

Chapter 436

(Senate Bill 13)

AN ACT concerning

Maryland Health Care Commission – Electronic Prescription Records ~~Cost~~
Saving Act of 2018 System – Assessment and Report

FOR the purpose of requiring ~~a dispenser of a prescription drug to submit certain prescription information to a certain health information exchange; requiring certain prescription information to be submitted in a certain manner; prohibiting a certain health information exchange from imposing certain fees or assessments; requiring a certain health information exchange to make certain prescription information available to a health care provider for certain purposes; requiring the Maryland Health Care Commission to adopt certain regulations; requiring that certain regulations include certain provisions; stating the purpose of this Act; defining certain terms~~ the Maryland Health Care Commission, in consultation with interested stakeholders, to assess the benefits and feasibility of developing an electronic system to allow health care providers to access a patient's prescription medication history; requiring the Commission to report its findings to the Governor and the General Assembly on or before a certain date; specifying the intent of the General Assembly; providing for the termination of this Act; and generally relating to an assessment and report by the Maryland Health Care Commission regarding an electronic prescription information and the health information exchange system.

~~BY adding to~~~~Article Health General~~~~Section 19-145~~~~Annotated Code of Maryland~~~~(2015 Replacement Volume and 2017 Supplement)~~

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

~~Article Health General~~~~19-145.~~

~~(A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED:~~

~~(2) (i) "DISPENSE" HAS THE MEANING STATED IN § 12-101 OF THE HEALTH OCCUPATIONS ARTICLE.~~

~~(ii) "DISPENSE" DOES NOT INCLUDE:~~

~~1. DIRECTLY ADMINISTERING A PRESCRIPTION DRUG TO A PATIENT; OR~~

~~2. GIVING OUT PRESCRIPTION DRUG SAMPLES.~~

~~(3) (I) "DISPENSER" MEANS A PERSON AUTHORIZED BY LAW TO DISPENSE A PRESCRIPTION DRUG TO A PATIENT OR THE PATIENT'S AGENT IN THE STATE.~~

~~(II) "DISPENSER" INCLUDES A NONRESIDENT PHARMACY.~~

~~(III) "DISPENSER" DOES NOT INCLUDE A PERSON DESCRIBED IN § 21-2A-01(D)(3) OF THIS ARTICLE.~~

~~(4) "PRESCRIPTION DRUG" HAS THE MEANING STATED IN § 21-201 OF THIS ARTICLE.~~

~~(B) THE PURPOSE OF THIS SECTION IS TO ALLOW A HEALTH CARE PROVIDER TO ACCESS A PATIENT'S MEDICATION HISTORY, INCLUDING MEDICATIONS PRESCRIBED FOR THE PATIENT BY ANOTHER HEALTH CARE PROVIDER.~~

~~(C) (1) AFTER DISPENSING A PRESCRIPTION DRUG, A DISPENSER SHALL SUBMIT PRESCRIPTION INFORMATION TO THE HEALTH INFORMATION EXCHANGE DESIGNATED FOR THE STATE UNDER § 19-143(A) OF THIS SUBTITLE.~~

~~(2) THE PRESCRIPTION INFORMATION SHALL BE SUBMITTED:~~

~~(I) BY ELECTRONIC MEANS;~~

~~(II) WITHOUT UNDULY INCREASING THE WORKLOAD AND EXPENSE ON A DISPENSER;~~

~~(III) IN A MANNER AS COMPATIBLE AS POSSIBLE WITH EXISTING DATA SUBMISSION PRACTICES OF DISPENSERS;~~

~~(IV) USING INFORMATION TECHNOLOGY SOFTWARE PROVIDED TO THE DISPENSER BY THE STATE DESIGNATED HEALTH INFORMATION EXCHANGE; AND~~

~~(V) AS OTHERWISE REQUIRED THROUGH REGULATIONS ADOPTED BY THE COMMISSION.~~

~~(3) THE STATE DESIGNATED HEALTH INFORMATION EXCHANGE MAY NOT IMPOSE ANY FEES OR OTHER ASSESSMENTS TO SUPPORT THE OPERATION OF THE EXCHANGE ON PRESCRIBERS OR DISPENSERS.~~

~~(D) THE STATE DESIGNATED HEALTH INFORMATION EXCHANGE SHALL MAKE PRESCRIPTION INFORMATION SUBMITTED UNDER SUBSECTION (C) OF THIS SECTION AVAILABLE TO A HEALTH CARE PROVIDER FOR PURPOSES OF TREATMENT AND CARE COORDINATION OF A PATIENT.~~

