIT PRESCRIPTION MONITORING DATA TO THE
9	PROGRAM BY ELECTRONIC SUBMISSION.
10	<del>(C)</del> The Program, for good cause shown, may authorize a
11	DISPENSER TO:
12	(1) Submit prescription monitoring data by an
12	ALTERNATIVE FORM OF SUBMISSION; OR
10	
14	(2) Omit one or more elements of prescription
15	MONITORING DATA.
16	<del>(d)</del> The Board and the Secretary may not charge a fee or
17	IMPOSE AN ASSESSMENT ON A HOSPITAL, DISPENSER, OR PRESCRIBER FOR:
18	
19	(1) THE ESTABLISHMENT, MAINTENANCE, OR ADMINISTRATION
13	<del>OF THE <b>PROGRAM;</b> OR</del>
20	(2) THE TRANSMISSION OF INFORMATION TO OR FROM THE
21	Program.
22	<del>21-2A-06.</del>
23	(A) <b>PRESCRIPTION MONITORING DATA:</b>
24	
$\frac{24}{25}$	(1) ARE CONFIDENTIAL AND PRIVILEGED, AND NOT SUBJECT TO DISCOVERY SUBDOENA OF OTHER MEANS OF LECAL COMBULISION IN CIVIL
$\frac{23}{26}$	DISCOVERY, SUBPOENA, OR OTHER MEANS OF LEGAL COMPULSION IN CIVIL LITIGATION;
20	
27	(2) ARE NOT PUBLIC RECORDS; AND

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$egin{array}{c} 1 \\ 2 \\ 3 \end{array}$	(3) EXCEPT AS PROVIDED IN SUBSECTIONS (B) AND (D) OF THIS SECTION OR AS OTHERWISE PROVIDED BY LAW, MAY NOT BE DISCLOSED TO ANY PERSON.
4 5	(B) THE PROGRAM MAY, IN ACCORDANCE WITH REGULATION, DISCLOSE PRESCRIPTION MONITORING DATA TO AN AUTHORIZED RECIPIENT;
6	(1) IN CONNECTION WITH THE MEDICAL CARE OF A PATIENT;
7 8	(2) In connection with the dispensing of a monitored prescription drug; or
9 10	(3) For the purpose of furthering an existing bona fide individual investigation.
$11 \\ 12 \\ 13$	(C) EXCEPT AS PROVIDED BY REGULATION, AN AUTHORIZED RECIPIENT WHO RECEIVES PRESCRIPTION MONITORING DATA FROM THE PROGRAM MAY NOT DISCLOSE THE DATA.
14 15 16	(D) THE PROGRAM MAY DISCLOSE PRESCRIPTION MONITORING DATA AFTER REDACTION OF ALL INFORMATION THAT COULD IDENTIFY A PATIENT, PRESCRIBER, DISPENSER, OR OTHER INDIVIDUAL.
17	<del>21–2A–07.</del>
18 19	(A) THE DEPARTMENT AND ITS AGENTS AND EMPLOYEES ARE NOT SUBJECT TO LIABILITY ARISING FROM;
$\begin{array}{c} 20\\ 21 \end{array}$	(1) THE INACCURACY OF ANY INFORMATION SUBMITTED TO THE Program in accordance with this subtitle; and
22 23	(2) THE UNAUTHORIZED USE OR DISCLOSURE OF PRESCRIPTION MONITORING DATA PROVIDED TO AN AUTHORIZED RECIPIENT.
$\begin{array}{c} 24 \\ 25 \end{array}$	(B) AN AUTHORIZED RECIPIENT, ACTING IN GOOD FAITH, IS NOT SUBJECT TO LIABILITY ARISING SOLELY FROM:
26 27	(1) Requesting or receiving, or failing to request or receive, prescription monitoring data from the Program; or
28 29	(2) ACTING, OR FAILING TO ACT, ON THE BASIS OF PRESCRIPTION MONITORING DATA PROVIDED BY THE PROGRAM.

**<u>21-2A-08.</u>** 

1	(A) THE PROGRAM, IN CONSULTATION WITH THE BOARD, SHALL
2	DEVELOP AND IMPLEMENT, OR CONTRACT WITH A VENDOR TO DEVELOP AND
3	IMPLEMENT, EDUCATION AND TRAINING COURSES RELATING TO THE
4	PROGRAM.
5	(B) THE COURSES REQUIRED UNDER SUBSECTION (A) OF THIS SECTION
6	MAY RELATE TO:
7	(1) THE TRANSMISSION, ACCESS, AND USE OF PRESCRIPTION
8	MONITORING DATA;
9	(2) Issues arising in prescribing and dispensing
10	MONITORED PRESCRIPTION DRUGS;
11	(3) Issues concerning identifying and treating
12	SUBSTANCE ABUSE AND ADDICTION; AND
13	(4) THE ROLE OF MONITORED PRESCRIPTION DRUGS IN THE
14	MANAGEMENT OF PAIN, INCLUDING THE DISTINCTION BETWEEN ADDICTION
15	AND PHYSICAL DEPENDENCE.
16	<del>21–2A–09.</del>
17	(A) A DISPENSER WHO KNOWINGLY FAILS TO SUBMIT PRESCRIPTION
18	MONITORING DATA TO THE PROGRAM AS REQUIRED UNDER THIS SUBTITLE
19	SHALL BE SUBJECT TO A CIVIL PENALTY NOT EXCEEDING \$500 FOR EACH
20	FAILURE TO SUBMIT REQUIRED INFORMATION.
21	(B) AN AUTHORIZED RECIPIENT WHO KNOWINGLY DISCLOSES OR USES
22	PRESCRIPTION MONITORING DATA IN VIOLATION OF THIS SUBTITLE SHALL BE
23	GUILTY OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO
24	IMPRISONMENT NOT EXCEEDING 1 YEAR OR A FINE NOT EXCEEDING \$10,000 OR
25	BOTH.
26	SECTION 2. AND BE IT FURTHER ENACTED, That implementation of the
27	Prescription Drug Monitoring Program to be established under § 21-2A-02 of the
28	Health - General Article, as enacted by Section 1 of this Act, is contingent on the
29 30	Department of Health and Mental Hygiene obtaining federal, private, or State funds to carry out the purposes of this Act.
50	to carry out the purposes of this rice.
31	SECTION 3. AND BE IT FURTHER ENACTED, That the Prescription Drug
32	Monitoring Program to be established under § 21-2A-02 of the Health - General
33	Article, as enacted by Section 1 of this Act, may not collect prescription monitoring
34	<del>data before June 1, 2009.</del>

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

3 <u>SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect</u>
 4 June 1, 2008. It shall remain effective for a period of 2 years and, at the end of May 31,
 5 2010, with no further action required by the General Assembly, this Act shall be

6 <u>abrogated and of no further force and effect.</u>

Approved:

Governor.

Speaker of the House of Delegates.

President of the Senate.