

MURIEL BOWSER MAYOR

September 18, 2020

The Honorable Phil Mendelson Chairman, Council of the District of Columbia 1350 Pennsylvania Avenue, N.W. Suite 504 Washington, D.C. 20004

Dear Chairman Mendelson:

Enclosed for consideration and approval by the Council is the "Prescription Drug Monitoring Program Query Amendment Act of 2020." This legislation will amend the Prescription Drug Monitoring Program Act of 2013 to require mandatory query of the prescription drug monitoring database by prescribers and dispensers prior to prescribing or dispensing an opioid or benzodiazepine for more than seven consecutive days, and every ninety days thereafter while the course of treatment or therapy continues, or prior to dispensing another refill after ninety days.

Requiring mandatory query of the database for opioid and benzodiazepine prescriptions will enable prescribers and dispensers to more quickly identify drug seeking behavior. This greater awareness will help prescribers and dispensers to prevent the misuse or abuse of these controlled substances.

Enactment of this legislation is necessary to enable the Department and Health Occupation Boards to appropriately address the opioid crisis and immediately preserve and promote the health, safety and welfare of the public.

I urge the Council to take prompt and favorable action on the enclosed proposed legislation.

Sincerely. Muriel Bowser Mayor

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2	Chairman Phil Mendelson
3	at the request of the Mayor
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7	A BILL
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10	IN THE COUNCIL OF THE DISTRICT OF COLUMBIA
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14 15	Chairman Phil Mandalson, at the request of the Mayor, introduced the following
16	Chairman Phil Mendelson, at the request of the Mayor, introduced the following bill, which was referred to the Committee on
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18 19 20	To amend the Prescription Drug Monitoring Program Act of 2013 to require mandatory query of the prescription drug monitoring database by prescribers and dispensers prior to prescribing or dispensing an opioid or benzodiazepine for more than
21 22 23 24	seven consecutive days, and every ninety days thereafter while the course of treatment or therapy continues, or prior to dispensing another refill after ninety days; to make specified exceptions to this requirement; and to impose penalties for failing to comply with this requirement.
25 26	BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA,
27	That this act may be cited as the "Prescription Drug Monitoring Program Query
28	Amendment Act of 2020".
29	Sec. 2. The Prescription Drug Monitoring Program Act of 2013, effective
30	February 22, 2014 (D.C. Law 20-66; D.C. Official Code § 48-853.01 et seq.), is amended
31	by adding a new section 4c to read as follows:
32	"Sec. 4c. Database Query Requirement for Prescribers and Dispensers.
33	"(a) A prescriber who is licensed, registered, or otherwise permitted to prescribe
34	a controlled substance or other covered substance in the course of his or her professional
35	practice in the District of Columbia, or his or her authorized delegee, shall query the
36	District of Columbia prescription drug monitoring database before initiating a new course

of treatment or therapy for a patient in the District of Columbia that includes prescribing an opioid or benzodiazepine for more than seven consecutive days, and every ninety days thereafter while the course of treatment or therapy continues. Nothing in this section shall prohibit prescribers from making additional periodic queries of the prescription drug monitoring program database as may be required by routine prescribing practices.

6 "(b) A dispenser who is licensed, registered, or otherwise permitted to dispense a 7 controlled substance or other covered substance in the course of his or her professional 8 practice in the District of Columbia, or his or her authorized delegee, shall query the 9 District of Columbia prescription drug monitoring database before dispensing an opioid 10 or benzodiazepine for a course of treatment that is anticipated to last for more than seven 11 consecutive days, and before dispensing a refill for an opioid or benzodiazepine more 12 than ninety days after the initial fill or previous refill date. Nothing in this section shall 13 prohibit dispensers from making additional periodic queries of the prescription drug 14 monitoring program database as may be required by routine prescribing practices. 15 "(c) A prescriber or dispenser shall not be required to meet the provisions of

16 subsections (a) or (b) if:

17 "(1) The controlled substance or other covered substance is prescribed or18 otherwise provided to a patient currently receiving hospice or palliative care:

19 "(2) The controlled substance or other covered substance is prescribed or
20 otherwise provided to a patient during an inpatient hospital admission or at discharge;

"(3) The controlled substance or other covered substance is prescribed or
otherwise provided to a patient in a nursing home or residential care facility that uses a
sole source pharmacy;