~~(E) THE COMMISSION, IN CONSULTATION WITH STAKEHOLDERS, SHALL ADOPT REGULATIONS TO CARRY OUT THIS SECTION.~~

~~(F) THE REGULATIONS ADOPTED BY THE COMMISSION UNDER SUBSECTION (E) OF THIS SECTION SHALL INCLUDE:~~

~~(1) THE SPECIFIC PRESCRIPTION INFORMATION REQUIRED TO BE SUBMITTED UNDER SUBSECTION (C) OF THIS SECTION;~~

~~(2) THE TIME FRAME FOR SUBMITTING PRESCRIPTION INFORMATION UNDER SUBSECTION (C) OF THIS SECTION;~~

~~(3) THE ELECTRONIC MEANS AND MANNER BY WHICH PRESCRIPTION INFORMATION IS TO BE SUBMITTED UNDER SUBSECTION (C) OF THIS SECTION;~~

~~(4) WHO MAY ACCESS PRESCRIPTION INFORMATION AFTER IT IS SUBMITTED UNDER SUBSECTION (C) OF THIS SECTION;~~

~~(5) PERMISSIBLE USES OF PRESCRIPTION INFORMATION SUBMITTED UNDER THIS SECTION; AND~~

~~(6) PRESCRIPTION INFORMATION SUBMISSION REQUIREMENTS THAT ALIGN WITH THE DATA SUBMISSION REQUIREMENTS ON DISPENSERS OF MONITORED PRESCRIPTION DRUGS UNDER TITLE 21, SUBTITLE 2A OF THIS ARTICLE.~~

(a) The Maryland Health Care Commission shall convene interested stakeholders to assess the benefits and feasibility of developing an electronic system to allow health care providers to access a patient's prescription medication history, including assessing:

(1) whether the health information exchange designated for the State under § 19-143 of the Health – General Article is capable of including a patient's prescription medication history;

(2) the enhancements to the State-designated health information exchange required to ensure that the exchange is able to continue to meet other State mandates, including operating an effective Prescription Drug Monitoring Program;

(3) the resources required for individual health care practitioners, health care facilities, prescription drug dispensers, and pharmacies to provide the information collected in a statewide repository of prescription medication information;

(4) the cost to the State to develop and maintain an electronic prescription medication system and the cost to prescribers to access the system;

(5) the resources required to ensure that health care practitioners and prescription drug dispensers can maximize the benefit of using the system to improve patient care;

(6) the scope of prescription medication information that should be collected in the system, including any specific exemptions;

(7) the scope of health care providers that would report prescription medication information in the system, including any specific exemptions;

(8) the potential for development or use of systems other than the State-designated health information exchange for access to patients' prescription medication history;

(9) the privacy protections required for the system, including the ability of consumers to choose not to share prescription data, to ensure the prescription data is used in a manner that is compliant with State and federal privacy requirements, including 42 U.S.C. § 290dd-2 and 42 C.F.R. Part 2;

(10) the feasibility of ensuring that the data in the system is used only by health care practitioners to coordinate the care and treatment of patients;

(11) the standards for prohibiting the use of the data in the system by a person or an entity other than a health care practitioner, including any exceptions for the use of data with identifying information removed for bona fide research; and

(12) any other matters of interest identified by the Commission or the stakeholders.

(b) On or before January 1, 2020, the Maryland Health Care Commission, in consultation with interested stakeholders, shall report its findings and recommendations to the Governor and, in accordance with § 2-1246 of the State Government Article, the General Assembly.

SECTION 2. AND BE IT FURTHER ENACTED, That it is the intent of the General Assembly that the Maryland Health Care Commission work toward the development of an electronic system within the health information exchange designated for the State under § 19-143 of the Health – General Article for the purpose of providing a health care provider access to a patient’s medication history, including medications prescribed to a patient by another health care provider, to coordinate the care of or provide treatment to the patient.

SECTION ~~2~~ 3. AND BE IT FURTHER ENACTED, That this Act shall take effect ~~October 1, 2018~~ July 1, 2018. It shall remain effective for a period of 2 years and, at the end of June 30, 2020, this Act, with no further action required by the General Assembly, shall be abrogated and of no further force and effect.

Approved by the Governor, May 8, 2018.