

# HOUSE BILL 456

J1, J2

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CF SB 382

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By: **The Speaker (By Request – Administration) and Delegates Adams, Afzali, Anderton, Aumann, Beitzel, Buckel, Carozza, Cassilly, Ciliberti, Cluster, Fisher, Flanagan, Folden, Ghrist, Hornberger, Impallaria, Jacobs, Kipke, Krebs, Long, Malone, Mautz, McComas, McConkey, McDonough, McKay, Metzgar, Miele, W. Miller, Morgan, O'Donnell, Otto, Parrott, Reilly, Rose, Saab, Shoemaker, Simonaire, Szeliga, Vogt, West, and B. Wilson**

Introduced and read first time: January 29, 2016

Assigned to: Health and Government Operations

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## A BILL ENTITLED

1 AN ACT concerning

2 **Prescription Drug Monitoring Program – Revisions**

3 FOR the purpose of requiring that certain authorized providers and prescribers be  
4 registered with the Prescription Drug Monitoring Program before obtaining a certain  
5 new or renewal registration or by a certain date, whichever is sooner; requiring that  
6 certain pharmacists be registered with the Program by a certain date; altering the  
7 mission of the Program; authorizing the Secretary of Health and Mental Hygiene to  
8 identify and publish a list of certain monitored prescription drugs; requiring the  
9 Secretary, in consultation with the Maryland Health Care Commission and the  
10 Advisory Board on Prescription Drug Monitoring, to educate pharmacists, prescriber  
11 delegates, and pharmacist delegates about the purpose and operation of the  
12 Program; repealing a requirement that certain regulations adopted by the Secretary  
13 specify that a prescriber or dispenser is not required or obligated to access or use  
14 certain prescription monitoring data; authorizing certain licensing entities to adopt  
15 regulations that establish standards of practice for the review of prescription  
16 monitoring data; requiring certain prescribers and pharmacists to request and  
17 assess certain prescription monitoring data under certain circumstances; requiring  
18 a certain prescriber to document certain information in a patient's medical records  
19 under certain circumstances; authorizing a certain prescriber or pharmacist to  
20 authorize a prescriber delegate or pharmacist delegate to request prescription  
21 monitoring data on behalf of the prescriber or pharmacist under certain  
22 circumstances; specifying the circumstances under which certain prescribers and  
23 pharmacists are not required to request prescription monitoring data from the  
24 Program or comply with certain provisions of this Act; requiring certain prescribers  
25 and pharmacists who do not access prescription monitoring data to take certain  
26 actions; altering the information that the Advisory Board on Prescription Drug

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EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 Monitoring must report annually to the Governor and the General Assembly;  
2 repealing a provision of law stating that prescription monitoring data may not be  
3 used as the basis for imposing clinical practice standards; altering a certain  
4 immunity from liability or disciplinary action arising solely from certain actions;  
5 providing that prescribers, prescriber delegates, pharmacists, and pharmacist  
6 delegates shall be subject to disciplinary action by the appropriate licensing entity  
7 for certain violations; providing that a release of prescription monitoring data by a  
8 prescriber delegate, pharmacist, or pharmacist delegate under certain circumstances  
9 is not a violation of certain provisions of law; altering certain definitions; defining  
10 certain terms; making certain technical corrections; and generally relating to the  
11 Prescription Drug Monitoring Program.

12 BY repealing and reenacting, with amendments,  
13 Article – Criminal Law  
14 Section 5–304  
15 Annotated Code of Maryland  
16 (2012 Replacement Volume and 2015 Supplement)

17 BY repealing and reenacting, without amendments,  
18 Article – Health – General  
19 Section 21–2A–01(a), (e), and (f), 21–2A–02(c), and 21–2A–03(a)  
20 Annotated Code of Maryland  
21 (2015 Replacement Volume)

22 BY repealing and reenacting, with amendments,  
23 Article – Health – General  
24 Section 21–2A–01(d), (g), (h), (i), (j), and (k), 21–2A–02(b), 21–2A–03(b) and (e),  
25 21–2A–04, 21–2A–05(f)(3)(i) and (ii), 21–2A–06(d), 21–2A–07(b), 21–2A–08(b),  
26 and 21–2A–09  
27 Annotated Code of Maryland  
28 (2015 Replacement Volume)

29 BY adding to  
30 Article – Health – General  
31 Section 21–2A–01(h), (i), (k), (o), and (p), 21–2A–04.1, and 21–2A–04.2  
32 Annotated Code of Maryland  
33 (2015 Replacement Volume)

34 BY repealing  
35 Article – Health – General  
36 Section 21–2A–06(k)  
37 Annotated Code of Maryland  
38 (2015 Replacement Volume)

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

1 **Article – Criminal Law**

2 5–304.

