

HCS HB 130 -- PRESCRIPTION DRUG MONITORING PROGRAM

SPONSOR: Rehder

COMMITTEE ACTIONS: Voted "Do Pass with Amendments" by the Standing Committee on Health Insurance by a vote of 12 to 0. Voted "Do Pass with HCS" by the Select Committee on Insurance by a vote of 11 to 0.

This bill establishes the Prescription Drug Monitoring Program Act. In its main provisions, the bill:

- (1) Requires the Department of Health and Senior Services to establish and maintain a program to monitor the prescribing and dispensing of all Schedule II through Schedule IV controlled substances by all licensed professionals who prescribe or dispense these substances in Missouri. All funding for the program must be from gifts, grants, and donations;
- (2) Requires each dispenser to electronically submit specified information to the department for each prescription in accordance with transmission standards established by the American Society for Automation in Pharmacy, or any successor organization, and to report the data within seven days;
- (3) Allows the department to issue a waiver to a dispenser who is unable to submit the required information electronically. If a waiver is obtained, a dispenser can submit the required information by paper form or other means if all the required information is submitted in the alternative format. The department may grant an extension to a dispenser who is temporarily unable to electronically submit the information due to unforeseen circumstances;
- (4) Requires the department to reimburse each dispenser for the fees and other direct costs of transmitting the required information;
- (5) Requires all submitted prescription information to be confidential and not subject to public disclosure under the Open Meetings and Records Law, commonly known as the Sunshine Law, with specified exceptions. The department must review the dispensation information and, if there is reasonable cause to believe a violation of law or breach of professional standards may have occurred, must notify the appropriate law enforcement or professional regulatory entity and provide dispensation information required for an investigation. A person authorized to have dispensation monitoring information who knowingly discloses the information or who uses the information in a manner and for a

purpose in violation of these provisions will be guilty of a class A misdemeanor;

(6) Requires the department to maintain a registry of persons who it has reasonable cause to believe may have violated the law or been in breach of professional standards. Any person identified must remain on the registry for a minimum of three years;

(7) Allows the department to release non-personal, general information for statistical, educational, or research purposes after removing any identifying information;

(8) Authorizes the department to contract with any other agency of this state or any other state with a private vendor or any state government that currently runs a prescription monitoring program;

(9) Specifies that a dispenser who knowingly fails to submit required dispensation monitoring information to the department or knowingly submits incorrect dispensation information will be subject to an administrative penalty in the amount of \$1,000 for each violation; and

(10) Requires the department to create and implement specified educational courses regarding the provisions of the act and, when appropriate, to work with associations for impaired professionals to ensure intervention, treatment, and ongoing monitoring and follow up and encourage individual patients who are identified and who have become addicted to substances monitored by the program to receive addiction treatment.

PROPOSERS: Supporters say that the bill protects patients by providing a mechanism in which medical professionals and pharmacists can identify if an individual is abusing prescription medication and prevents motor vehicle accidents caused by an operator under the influence of a prescription medication. The bill ensures honesty and openness between medical professionals and patients and helps pain management programs to better treat patients. Prescribers are the first line of defense against prescription controlled substance abuse and prescription medication abuse is a huge liability for employers, families, and communities in general.

Testifying for the bill were Representative Rehder; John L. Eadie; E.P. Barrette, MD, FACP; Missouri Hospital Association; Missouri Biotechnology Association; Missouri Association of Rural Health Clinics; Missouri Nurses Association; Psychiatric Association; Missouri College of Emergency Medicine; Missouri Sheriff's Association; Department of Mental Health; Missouri Society Of Interventional Pain Physicians; SSM Health Care; Matthew Cabe; and

Mallinckrodt LLC; Missouri Chamber of Commerce; United Health Group; Missouri State Medical Association; Missouri Pharmacy Association; Missouri Retailers Association; Missouri Grocers Association; Missouri Police Chiefs Association; Missouri Association of Osteopathic Physicians And Surgeons; Missouri Academy of Family Physicians; St. Louis Area Business Health Coalition; Shanna Dewater; Christy Mercer; Jeff Rolland; Bob Twillman, PhD, American Academy of Pain Management; American Insurance Association; Missouri Insurance Coalition; and State Farm Insurance Companies.

OPPONENTS: There was no opposition voiced to the committee.