The Florida Senate HOUSE MESSAGE SUMMARY

Prepared By: The Professional Staff of the Committee on Health Policy

[2018h00021.hms]

BILL: CS/CS/HB 21 (CS/SB 8)

INTRODUCER: Health and Human Services Committee; Health Quality Subcommittee; Rep.

Boyd (Health Policy Committee and Senator Benacquisto)

SUBJECT: Controlled Substances

DATE: March 9, 2018

I.Amendments Contained in Message:

House Amendment 1 – 829389 to Senate Amendment 1 – 872398 (body with title)

House Amendment 2 – 165513 to Senate Amendment 1 – 872398 (body with title)

House Amendment 3 – 985559 to Senate Amendment 1 – 872398 (body)

II.Summary of Amendments Contained in Message:

House Amendment 1 removes the restriction on requiring prior authorization for medication-assisted treatment (MAT) that was included in the Senate amendment in ss. 409.967 and 627.42392, F.S.

House Amendment 2 authorizes an employee of the United State Department of Veterans Affairs, the United States Department of Defense, or the Indian Health Service who provides health care services pursuant to that employment, who dispenses controlled substances to access the Prescription Drug Monitoring Program (PDMP) system. This is in addition to the authority granted in the Senate amendment to similarly employed persons who have authority to prescribe controlled substances.

This amendment also reinstates the House language that requires the Department of Health to issue a nondisciplinary citation to any prescriber or dispenser who fails to consult the PDMP system for the first offense and eliminates the requirement for the first offense to be referred to the regulatory board for disciplinary action.

House Amendment 3

The amendment removes appropriations language specifying amounts to be spent on specific drugs by the Department of Children and Families (DCF) and by the Office of State Court Administrator (OSCA).

The amendment increases the nonrecurring appropriation to the DCF by \$172 (to \$27,035,532) and specifies that the appropriation is for the expenditure of funds related to the second year of the State Targeted Response to the Opioid Crisis grant.

The amendment decreases the recurring appropriation to the DCF by \$893,089 (to \$14,626,911) and requires that the appropriation be used by the DCF for community-based services to address the opioid crisis including, but not limited to, outreach, addiction, treatment, and recovery support services. The amendment specifies that the appropriation must be used to expand capacity to increase access to, and reduce waitlists for, treatment; increase efforts to effectively engage, and retain in treatment, youth, pregnant women, high-risk populations, and high utilizers of acute care services; and further develop a recovery-based model of care.

The amendment also specifies that the appropriation to the OSCA is to be used for MAT.