3 (a) If an authorized provider is authorized to dispense or conduct research under  
4 State law, the Department shall register the authorized provider to dispense a controlled  
5 dangerous substance or to conduct research with a controlled dangerous substance listed  
6 in Schedule II through Schedule V.

7 **(B) AN AUTHORIZED PROVIDER WHO PRESCRIBES A CONTROLLED**  
8 **DANGEROUS SUBSTANCE LISTED IN SCHEDULE II THROUGH SCHEDULE V SHALL BE**  
9 **REGISTERED WITH THE PRESCRIPTION DRUG MONITORING PROGRAM DESCRIBED**  
10 **IN TITLE 21, SUBTITLE 2A OF THE HEALTH – GENERAL ARTICLE BEFORE**  
11 **OBTAINING A NEW OR RENEWAL REGISTRATION WITH THE DEPARTMENT UNDER**  
12 **SUBSECTION (A) OF THIS SECTION OR BY JULY 1, 2017, WHICHEVER IS SOONER.**

13 **[(b)] (C)** The Department need not require separate registration under this  
14 section for an authorized provider who is:

15 (1) engaged in research with a nonnarcotic controlled dangerous substance  
16 in Schedule II through Schedule V; and

17 (2) already registered under this subtitle in another capacity.

18 **[(c)] (D)** An authorized provider may conduct research in the State with a  
19 controlled dangerous substance listed in Schedule I if the authorized provider is registered  
20 under federal law to conduct research with a controlled dangerous substance listed in  
21 Schedule I and gives evidence of the registration to the Department.

22 **Article – Health – General**

23 21–2A–01.

24 (a) In this subtitle the following words have the meanings indicated.

25 (d) (1) “Dispenser” means a person authorized by law to dispense a monitored  
26 prescription drug to a patient or the patient’s agent in the State.

27 (2) “Dispenser” includes a nonresident pharmacy.

28 (3) “Dispenser” does not include:

29 (i) A licensed hospital pharmacy that only dispenses a monitored  
30 prescription drug for direct administration to an inpatient of the hospital;

31 (ii) An opioid **[maintenance] TREATMENT SERVICES** program;

1 (iii) A veterinarian licensed under Title 2, Subtitle 3 of the  
2 Agriculture Article when prescribing controlled substances for animals in the usual course  
3 of providing professional services;

4 (iv) A pharmacy issued a waiver permit under COMAR 10.34.17.03  
5 that provides pharmaceutical specialty services exclusively to persons living in assisted  
6 living facilities, comprehensive care facilities, and developmental disabilities facilities; and

7 (v) A pharmacy that:

8 1. Dispenses medications to an inpatient hospice; and

9 2. Has been granted a waiver under § 21-2A-03(f) of this  
10 subtitle.

11 (e) “Licensing entity” means an entity authorized under the Health Occupations  
12 Article to license, regulate, or discipline a prescriber or dispenser.

13 (f) “Monitored prescription drug” means a prescription drug that contains a  
14 Schedule II, Schedule III, Schedule IV, or Schedule V controlled dangerous substance  
15 designated under Title 5, Subtitle 4 of the Criminal Law Article.

16 (g) “Opioid [maintenance] **TREATMENT SERVICES** program” means a program  
17 that:

18 (1) Is certified **IN ACCORDANCE WITH § 8-401 OF THIS ARTICLE OR**  
19 **LICENSED** by the State under [**§ 8-404**] **§ 7.5-401** of this article;

20 (2) Is authorized to treat patients with opioid dependence with a  
21 medication approved by the federal Food and Drug Administration for opioid dependence;

22 (3) Complies with:

23 (i) The Code of Federal Regulations 42, Part 8;

24 (ii) COMAR 10.47.02.11; and

25 (iii) Requirements for the secure storage and accounting of opioid  
26 medication imposed by the federal Drug Enforcement Administration and the State  
27 Division of Drug Control; and

28 (4) Has been granted a certification for operation by the Department, the  
29 federal Substance Abuse and Mental Health Services Administration, and the federal  
30 Center for Substance Abuse Treatment.

