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**Health Care & Wellness Committee**

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**HB 2325**

**Brief Description:** Concerning the prescription drug monitoring program.

**Sponsors:** Representatives Riccelli, Haler, Ryu, Pellicciotti, Harris, Macri, Tharinger, Valdez, Frame, Jinkins, Doglio, Pollet, Stonier, Appleton and Gregerson; by request of Attorney General.

**Brief Summary of Bill**

- Requires practitioners prescribing an opiate or benzodiazepine to review the patient's controlled substance history in the prescription monitoring program.
- Exempts practitioners from the requirement to consult the prescription monitoring program if the medications are for inpatient use or to provide emergency care, or the prescription monitoring program cannot be accessed

**Hearing Date:** 1/12/18

**Staff:** Kim Weidenaar (786-7120).

**Background:**

The Department of Health (DOH) maintains a prescription monitoring program (PMP) to monitor the prescribing and dispensing of controlled substances and other drugs that demonstrate a potential for abuse. Each time one of these drugs is dispensed, the dispenser must electronically submit the following information to the PMP:

- a patient identifier;
- the drug dispensed;
- the dispensing date;
- the quantity dispensed;
- the prescriber; and
- the dispenser.

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*This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.*

Prescribers are not required to query the PMP prior to prescribing a controlled substance. Data in the PMP may be accessed by:

- a person authorized to prescribe or dispense a controlled substance or legend drug for the purpose of providing medical or pharmaceutical care for his or her patients;
- a person requesting his or her own PMP information;
- a health professional licensing, certification, or regulatory agency;
- an appropriate law enforcement or prosecutorial official;
- an authorized practitioner of the Department of Social and Health Services or the Health Care Authority regarding Medicaid recipients;
- the Director of the Department of Labor and Industries (or designee) regarding workers' compensation claimants;
- the Secretary of the Department of Corrections (or designee) regarding offenders in the custody of the Department of Corrections;
- an entity under grand jury subpoena or court order;
- personnel of the DOH for administration of the PMP or the Uniform Controlled Substances Act;
- certain medical test sites licensed by the DOH;
- a health care facility or entity for the purpose of providing medical or pharmaceutical care to the patients of the facility or entity if the facility or entity is licensed by the DOH or operated by the federal government or federally recognized Indian tribe, and the facility or entity is a trading partner with the Health Information Exchange (HIE);
- a health care provider group of five or more providers for the purpose of providing medical or pharmaceutical care to the patients of the provider group if all of the providers in the group are licensed and the provider group is a trading partner with the HIE;
- the local health officer of a local health jurisdiction for the purposes of patient follow-up and care coordination following a controlled substance overdose event; or
- the coordinated care electronic tracking program, often referred to as the seven best practices in emergency medicine.

A dispenser or practitioner acting in good faith is immune from civil, criminal, or administrative liability for requesting, receiving, or using information from the PMP.

### **Summary of Bill:**

Prior to issuing a prescription for an opiate or benzodiazepine, a health care practitioner must review the patient's controlled substance history in the prescription monitoring program (PMP). A practitioner is defined to include physicians, osteopathic physicians, dentists, podiatric physicians, physician assistants and osteopathic physician assistants that are approved to prescribe controlled substances, and advanced registered nurse practitioners licensed to prescribe controlled substances.

In addition to reviewing a patient's controlled substance history in the PMP before issuing a prescription for an opiate or benzodiazepine, a practitioner must document in the patient's chart the review of the PMP. Practitioners are not required to consult the PMP if:

- the medications are administered to a patient receiving inpatient services at a hospital;
- the medications are provided to patients receiving services at hospital clinics, day surgery areas, or other settings within the hospital's license when administered to the patient in that setting;

- medications administered to offenders in Department of Corrections institutions;
- when providing emergency care and the practitioner determines delaying care to view the patient's controlled substance history will adversely affect the patient's outcome; and
- when the PMP cannot be accessed due to technological or electrical failure.

If the practitioner does not review the patient's history in the PMP, the practitioner must document why the review was not performed, including the specific exception.

**Appropriation:** None.

**Fiscal Note:** Requested on January 3, 2018.

**Effective Date:** The bill takes effect 90 days after adjournment of the session in which the bill is passed.