H-4197.1	

HOUSE BILL 2829

State of Washington 61st Legislature 2010 Regular Session

By Representatives Hinkle, Cody, Morrell, Green, Driscoll, and Clibborn Read first time 01/14/10. Referred to Committee on Health Care & Wellness.

- 1 AN ACT Relating to authorizing a privately funded prescription
- 2 monitoring program; amending RCW 70.225.010, 70.225.020, 70.225.040,
- 3 and 70.225.060; adding new sections to chapter 70.225 RCW; and
- 4 repealing RCW 70.225.030 and 70.225.050.
- 5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 6 **Sec. 1.** RCW 70.225.010 and 2007 c 259 s 42 are each amended to 7 read as follows:
- 8 The definitions in this section apply throughout this chapter 9 unless the context clearly requires otherwise.
- 10 (1) "Controlled substance" has the meaning provided in RCW 11 69.50.101.
- 12 (2) "Department" means the department of health.
- 13 (3) "Patient" means the person or animal who is the ultimate user
- of a drug for whom a prescription is issued or for whom a drug is
- 15 dispensed.
- 16 (4) "Dispenser" means a practitioner or pharmacy that delivers a
- 17 Schedule II, III, IV, or V controlled substance to the ultimate user,
- 18 but does not include:

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- 1 (a) A practitioner or other authorized person who administers, as 2 defined in RCW 69.41.010, a controlled substance; or
 - (b) A licensed wholesale distributor or manufacturer, as defined in chapter 18.64 RCW, of a controlled substance.
 - (5) "Privately funded prescription monitoring program" means a single, statewide program established and funded in the private sector, and approved by the secretary of the department, to monitor the prescribing and dispensing of all Schedule II, III, IV, and V controlled substances and additional drugs identified by the board of pharmacy as demonstrating potential for abuse by all professionals licensed to prescribe or dispense such substances in this state.
 - (6) "Secretary" means the secretary of the department.

- <u>NEW SECTION.</u> **Sec. 2.** (1) Between January 1st and March 30th of each calendar year, proposals for a privately funded prescription monitoring program may be submitted to the secretary.
- (2) By no later than July 1st of each calendar year, the secretary must complete review of proposals for privately funded prescription monitoring programs, if any, submitted to the department by March 30th of that year, and must complete a review of the privately funded prescription monitoring program currently in effect, if any. Within thirty days of completing the review, the secretary may select the qualified privately funded prescription monitoring program which will be in place for the succeeding twelve months. At any time, in the event a privately funded prescription monitoring program ceases to operate for any reason, the secretary has the authority to authorize another qualified privately funded prescription monitoring program to replace it.
- (3) The secretary may choose only one privately funded prescription monitoring program to operate in the state at any given time.
 - (4) The secretary has the authority to:
- 31 (a) Select none of the proposed privately funded prescription 32 monitoring programs;
- 33 (b) Remove the privately funded prescription monitoring program 34 currently in place;
- (c) Select a new privately funded prescription monitoring program;
 or

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1 (d) Renew the authorization for the privately funded prescription 2 monitoring program currently in place.

- (5) Any privately funded prescription monitoring program that is approved by the secretary must meet the following requirements:
- (a) Demonstrate to the secretary that it has funding adequate to support its operation. This subsection shall not prohibit the privately funded prescription monitoring program from accepting state funding, funds from federal or private grants, or donations.
- (b) Demonstrate to the secretary that it possesses electronic infrastructure capable of receiving, storing, and retrieving data of the type and magnitude contemplated by the operation of this chapter, and allow real-time access, to the extent real-time access is technologically feasible, to that data; and
- (c) Demonstrate to the secretary that its electronic infrastructure, data storage, and computer software is capable of exchanging information of a type and in a manner that is compatible with similar prescription monitoring programs in other states.
- (6) The secretary may withdraw the department's authorization of the privately funded prescription monitoring program if it fails to meet all of the requirements of this section.
- (7) This chapter does not require the secretary to select or continue authorizing any privately funded prescription monitoring program.
- **Sec. 3.** RCW 70.225.020 and 2007 c 259 s 43 are each amended to read as follows:
 - (1) When ((sufficient funding is provided for such purpose through federal or private grants, or is appropriated by the legislature, the department shall establish and maintain a prescription monitoring program to monitor the prescribing and dispensing of all Schedules II, III, IV, and V controlled substances and any additional drugs identified by the board of pharmacy as demonstrating a potential for abuse by all professionals licensed to prescribe or dispense such substances in this state. The program shall be designed to improve health care quality and effectiveness by reducing abuse of controlled substances, reducing duplicative prescribing and overprescribing of controlled substances, and improving controlled substance prescribing practices with the intent of eventually establishing an electronic

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- database available in real time to dispensers and prescribers of control [controlled] substances. As much as possible, the department should establish a common database with other states)) the secretary has approved a privately funded prescription monitoring program, all dispensers, except as provided in subsection (4) of this section, must comply with the selected program's instructions for connecting to its network and begin transmitting all required data when its connection with the program is confirmed.
 - (2) Except as provided in subsection (4) of this section, each dispenser shall submit to the ((department)) privately funded prescription monitoring program by electronic means information regarding each prescription dispensed for a drug included under subsection (1) of this section. Drug prescriptions for more than immediate one day use should be reported. The information submitted for each prescription shall include, but not be limited to:
 - (a) Patient identifier;
 - (b) Drug dispensed;
 - (c) Date of dispensing;
 - (d) Quantity dispensed;
- 20 (e) Prescriber; and
- 21 (f) Dispenser.