1           **(H) “PHARMACIST” MEANS AN INDIVIDUAL WHO IS LICENSED UNDER TITLE**  
2 **12 OF THE HEALTH OCCUPATIONS ARTICLE TO DISPENSE A MONITORED**  
3 **PRESCRIPTION DRUG.**

4           **(I) “PHARMACIST DELEGATE” MEANS AN INDIVIDUAL WHO IS:**

5                   **(1) AUTHORIZED BY A REGISTERED PHARMACIST TO REQUEST OR**  
6 **ACCESS PRESCRIPTION MONITORING DATA; AND**

7                   **(2) EMPLOYED BY OR UNDER CONTRACT WITH THE SAME**  
8 **PROFESSIONAL PRACTICE AS THE REGISTERED PHARMACIST.**

9           **[(h)] (J) “Prescriber” means a licensed health care professional authorized by**  
10 **law to prescribe a monitored prescription drug.**

11           **(K) “PRESCRIBER DELEGATE” MEANS AN INDIVIDUAL WHO IS:**

12                   **(1) AUTHORIZED BY A REGISTERED PRESCRIBER TO REQUEST OR**  
13 **ACCESS PRESCRIPTION MONITORING DATA; AND**

14                   **(2) EMPLOYED BY OR UNDER CONTRACT WITH THE SAME**  
15 **PROFESSIONAL PRACTICE AS THE PRESCRIBER.**

16           **[(i)] (L) “Prescription drug” has the meaning stated in § 21–201 of this title.**

17           **[(j)] (M) “Prescription monitoring data” means the information submitted to the**  
18 **Program for a monitored prescription drug.**

19           **[(k)] (N) “Program” means the Prescription Drug Monitoring Program**  
20 **established under this subtitle.**

21           **(O) “REGISTERED” MEANS REGISTERED WITH THE PROGRAM TO REQUEST**  
22 **OR ACCESS PRESCRIPTION MONITORING DATA FOR CLINICAL USE.**

23           **(P) “TERMINAL ILLNESS” MEANS A MEDICAL CONDITION THAT, WITHIN**  
24 **REASONABLE MEDICAL JUDGMENT, INVOLVES A PROGNOSIS FOR A PATIENT THAT**  
25 **LIKELY WILL RESULT IN THE PATIENT’S DEATH WITHIN 6 MONTHS.**

26 21–2A–02.

27           (b) The mission of the Program is to:

28                   (1) Assist prescribers, [dispensers] PHARMACISTS, and public health  
29 professionals in:

1 (i) The identification and prevention of prescription drug abuse; and

2 (ii) The identification and investigation of unlawful prescription  
3 drug diversion; and

4 (2) Promote a balanced use of prescription monitoring data to assist  
5 appropriate law enforcement activities while preserving the professional practice of health  
6 care providers and the access of patients to optimal pharmaceutical care.

7 (c) To carry out its mission, the Program shall monitor the prescribing and  
8 dispensing of all Schedule II, Schedule III, Schedule IV, and Schedule V controlled  
9 dangerous substances by all prescribers and dispensers in the State.

10 21-2A-03.

11 (a) The Department shall implement the Program, subject to the availability of  
12 funds.

13 (b) The Secretary may:

14 (1) Assign responsibility for the operation of the Program to any unit in the  
15 Department; [and]

16 (2) Contract with any qualified person for the efficient and economical  
17 operation of the Program; AND

18 **(3) IDENTIFY AND PUBLISH A LIST OF MONITORED PRESCRIPTION**  
19 **DRUGS THAT HAVE A LOW POTENTIAL FOR ABUSE BY INDIVIDUALS.**

20 (e) The Secretary, in consultation with the Maryland Health Care Commission  
21 and the Board, shall:

22 (1) Determine the appropriate technology to support the operation of the  
23 Program; and

24 (2) Educate dispensers, prescribers, **PHARMACISTS, PRESCRIBER**  
25 **DELEGATES, PHARMACIST DELEGATES,** and consumers about the purpose and operation  
26 of the Program.

27 21-2A-04.

28 (a) The Secretary, in consultation with the Board, shall adopt regulations to carry  
29 out this subtitle.

