LEGISLATIVE ACTION Senate House Comm: RCS 04/17/2017

The Committee on Governmental Oversight and Accountability (Clemens) recommended the following:

Senate Amendment (with title amendment)

3 Delete lines 20 - 120

and insert:

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Section 1. The Legislature finds that the road to drug addiction may begin as early as 3 days after the initiation of opioid treatment for acute pain. Because of the potentially devastating effects of such addiction, the Legislature also finds that awareness of this potentially life-threatening problem must be raised among Florida's physicians. The

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Department of Health is directed to include as part of a physician's continuing medical education requirements information on the risks of opioid addiction following even brief periods of treatment in the management of acute pain.

Section 2. Subsection (4), paragraph (g) of subsection (5), and paragraphs (a) and (b) of subsection (7) of section 893.055, Florida Statutes, are amended to read:

893.055 Prescription drug monitoring program. -

- (4) Each time a controlled substance is dispensed to an individual, the controlled substance shall be reported to the department through the system as soon thereafter as possible, but no later than the close of the next business day not more than 7 days after the day date the controlled substance is dispensed unless an extension is approved by the department for cause as determined by rule. A dispenser must meet the reporting requirements of this section by submitting via the departmentapproved electronic system providing the required information concerning each controlled substance that it dispensed in a department-approved, secure methodology and format. Such approved formats may include, but are not limited to, submission via the Internet, on a disc, or by use of regular mail.
- (5) When the following acts of dispensing or administering occur, the following are exempt from reporting under this section for that specific act of dispensing or administration:
- (g) A rehabilitative hospital, assisted living facility, or nursing home dispensing a certain dosage of a controlled substance, as needed, to a patient while the patient is present and receiving care as ordered by the patient's treating physician.

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- (7)(a) A practitioner or pharmacist who dispenses a controlled substance must submit the information required by this section in an electronic or other method in an ASAP format approved by rule of the department unless otherwise provided in this section. The cost to the dispenser in submitting the information required by this section may not be material or extraordinary. Costs not considered to be material or extraordinary include, but are not limited to, regular postage, electronic media, regular electronic mail, and facsimile charges.
- (b) A pharmacy, prescriber, or dispenser, or the designee of a pharmacy, prescriber, or dispenser, shall have access to information in the prescription drug monitoring program's database which relates to a patient of that pharmacy, prescriber, or dispenser in a manner established by the department as needed for the purpose of reviewing the patient's controlled substance prescription history. An employee of the United States Department of Veterans Affairs who provides health care services pursuant to such employment and has the authority to prescribe controlled substances shall have access to the information in the program's database in a manner established by the department. Such access is limited to the information that relates to a patient of such employee and may be accessed only for the purpose of reviewing the patient's controlled substance prescription history. Other access to the program's database shall be limited to the program's manager and to the designated program and support staff, who may act only at the direction of the program manager or, in the absence of the program manager, as authorized. Access by the program manager or such designated



staff is for prescription drug program management only or for management of the program's database and its system in support of the requirements of this section and in furtherance of the prescription drug monitoring program. Confidential and exempt information in the database shall be released only as provided in paragraph (c) and s. 893.0551. The program manager, designated program and support staff who act at the direction of or in the absence of the program manager, and any individual who has similar access regarding the management of the database from the prescription drug monitoring program shall submit fingerprints to the department for background screening. The department shall follow the procedure established by the Department of Law Enforcement to request a statewide criminal history record check and to request that the Department of Law Enforcement forward the fingerprints to the Federal Bureau of Investigation for a national criminal history record check. Section 3. The requirement in s. 893.055(4), Florida Statutes, as amended by this act, that the dispensing of a controlled substance be reported to the Department of Health no later than the next business day shall take effect January 1, 2018. ======= T I T L E A M E N D M E N T ========= And the title is amended as follows: Delete lines 3 - 15

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and insert:

providing legislative findings; directing the Department of Health to include information on the risks of opioid addiction as part of a physician's



continuing medical education requirements; amending s .
893.055, F.S.; revising requirements for reporting the
dispensing of controlled substances; limiting an
exception to reporting requirements for certain
facilities that dispense controlled substances;
authorizing certain employees of the United States
Department of Veterans Affairs access to certain
information in the prescription drug monitoring
program's database; specifying when a revised
reporting requirement takes effect;