

**TERRI L. HILL, M.D.**  
*Legislative District 12*  
Baltimore and Howard Counties



*Annapolis Office*  
The Maryland House of Delegates  
6 Bladen Street, Room 214  
Annapolis, Maryland 21401  
410-841-3378 · 301-858-3378  
800-492-7122 Ext. 3378  
Fax 410-841-3197 · 301-858-3197  
Terri.Hill@house.state.md.us

Health and Government Operations  
Committee

*Subcommittees*

Government Operations  
and Estates and Trusts

Public Health and  
Minority Health Disparities

**THE MARYLAND HOUSE OF DELEGATES**  
ANNAPOLIS, MARYLAND 21401

*District Office*  
410-884-4380  
Fax 410-884-5481

**House Bill 316 - Public Health – Schedule II Controlled Dangerous Substances –  
Partial Filling of Prescriptions**

Chairman Pendergrass, Vice-Chairman Pena-Melnyk and members of the Health and Government Operations Committee,

House Bill 316 allows an authorized dispensing of Schedule II drugs (narcotics and other controlled dangerous substances), on request of the patient, at fewer than the number prescribed, with the remaining portion of the prescription available for dispensing within a thirty days. Although it would be ideal for patients and their prescriber to discuss and agree to the exact number of pills that would be needed and prescribed to address the period of anticipated acute need, for any number of reasons this practice is neither usual nor practical. This bill would allow a patient to receive fewer than the prescribed number of pills without having to be concerned that, if their need proves to be greater than anticipated, they will be required to either seek a new prescription or go without.

In our efforts to decrease prescription drug addiction and overdose trends, we do not want to deny patients the medication they need. We do want to minimize, however, the flow of unused medication. Drug Take Back programs are overflowing with appropriately prescribed, unused medications. This bill addresses a piece of the addiction and overdose problem by giving patients a say in limiting the number of pills in their possession and providing a mechanism for better aligning patient needs with access. This bill does not necessarily address the very real needs of persons with need for long-term schedule II medication, who increasingly face barriers to receiving needed medication because of legislative efforts to fight addiction and overdose. That issue could be addressed by better aligning regulations and practices with current federal law.

Federal allows for partial dispensing of a Schedule II CDS prescription with later dispensing of the balance within a set number of days. The sponsor amendment brings HB316 in line with federal law. Similar legislation has been enacted in other states.

.Although I prefer to restrict patient co-pays to the single co-pay applicable when the full prescription is dispensed at one time, I am sensitive to the cost-sharing issues raised in insurer testimony and open to other amendments. System processes already exists for partial dispensing in cases were the full prescribed amount is no available on site, so it is reasonable to expect that such systems for documenting and tracking could be adapted to the purposes of this bill.

HB 316 puts some decision making power in the patients' hands, and I respectfully request a favorable report, with the offered amendment.

A handwritten signature in black ink, appearing to read "Terri L. Hill", with a stylized flourish at the end.

Terri L. Hill, M.D.