- (3) Each dispenser shall submit the information in accordance with transmission methods established by the ((department)) privately funded prescription monitoring program.
 - (4) The data submission requirements of this section do not apply to:
 - (a) Medications provided to patients receiving inpatient services provided at hospitals licensed under chapter 70.41 RCW; or patients of such hospitals receiving services at the clinics, day surgery areas, or other settings within the hospital's license where the medications are administered in single doses; or
 - (b) Pharmacies operated by the department of corrections for the purpose of providing medications to offenders in department of corrections institutions who are receiving pharmaceutical services from a department of corrections pharmacy, except that the department of corrections must submit data related to each offender's current prescriptions for controlled substances upon the offender's release from a department of corrections institution.

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- (((5) The department shall seek federal grants to support the
 activities described in chapter 259, Laws of 2007. The department may
 not require a practitioner or a pharmacist to pay a fee or tax
 specifically dedicated to the operation of the system.))
- **Sec. 4.** RCW 70.225.040 and 2007 c 259 s 45 are each amended to 6 read as follows:

- (1) Prescription information submitted to the ((department)) privately funded prescription monitoring program shall be confidential, in compliance with chapter 70.02 RCW and federal health care information privacy requirements and not subject to disclosure, except as provided in subsections (3) and (4) of this section.
- (2) The department shall ((maintain)) verify that the privately funded prescription monitoring program has procedures in place to ensure that the privacy and confidentiality of patients and patient information collected, recorded, transmitted, and maintained is not disclosed to persons except as in subsections (3) and (4) of this section.
- (3) The ((department may)) privately funded prescription monitoring program must provide data in the prescription monitoring program to the following persons:
 - (a) Persons authorized to prescribe or dispense controlled substances, for the purpose of providing medical or pharmaceutical care for their patients;
 - (b) An individual who requests the individual's own prescription monitoring information;
 - (c) ((Health professional licensing, certification, or regulatory agency or entity;
 - (d))) Appropriate local, state, and federal law enforcement or prosecutorial officials who are engaged in a bona fide specific investigation involving a designated person, and who have appropriate warrants or court orders permitting such disclosure;
- (((e))) <u>(d)</u> Authorized practitioners of the department of social and health services regarding medicaid program recipients;
- $((\frac{f}{f}))$ <u>(e)</u> The director or director's designee within the department of labor and industries regarding workers' compensation claimants;

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1 $((\frac{g}{g}))$ (f) The director or the director's designee within the 2 department of corrections regarding offenders committed to the 3 department of corrections; and

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- (((h))) <u>(q)</u> Other entities under grand jury subpoena or court order((; and
- (i) Personnel of the department for purposes of administration and enforcement of this chapter or chapter 69.50 RCW)).
- (4) The ((department)) privately funded prescription monitoring program may provide data to public or private entities for statistical, research, or educational purposes after removing information that could be used to identify individual patients, dispensers, prescribers, and persons who received prescriptions from dispensers.
- (((5) A dispenser or practitioner acting in good faith is immune from any civil, criminal, or administrative liability that might otherwise be incurred or imposed for requesting, receiving, or using information from the program.))
- NEW SECTION. Sec. 5. A dispenser or practitioner acting in good faith is immune from any civil, criminal, or administrative liability that might otherwise be incurred or imposed for requesting, receiving, or using information from the program.
- 21 **Sec. 6.** RCW 70.225.060 and 2007 c 259 s 48 are each amended to 22 read as follows:
 - (1) A dispenser who knowingly fails to submit prescription monitoring information to the ((department)) privately funded prescription monitoring program as required by this chapter or knowingly submits incorrect prescription information is subject to disciplinary action under chapter 18.130 RCW.
 - (2) A person authorized to have prescription monitoring information under this chapter who knowingly discloses such information in violation of this chapter is subject to civil penalty, as determined by the secretary by rule.
- 32 (3) A person authorized to have prescription monitoring information 33 under this chapter who uses such information in a manner or for a 34 purpose in violation of this chapter is subject to civil penalty, as 35 determined by the secretary by rule.

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- 1 (4) In accordance with chapter 70.02 RCW and federal health care 2 information privacy requirements, any physician or pharmacist 3 authorized to access a patient's prescription monitoring may discuss or 4 release that information to other health care providers involved with 5 the patient in order to provide safe and appropriate care coordination.
- 6 <u>NEW SECTION.</u> **Sec. 7.** The following acts or parts of acts are each 7 repealed:
- 8 (1) RCW 70.225.030 (Enhancement of program--Feasibility study) and 9 2007 c 259 s 44; and
- 10 (2) RCW 70.225.050 (Department may contract for operation of 11 program) and 2007 c 259 s 46.
- 12 <u>NEW SECTION.</u> **Sec. 8.** Sections 2 and 5 of this act are each added 13 to chapter 70.225 RCW.

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