

1st Sub. H.B. 119

CONTROLLED SUBSTANCE DATABASE AMENDMENTS

HOUSE FLOOR AMENDMENTS

AMENDMENT 1

FEBRUARY 5, 2008 2:10 PM

Representative **Bradley M. Daw** proposes the following amendments:

1. *Page 1, Line 15:*

- 15 ▶ defines terms;
 ▶ provides for education of the public regarding the controlled substance database;

2. *Page 1, Line 24:*

- 24 information by pharmacies, pharmaceutical facilities, and ~~{-physicians-}~~ prescribing practitioners ;

3. *Page 2, Lines 27 through 29:*

- 27 ▶ requires the Division of Occupational and Professional Licensing to report on the
28 pilot program and the advisability and cost of implementing the pilot program on a
29 statewide basis and the use of the controlled substance database by prescribing practitioners ;

4. *Page 2, Lines 36 through 38:*

- 36 ▶ \$175,000 as an ongoing appropriation from the General Fund, for ~~{-the-}~~ fiscal year
37 2008-09, to the Division of Occupational and Professional Licensing; and
38 ▶ \$650,000 from the General Fund, for ~~{-the-}~~ fiscal year 2008-09 only, to the Division of

5. *Page 2, Line 43:*

- 43 AMENDS:
 = 26-1-36, as enacted by Laws of Utah 2007, Chapter 200

6. *Page 2, Line 48:*

- 48 *Be it enacted by the Legislature of the state of Utah:*
 = Section 1. Section 26-1-36 is amended to read:
 26-1-36. Duty to establish program to reduce deaths and other harm from prescription opiates used for chronic noncancer pain.

(1) As used in this section, "opiate" means any drug or other substance having an addiction-forming or addiction-sustaining liability similar to morphine or being capable of conversion into a drug having addiction-forming or addiction-sustaining liability.

(2) In addition to the duties listed in Section 26-1-30, the department shall develop and implement a two-year program in coordination with the Division of Professional Licensing, the Utah Labor Commission, and

the Utah attorney general, to:

(a) investigate the causes of and risk factors for death and nonfatal complications of prescription opiate use and misuse in Utah for chronic pain by utilizing the Utah Controlled Substance Database created in Section 58-37-7.5;

(b) study the risks, warning signs, and solutions to the risks associated with prescription opiate medications for chronic pain, including risks and prevention of misuse and diversion of those medications;
{-and-}

(c) provide education to health care providers, patients, insurers, and the general public on the appropriate management of chronic pain, including the effective use of medical treatment and quality care guidelines that are scientifically based and peer reviewed {-} ; and

(d) educate the public regarding:

(i) the purpose of the Controlled Substance Database established in Section 58-37-7.5; and

(ii) the requirement that a person's name and prescription information be recorded on the database when the person fills a prescription for a schedule II, III, IV, or V controlled substance.

(3) The department shall report on the development and implementation of the program required in Subsection (2) to the legislative Health and Human Services Interim Committee and the legislative Business and Labor Interim Committee no later than the November interim meetings in 2007 and 2008. Each report shall include:

(a) recommendations on:

(i) use of the Utah Controlled Substance Database created in Section 58-37-7.5 to identify and prevent:

(A) misuse of opiates;

(B) inappropriate prescribing; and

(C) adverse outcomes of prescription opiate medications;

(ii) interventions to prevent the diversion of prescription opiate medications; and

(iii) medical treatment and quality care guidelines that are:

(A) scientifically based; and

(B) peer reviewed; and

(b) (i) a measure of results against expectations under the program as of the date of the report; and

(ii) an analysis of the application of the program, use of the appropriated funds, and the impact and results of the use of the funds.

(4) The report provided under Subsection (3) for the 2008 interim shall also provide a final cumulative analysis of the measurable effectiveness of the program implemented under this section.

7. Page 7, Line 205:

205 58-37-7.8. Pilot program for ~~{-real time-}~~ real-time reporting for controlled substance database

8. Page 8, Line 215:

215 data from, the database by a pharmacy, a pharmaceutical facility, or a ~~{-physician-}~~ prescribing
practitioner beginning on

9. Page 8, Line 225:

225 (5) (a) All provisions and requirements of the ~~{state-wide}~~ statewide database, described in

10. Page 9, Lines 246 through 249:

246 (b) the progress made by the division in implementing the pilot program on a statewide
247 basis; ~~{and}~~

248 (c) the advisability of, and projected costs of, implementing the pilot program on a

249 statewide basis ~~{.}~~ ; and

(d) the use of the database by prescribing practitioners.

11. Page 9, Line 260:

260 (i) except as provided in Subsection (11)(d), at the expense of the pharmacy or pharmaceutical
facility;

12. Page 9, Lines 270 through 272:

270 (i) ~~{is secure}~~ complies with the security standards described in 45 CFR Parts 160, 162, and
164, Health Insurance Reform: Security Standards ~~{; and}~~

271 (ii) does not interfere with the proper functioning of the pharmacy's or pharmaceutical
272 facility's software or computer system ~~{.}~~ ; and

(iii) in order to minimize changes in existing protocols, provides, to the extent practicable, for the
transmission of data in the same manner that pharmacies currently transmit information to insurance
companies.

(d) The division may, within funds appropriated by the Legislature for this purpose, reimburse a
pharmacy for all or part of the costs of the in-house programing described in Subsection (11)(b), if:

(i) the pharmacy requests the reimbursement, in writing;

(ii) the pharmacy provides proof of the costs for the in-house programming to the division;

(iii) the pharmacy requests the reimbursement prior to a deadline established by the
division; and

(iv) except as provided in Subsection (11)(e), the division pays an equal reimbursement amount to
each pharmacy that complies with Subsections (11)(d)(i) through (iii).

(e) The division may reimburse a pharmacy described in Subsection (11)(d)(iv) for an amount
that is less than the reimbursement paid to other pharmacies described in Subsection (11)(d)(iv), if:

(i) the proof of costs for in-house programming provided by the pharmacy establishes a cost less
than the amount reimbursed to the other pharmacies; and

(ii) the amount reimbursed to the pharmacy is equal to the the amount established by the proof
of costs for in-house programming submitted by the pharmacy.

13. Page 10, Lines 274 through 282:

274 (1) There is appropriated:
275 ~~{(1)}~~ (a) as an ongoing appropriation, subject to future budget constraints, \$175,000 from
276 the General Fund for the fiscal year 2008-09, to the Division of Occupational and Professional
277 Licensing to maintain and operate the controlled substance database; and
278 ~~{(2)}~~ (b) \$650,000 from the General Fund, for the fiscal year 2008-09 only, to the Division
279 of Occupational and Professional Licensing to :
280 (i) implement and operate the pilot program
described in this bill ; and
(ii) if any of the funds described in this Subsection (1)(b) are available after paying the
costs to implement and operate the pilot program under Subsection (1)(b)(i), reimburse a pharmacy for
the costs of in-house programming, in accordance with Subsection 58-37-7.8(11)(d) ;
281 ~~{(3)}~~ (2) The \$650,000 appropriated from the General Fund, under Subsection (2), shall be
282 nonlapsing.