30 (b) The regulations adopted by the Secretary shall:

1 (1) Specify the prescription monitoring data required to be submitted  
2 under § 21-2A-03 of this subtitle;

3 (2) Specify the electronic or other means by which information is to be  
4 submitted:

5 (i) Without unduly increasing the workload and expense on  
6 dispensers; and

7 (ii) In a manner as compatible as possible with existing data  
8 submission practices of dispensers;

9 (3) Specify that the Program:

10 (i) Shall provide the information technology software to dispensers  
11 necessary to upload prescription drug monitoring data to the Program; and

12 (ii) May not impose any fees or other assessments on prescribers or  
13 dispensers to support the operation of the Program;

14 ~~[(4) Specify that a prescriber or dispenser is not required or obligated to  
15 access or use prescription monitoring data available under the Program;]~~

16 ~~[(5) (4) Identify the mechanism by which prescription monitoring data  
17 are disclosed to a person, in accordance with § 21-2A-06 of this subtitle;~~

18 ~~[(6) (5) Identify the circumstances under which a person may disclose  
19 prescription monitoring data received under the Program;~~

20 ~~[(7) (6) Specify the process for the Program's review of prescription  
21 monitoring data and reporting of possible misuse or abuse of a monitored prescription drug  
22 under § 21-2A-06(c) of this subtitle;~~

23 ~~[(8) (7) Establish requirements for Program retention of prescription  
24 monitoring data for 3 years; and~~

25 ~~[(9) (8) Require that:~~

26 (i) Confidential or privileged patient information be kept  
27 confidential; and

28 (ii) Records or information protected by a privilege between a health  
29 care provider and a patient, or otherwise required by law to be held confidential, be filed in  
30 a manner that, except as otherwise provided in § 21-2A-06 of this subtitle, does not disclose  
31 the identity of the person protected.

1 (C) A LICENSING ENTITY MAY ADOPT REGULATIONS THAT ESTABLISH  
2 STANDARDS OF PRACTICE FOR THE REVIEW OF PRESCRIPTION MONITORING DATA  
3 UNDER THIS SUBTITLE.

4 **21-2A-04.1.**

5 (A) A PRESCRIBER SHALL BE REGISTERED WITH THE PROGRAM BEFORE  
6 OBTAINING A NEW OR RENEWAL REGISTRATION WITH THE DEPARTMENT UNDER §  
7 5-304(A) OF THE CRIMINAL LAW ARTICLE OR BY JULY 1, 2017, WHICHEVER IS  
8 SOONER.

9 (B) A PHARMACIST SHALL BE REGISTERED WITH THE PROGRAM BY JULY 1,  
10 2017.

11 **21-2A-04.2.**

12 (A) (1) BEGINNING JULY 1, 2018, A PRESCRIBER OR PHARMACIST:

13 (I) SHALL REQUEST AT LEAST THE PRIOR 6 MONTHS OF  
14 PRESCRIPTION MONITORING DATA FOR A PATIENT BEFORE INITIATING A COURSE  
15 OF TREATMENT FOR THE PATIENT THAT INCLUDES PRESCRIBING OR DISPENSING  
16 AN OPIOID OR A BENZODIAZEPINE;

17 (II) SHALL, IF A PATIENT'S COURSE OF TREATMENT CONTINUES  
18 TO INCLUDE PRESCRIBING OR DISPENSING AN OPIOID OR BENZODIAZEPINE FOR  
19 MORE THAN 90 DAYS AFTER THE INITIAL REQUEST FOR PRESCRIPTION MONITORING  
20 DATA, REQUEST PRESCRIPTION MONITORING DATA FOR THE PATIENT AT LEAST  
21 EVERY 90 DAYS UNTIL THE COURSE OF TREATMENT HAS ENDED; AND

22 (III) SHALL ASSESS PRESCRIPTION MONITORING DATA  
23 REQUESTED FROM THE PROGRAM BEFORE DECIDING WHETHER TO PRESCRIBE OR  
24 DISPENSE OR CONTINUE PRESCRIBING OR DISPENSING AN OPIOID OR  
25 BENZODIAZEPINE.

26 (2) IF A PRESCRIBER DECIDES TO PRESCRIBE OR CONTINUE TO  
27 PRESCRIBE AN OPIOID OR BENZODIAZEPINE AFTER REQUESTING PRESCRIPTION  
28 MONITORING DATA FROM THE PROGRAM AND ASSESSING THE PRESCRIPTION  
29 MONITORING DATA, THE PRESCRIBER SHALL DOCUMENT IN THE PATIENT'S  
30 MEDICAL RECORD THAT THE PRESCRIPTION MONITORING DATA WAS REQUESTED  
31 AND ASSESSED.



