



Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Robert R. Neall, Secretary

March 6, 2020

The Honorable Shane E. Pendergrass, Chair  
House Health and Government Operations Committee  
Room 241, House Office Building  
Annapolis, MD 21401-1991

**RE: HB1486 – Public Health – Non–Controlled Dangerous Substance Prescription Record System Program – Letter of Support with Amendments**

Dear Chair Kelley:

The Maryland Department of Health (Department) respectfully submits this letter of Information for HB1486 – Public Health – Non–Controlled Dangerous Substance Prescription Record System Program.

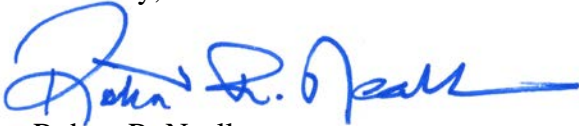
House Bill 1486 establishes a Non-Controlled Substance Prescription Record System based on recommendations from the 2019 report, *House Bill 115 Electronic Prescription Records System*. The Department supports the establishment of a non-controlled substance prescription record system as this aligns with the Maryland Prescription Drug Monitoring Program’s (PDMP, or the Program) goal of supporting health care providers in making informed clinical decisions while providing pharmaceutical care. At present, we do not anticipate impact on the Office of Provider Engagement and Regulation, which administers the PDMP. However, depending on the manner(s) in which the Advisory Council facilitated by the Maryland Health Care Commission (MHCC) determines to implement this program, there may be operational impacts on the PDMP that will need to be mitigated. For example, if the PDMP’s data collection mechanism is used to collect non-controlled dangerous substance (CDS) prescriptions, any custom development to support this program will need to ensure segregation of CDS and non-CDS data collection, error correction, and warehousing; failure to consider these types of requirements will negatively impact the quality of the PDMP’s data and the Program’s ability to meet legislative requirements. The Department assumes these types of considerations will be discussed thoroughly through the Advisory Council’s processes and any potential operational impacts on the PDMP will be addressed. We appreciate inclusion of Department representation on the Advisory Council for this purpose. Additionally, the Department recommends amendments to SB752 to revise the definition of “Dispenser” and membership of the “Advisory Council”.

The Department recommends amending the definition of “Dispenser” in SB752. The current definition of “Dispenser” comes from the statute that establishes the Prescription Drug Monitoring (Program Health General §21-2A-01). This statute reference limits the definition of Dispenser to those who dispense CDS prescriptions and who meet requirements for reporting CDS data to the PDMP, which does not align with the intent of the proposed bill. There are pharmacies and practitioner dispensers who solely dispense non-CDS and CDS dispensers who have legislative and regulatory exemptions from reporting to the PDMP. Adoption of the proposed amendment will ensure practitioners can rely on this system to reflect the full non-CDS prescription history of their patients.

We also recommend changing the composition of the commission to make sure it incorporates every viewpoint necessary to make its work a success. The Department would prefer the Secretary have the flexibility to nominate the best person available to do the Commission’s work, instead of resting that authority with a Deputy Secretary who may not have as complete a view into the appropriate available staff.

I hope this information is useful. If you would like to discuss this further, please contact Director of Governmental Affairs Webster Ye at (410) 260-3190 or [webster.ye@maryland.gov](mailto:webster.ye@maryland.gov).

Sincerely,



Robert R. Neall  
Secretary

AMENDMENTS TO HOUSE BILL 1486  
(First File Reader Bill)

AMENDMENT NO. 1

On page 3, in line 12, strike “**HAS THE MEANING STATED IN §21-2A-01 OF THIS TITLE**” and substitute “**MEANS A PERSON WHO DISPENSES A PRESCRIPTION OR NONPRESCRIPTION DRUG OR DEVICE, AS PROVIDED IN 21-2D-01(E) OF THIS SUBTITLE**”.

AMENDMENT NO. 2

On page 8, strike beginning with “**ONE**” in line 18 down through “**HEALTH**” in line 20, and substitute “**THE SECRETARY, OR HIS DESIGNEE**”.