

# H.B. 15

## CONTROLLED SUBSTANCE AMENDMENTS

Representative **Raymond P. Ward** proposes the following amendments:

1. *Page 1, Line 16:*

16 substances after a surgery {~~-~~} ; and

► requires a practitioner to check the controlled substance database and consult with other practitioners when issuing a long-term prescription for an opiate or a benzodiazepine under certain circumstances.

2. *Page 12, Line 353:*

353 a controlled substance listed in Section 58-37-4.2.

(11) (a) As used in this Subsection (11):

(i) "High risk prescription" means a prescription for an opiate or a benzodiazepine that is written to continue for longer than 30 consecutive days.

(ii) "Database" means the controlled substance database created in Section 58-37f-201.

(b) A practitioner who issues a high risk prescription to a patient shall, before issuing the high risk prescription to the patient, verify in the database that the patient does not have a high risk prescription from a different practitioner that is currently active.

(c) If the database shows that the patient has received a high risk prescription from a different practitioner that is currently active, the practitioner may not issue a high risk prescription to the patient unless the practitioner:

(i) contacts and consults with each practitioner who issued a high risk prescription that is currently active to the patient;

(ii) documents in the patient's medical record that the practitioner made contact with each practitioner in accordance with Subsection (11)(c)(i); and

(iii) documents in the patient's medical record the reason why the practitioner believes that the patient needs multiple high risk prescriptions from different practitioners.

(d) Failure to comply with the requirements in this Subsection (11) is unprofessional conduct.