HOUSE OF REPRESENTATIVES FINAL BILL ANALYSIS

BILL #:	5203	FINAL HOUSE FLOOR ACTION:			
SUBJECT/SHORT TITLE	Prescription Drug Monitoring Program	108	Y's	2	N's
SPONSOR(S):	Health Care Appropriations Subcommittee, Brodeur	GOVERNOR'S ACTION:			Approved
COMPANION BILLS:					

SUMMARY ANALYSIS

HB 5203 passed both chambers on May 8, 2017.

The bill conforms statutes to the funding decisions related to the Prescription Drug Monitoring Program included in the General Appropriations Act (GAA) for Fiscal Year 2017-2018.

Prescription Drug Monitoring Programs (PDMPs) are state-run electronic databases used to track the prescribing and dispensing of certain controlled prescription drugs to patients. PDMPs are designed to monitor this information for suspected abuse or diversion of controlled prescription drugs and provide prescribers and pharmacists with critical information regarding a patient's controlled substance prescription history. As of December 19, 2014, 49 states either had an operational PDMP database or had adopted legislation authorizing the creation of one.

In 2009, the Legislature created the Prescription Drug Monitoring Program (PDMP) within the Department of Health (DOH). The PDMP employs a database to monitor the prescribing and dispensing of certain controlled substances. Dispensers of controlled substances listed in Schedule II, III, or IV must report certain information to the PDMP database, including the name of the prescriber, the date the prescription is filled and dispensed, and the name, address, and date of birth of the person to whom the controlled substance is dispensed.

Current law requires that all costs incurred by the DOH in administering the PDMP shall be funded through federal grants or private funding applied for or received by the state. However, the 2015-2016 and 2016-2017 GAA implementing legislation authorized the use of state funds for administering the PDMP. The 2015-2016 GAA appropriated \$500,000 in recurring General Revenue to the DOH to implement the PDMP.

The bill permanently authorizes the DOH to use state funds to administer the PDMP to reflect the GAA for the 2017-2018 Fiscal Year.

The bill was approved by the Governor on June 26, 2017, ch. 2017-191, L.O.F., and will become effective on July 1, 2017.

I. SUBSTANTIVE INFORMATION

A. EFFECT OF CHANGES:

Present Situation

Prescription Drug Monitoring Program

Prescription Drug Monitoring Programs (PDMPs) are state-run electronic databases used to track the prescribing and dispensing of certain controlled prescription drugs to patients.¹ PDMPs are designed to monitor this information for suspected abuse or diversion of controlled prescription drugs and provide prescribers and pharmacists with critical information regarding a patient's controlled substance prescription history.² As of December 19, 2014, 49 states either had an operational PDMP database or had adopted legislation authorizing the creation of one.³

Chapter 2009-197, Laws of Florida, established Florida's PDMP within the Department of Health (DOH), and is codified in s. 893.055, F.S. The PDMP uses an electronic database system to monitor the prescribing and dispensing of certain controlled substances.⁴ The PDMP database became operational in September of 2011, when it began receiving prescription data from pharmacies and dispensing practitioners.⁵

Florida's PDMP database is known as Electronic-Florida Online Reporting of Controlled Substances Evaluation (E-FORCSE).⁶

Funding the Prescription Drug Monitoring Program

Section 893.055(10), F.S. requires that all costs incurred by the DOH in administering the PDMP shall be funded through federal grants or private funding applied for or received by the state.

Section 893.055(11), F.S. provides the DOH may establish a direct-support organization to provide assistance, funding, and promotional support for the activities authorized for the PDMP. Thus, in 2010, the Florida PDMP Foundation (Foundation) was established.

Through June 2016, the Foundation had assets of over \$1.5 million in private and corporate contributions. Of these funds, \$1.4 million are currently being invested in Wells Fargo Bank purchased certificates of deposit and bank money market accounts to provide future funding when needed to continue E-FORCSE operations. These funds would be used in the event General Revenue funds currently supporting the program are discontinued. As of December 1, 2016, the Foundation has provided \$1,010,513 to fund E-FORCSE.⁷

Additionally, the DOH has received federal funding through six grants totaling \$2,443,471. Other current grant projects include:

¹ Centers for Disease Control and Prevention, *Prescription Drug Monitoring Programs, available at* <u>http://www.cdc.gov/drugoverdose/pdmp/</u> (last visited March 5, 2017).