1           **(B) A PRESCRIBER OR PHARMACIST MAY AUTHORIZE A PRESCRIBER**  
2 **DELEGATE OR PHARMACIST DELEGATE TO REQUEST PRESCRIPTION MONITORING**  
3 **DATA ON BEHALF OF THE PRESCRIBER OR PHARMACIST IF:**

4           **(1) THE PRESCRIBER OR PHARMACIST TAKES REASONABLE STEPS TO**  
5 **ENSURE THAT THE PRESCRIBER DELEGATE OR PHARMACIST DELEGATE IS**  
6 **COMPETENT IN THE USE OF THE PROGRAM;**

7           **(2) THE PRESCRIBER OR PHARMACIST REMAINS RESPONSIBLE FOR:**

8           **(I) ENSURING THAT ACCESS TO THE PROGRAM BY THE**  
9 **PRESCRIBER DELEGATE OR PHARMACIST DELEGATE IS LIMITED TO PURPOSES**  
10 **AUTHORIZED BY LAW;**

11           **(II) PROTECTING THE CONFIDENTIALITY OF THE**  
12 **PRESCRIPTION MONITORING DATA; AND**

13           **(III) ANY BREACH OF CONFIDENTIALITY BY THE PRESCRIBER**  
14 **DELEGATE OR PHARMACIST DELEGATE; AND**

15           **(3) THE DECISION WHETHER TO PRESCRIBE OR DISPENSE A**  
16 **MONITORED PRESCRIPTION DRUG FOR A PATIENT:**

17           **(I) REMAINS WITH THE PRESCRIBER OR PHARMACIST; AND**

18           **(II) IS REASONABLY INFORMED BY THE PRESCRIPTION**  
19 **MONITORING DATA OBTAINED FROM THE PROGRAM.**

20           **(C) A PRESCRIBER OR PHARMACIST IS NOT REQUIRED TO REQUEST**  
21 **PRESCRIPTION MONITORING DATA FROM THE PROGRAM IF THE OPIOID OR**  
22 **BENZODIAZEPINE IS PRESCRIBED OR DISPENSED TO AN INDIVIDUAL:**

23           **(1) FOR THE TREATMENT OF CANCER-RELATED PAIN;**

24           **(2) IN A GENERAL HOSPICE CARE PROGRAM AS DEFINED IN § 19-901**  
25 **OF THIS ARTICLE;**

26           **(3) DIAGNOSED WITH A TERMINAL ILLNESS;**

27           **(4) RECEIVING TREATMENT IN AN INPATIENT UNIT OF A LICENSED**  
28 **HOSPITAL; OR**

29           **(5) WHO RESIDES IN:**

- 1           **(I) AN ASSISTED LIVING FACILITY;**  
2           **(II) A LONG-TERM CARE FACILITY;**  
3           **(III) A COMPREHENSIVE CARE FACILITY; OR**  
4           **(IV) A DEVELOPMENTAL DISABILITY FACILITY.**

5           **(D) A PRESCRIBER OR PHARMACIST MAY NOT BE REQUIRED TO COMPLY**  
6 **WITH THE PROVISIONS OF THIS SECTION WHEN:**

7           **(1) PRESCRIBING OR DISPENSING AN OPIOID OR BENZODIAZEPINE**  
8 **DRUG THAT HAS BEEN LISTED BY THE SECRETARY UNDER § 21-2A-03(B)(3) OF THIS**  
9 **SUBTITLE AS HAVING A LOW POTENTIAL FOR ABUSE;**

10           **(2) ACCESSING PRESCRIPTION MONITORING DATA WOULD RESULT IN**  
11 **A DELAY IN THE TREATMENT OF A PATIENT THAT WOULD NEGATIVELY IMPACT THE**  
12 **MEDICAL CONDITION OF THE PATIENT;**

13           **(3) ELECTRONIC ACCESS TO PRESCRIPTION MONITORING DATA IS**  
14 **NOT OPERATIONAL AS DETERMINED BY THE DEPARTMENT; OR**

15           **(4) PRESCRIPTION MONITORING DATA CANNOT BE ACCESSED BY THE**  
16 **PRESCRIBER OR PHARMACIST DUE TO A TEMPORARY TECHNOLOGICAL OR**  
17 **ELECTRICAL FAILURE, AS DESCRIBED IN REGULATION.**

18           **(E) IF A PRESCRIBER OR PHARMACIST DOES NOT ACCESS PRESCRIPTION**  
19 **MONITORING DATA UNDER SUBSECTION (D)(2), (3), OR (4) OF THIS SECTION:**

20           **(1) THE PRESCRIBER OR PHARMACIST SHALL USE REASONABLE**  
21 **MEDICAL JUDGMENT IN DETERMINING WHETHER TO PRESCRIBE OR DISPENSE AN**  
22 **OPIOID OR BENZODIAZEPINE; AND**

23           **(2) THE PRESCRIBER SHALL ENTER AN APPROPRIATE RECORD IN**  
24 **THE PATIENT'S MEDICAL CHART, INCLUDING THE REASON WHY PRESCRIPTION**  
25 **MONITORING DATA WAS NOT ACCESSED.**

26 21-2A-05.