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 operational or available due to a temporary technological or electrical failure or natura disaster; or "(5) The prescriber or dispenser is unable to access the Prescription Dr Monitoring Program Database due to emergency or disaster and documents such circumstances in the patient's medical record. 	
 4 "(5) The prescriber or dispenser is unable to access the Prescription Dr 5 Monitoring Program Database due to emergency or disaster and documents such 	ug
5 Monitoring Program Database due to emergency or disaster and documents such	ug
6 circumstances in the patient's medical record.	
7 "(d) Failure to comply with the provisions of this section shall constitute groun	ds
8 for disciplinary action by the relevant health occupations board pursuant to section 514	(c)
9 of the District of Columbia Health Occupations Revision Act of 1985, effective March	L
10 25, 1986 (D.C. Law 6-99; D.C. Official Code § 3-1205.14(c)); and the imposition of c	ivil
11 fines pursuant to section 104 of the Department of Consumer and Regulatory Affairs	
12 Civil Infractions Act of 1985, effective October 5, 1985 (D.C. Law 6-42, D.C. Official	
13 Code § 2-1801.04).".	
14 Sec. 3. Fiscal impact statement.	
15 The Council adopts the fiscal impact statement of the Chief Financial Officer a	s
16 the fiscal impact statement required by section 4a of the General Legislative Procedure	s
17 Act of 1975, approved October 16, 2006, (120 Stat. 2038; D.C. Official Code § 1-	
18 301.47(a)).	
19 Sec. 4. Effective date.	
20 This act shall take effect following approval by the Mayor (or in the event of v	eto
21 by the mayor, action by the Council to override the veto), a 30-day period of	
22 Congressional review as provided in section 602(c)(1) of the District of Columbia Hor	ne

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1 Rule Act of 1973, as amended, approved December 24, 1973, (87 Stat. 813; D.C. Official

2 Code § 1-206.02(c)(1)), and publication in the District of Columbia Register.

GOVERNMENT OF THE DISTRICT OF COLUMBIA Office of the Attorney General

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ATTORNEY GENERAL KARL A. RACINE

Legal Counsel Division

MEMORANDUM

TO:	Ronan Gulstone Director Office of Policy & Legislative Affairs
FROM:	Brian K. Flowers Deputy Attorney General Legal Counsel Division
DATE:	September 10, 2020
SUBJECT:	Legal Sufficiency Review of the "Prescription Drug Monitoring Program Query Amendment Act of 2020" (AE-20-530)

This is to Certify that this Office has reviewed the above-

referenced proposed bill and found it to be legally sufficient. If you have any questions in this regard, please do not hesitate to call me at 724-5524.

BKF/A.Parker

Brian K. Flowers

Government of the District of Columbia Office of the Chief Financial Officer



Jeffrey S. DeWitt Chief Financial Officer

MEMORANDUM

TO:	The Honorable Phil Mendelson Chairman, Council of the District of Columbia
FROM:	Jeffrey S. DeWitt Chief Financial Officer
DATE:	September 2, 2020
SUBJECT:	Fiscal Impact Statement - Prescription Drug Monitoring Program Query Amendment Act of 2020
REFERENCE:	Draft Introduction as provided to the Office of Revenue Analysis on August 27, 2020

Conclusion

Funds are sufficient in the fiscal year 2021 through fiscal year 2024 budget and financial plan to implement the bill.

Background

The District's prescription drug monitoring program (PDMP) is an electronic database used to monitor and collect data on the dispensation of prescription data for Schedule II, III, IV and V controlled substances, as well as products containing Butalbital and Cyclobenzaprine. The PDMP is designed for licensed prescribers and dispensers to use as a tool to support informed patient care and to reduce addiction and overdose trends.

The bill requires¹ prescribers to search the prescription drug monitoring program database prior to prescribing or dispensing an opioid or benzodiazepine for more than seven consecutive days, and every ninety days while a course of treatment or therapy continues. Requiring mandatory search of the database is intended to enable prescribers and dispensers to more quickly identify drug seeking behavior to prevent the misuse or abuse of these controlled substances.

¹ By amending The Prescription Drug Monitoring Program Act of 2013 (D.C. Law 20-0066; D.C. Official Code § 48-853.01 *et seq.*).

The Honorable Phil Mendelson

FIS: "Prescription Drug Monitoring Program Query Amendment Act of 2020", Draft Introduction as provided to the Office of Revenue Analysis on August 27, 2020

Financial Plan Impact

Funds are sufficient in the fiscal year 2021 through fiscal year 2024 budget and financial plan to implement bill. The District of Columbia Board of Pharmacy at the Department of Health (DC Health) can implement the bill without additional resources. DC Health already provides licensed prescribers access to the PDMP database at no cost, and current DC Health staff will monitor compliance with the bill.