 $^{^{2}}$ Id.

³ Brandeis University, Institute of Behavioral Health, and the U.S. Department of Justice, Bureau for Justice Assistance, PDMP Center of Excellence, *Status of Prescription Drug Monitoring Programs (PDMPs), available at* <u>http://www.pdmpassist.org/pdf/PDMPProgramStatus2014.pdf</u> (last visited March 5, 2017). Missouri is the only state without a PDMP. Legislation was filed in December 2016 to establish a program. *See* <u>http://www.senate.mo.gov/17info/BTS_Web/Bill.aspx?SessionType=R&BillID=57095432</u> (last visited March 5, 2017).

⁴ Section 893.055(2)(a), F.S.

⁵ Florida Department of Health, Electronic-Florida Online Reporting of Controlled Substances Evaluation (E-FORCSE), 2015-2016 Prescription Drug Monitoring Program Annual Report, (December 1, 2016), *available at* <u>http://www.floridahealth.gov/statistics-and-data/e-forcse/_documents/2016PDMPAnnualReport.pdf</u> (last visited March 5, 2017).

⁶ Florida Department of Health, E-FORCSE Home Page, *available at <u>http://www.floridahealth.gov/statistics-and-data/e-forcse/</u> (last visited March 5, 2017).*

⁷ Florida PDMP Foundation, Annual Report to the Department of Health 2016, *available at <u>http://www.flpdmpfoundation.com/wp-</u> <u>content/uploads/2016/08/PDMPF_Annual_Report_2016.pdf</u> (last visited March 9, 2017).*

- Harold Rogers Data Driven Multi-Disciplinary Approach to Reducing Prescription Drug Abuse Grant 2013-PM-BX-00100 \$399,950. Project period ends March 31, 2017.
- Harold Rogers PDMP Enhancement Grant 2015-PM-BX-0009 \$499,991. Project ends September 30, 2017.
- Department of Children and Families Partnerships for Success (PFS) Grant \$86,625. Project ends September 30, 2017.
- University of Florida Harold Rogers Prescription Drug Monitoring Program: Data-Driven Responses to Prescription Drug Abuse Grant 2016-PM-BX-K005 – \$17,500. Project ends September 30, 2019.⁸

In order to provide sufficient resources, the 2015-2016 General Appropriations Act appropriated \$500,000 in recurring General Revenue to the DOH to implement the PDMP.⁹

Chapter 2015-222, Laws of Florida, the budget implementing bill, authorized the use of state funds appropriated in the 2015-2016 General Appropriations Act to administer the PDMP. Section 893.055(17), F.S., expired on July 1, 2016. Likewise, Chapter 2016-62, Laws of Florida, authorized the use of state funds appropriated in the 2016-2017 General Appropriations Act to administer the PDMP. Section 893.055(17), F.S., has an expiration date of July 1, 2017.

Since its inception in 2010, the PDMP has spent \$3,615,939 for infrastructure, enhancements, personnel, and facility expenses.¹⁰

Effect of Proposed Changes

The bill amends s. 893.055, F.S., to permanently authorize the DOH to use state funds to administer the PDMP. The bill removes language providing that implementation of the program is contingent upon receipt of nonstate funding.

The bill has an effective date of July 1, 2017.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

- A. FISCAL IMPACT ON STATE GOVERNMENT:
 - 1. Revenues:

None.

2. Expenditures:

The 2017-2018 General Appropriations Act provides \$500,000 in recurring General Revenue funds to DOH for operation of the Prescription Drug Monitoring Program.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None.

⁸ *Id.* at 5.

 ⁹ Ch. 2015-232, Laws of Florida. See Specific Appropriation 503.
¹⁰ Id. at 5.

2. Expenditures:

None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

None.

D. FISCAL COMMENTS:

None.