27           **(f) The Board shall:**

28           **(3) Provide annually to the Governor and, in accordance with § 2-1246 of**  
29 **the State Government Article, the General Assembly a report that includes:**

1 (i) The number of prescribers **AND PRESCRIBER DELEGATES**  
2 registered with and using the Program;

3 (ii) The number of [dispensers] **PHARMACISTS AND PHARMACIST**  
4 **DELEGATES** registered with and using the Program;

5 21-2A-06.

6 (d) (1) Before the Program discloses information under subsection (b)(3), (4),  
7 (5), [(7), or (8)] **(6), OR (9)** of this section, the technical advisory committee shall:

8 (i) Review the requests for information;

9 (ii) Provide clinical guidance and interpretation of the information  
10 requested to the Secretary to assist in the Secretary's decision on how to respond to a  
11 judicial subpoena, administrative subpoena, or other request; and

12 (iii) Provide clinical guidance and interpretation of the information  
13 requested to the authorized recipient of the information.

14 (2) Notwithstanding paragraph (1) of this subsection, the Program may  
15 disclose information to the authorized administrator of another state's prescription drug  
16 monitoring program for disclosure to the persons listed in subsection (b)(1), (2), and (6) of  
17 this section without the review, clinical guidance, and interpretation of the technical  
18 advisory committee.

19 [(k) Prescription monitoring data may not be used as the basis for imposing  
20 clinical practice standards.]

21 21-2A-07.

22 (b) The purpose of the technical advisory committee is to:

23 (1) Review requests for information from the Program under §  
24 21-2A-06(b)(3), (5), (6), [(8) and] **OR (9)** of this subtitle; and

25 (2) Provide clinical guidance and interpretation to the Program regarding  
26 indications of possible misuse or abuse of a monitored prescription drug under §  
27 21-2A-06(c)(2) of this subtitle.

28 21-2A-08.

29 (b) **[A EXCEPT AS PROVIDED IN § 21-2A-09(B)(3) OF THIS SUBTITLE, A**  
30 **prescriber [or dispenser], PRESCRIBER DELEGATE, PHARMACIST, OR PHARMACIST**

1 **DELEGATE**, acting in good faith, is not subject to liability or disciplinary action arising  
2 solely from:

3 (1) Requesting or receiving, or failing to request or receive, prescription  
4 monitoring data from the Program; or

5 (2) Acting, or failing to act, on the basis of prescription monitoring data  
6 provided by the Program.

7 21-2A-09.

8 (a) A dispenser who knowingly fails to submit prescription monitoring data to the  
9 Program as required under this subtitle shall be subject to a civil penalty not exceeding  
10 \$500 for each failure to submit required information.

11 (b) (1) A person who knowingly discloses, uses, obtains, or attempts to obtain  
12 by fraud or deceit, prescription monitoring data in violation of this subtitle shall be guilty  
13 of a misdemeanor and on conviction is subject to imprisonment not exceeding 1 year or a  
14 fine not exceeding \$10,000 or both.

15 (2) In addition to the penalties under paragraph (1) of this subsection, a  
16 prescriber [or dispenser], **PRESCRIBER DELEGATE, PHARMACIST, OR PHARMACIST**  
17 **DELEGATE**, who knowingly discloses or uses prescription monitoring data in violation of  
18 this subtitle shall be subject to disciplinary action by the appropriate licensing entity.

19 **(3) A PRESCRIBER OR PHARMACIST WHO VIOLATES § 21-2A-04.1 OR**  
20 **§ 21-2A-04.2 OF THIS SUBTITLE SHALL BE SUBJECT TO DISCIPLINARY ACTION BY**  
21 **THE APPROPRIATE LICENSING ENTITY.**

22 ~~[(3)]~~ (4) The release of prescription monitoring data by a prescriber [or  
23 dispenser], **PRESCRIBER DELEGATE, PHARMACIST, OR PHARMACIST DELEGATE** to a  
24 licensed health care professional solely for treatment purposes in a manner otherwise  
25 consistent with State and federal law is not a violation of this subtitle.

26 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect  
27 October 1, 2016.