

Department of Legislative Services
 Maryland General Assembly
 2018 Session

FISCAL AND POLICY NOTE
First Reader

Senate Bill 1083
 Finance

(Senator Klausmeier, *et al.*)

Public Health - Prescription Drug Monitoring Program - Revisions

This bill *requires*, rather than authorizes, the Prescription Drug Monitoring Program (PDMP) to review prescription monitoring data for indications of (1) possible misuse or abuse of a monitored prescription drug or (2) a possible violation of law or breach of professional standards by a prescriber or dispenser. If either is indicated, PDMP *must* notify and provide education to the prescriber or dispenser. If a possible violation of law or breach of professional standards is indicated, PDMP (1) *may* notify the appropriate law enforcement agency or health occupations board and (2) if so, *must* provide the agency or board with the data necessary for an investigation. PDMP must take specified factors into account regarding a possible violation of law or breach of professional standards.

Fiscal Summary

State Effect: General fund expenditures increase by at least \$179,100 in FY 2019. Special fund expenditures may increase beginning in FY 2019 as discussed below. Future years reflect annualization. Revenues are not affected.

(in dollars)	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023
Revenues	\$0	\$0	\$0	\$0	\$0
GF Expenditure	179,100	215,000	221,100	229,200	237,700
SF Expenditure	-	-	-	-	-
Net Effect	(\$179,100)	(\$215,000)	(\$221,100)	(\$229,200)	(\$237,700)

Note:() = decrease; GF = general funds; FF = federal funds; SF = special funds; - = indeterminate increase; (-) = indeterminate decrease

Local Effect: The bill is not anticipated to materially affect governmental operations or finances.

Small Business Effect: None.

Analysis

Bill Summary: In determining whether its review of prescription monitoring data indicates a possible violation of law or a possible breach of professional standards, PDMP must take into account the particular specialty, circumstances, patient type, and location of the prescriber or dispenser.

Obtaining clinical guidance and interpretation from PDMP's Technical Advisory Committee (TAC) may not delay reporting of a possible violation of law or breach of professional conduct to a law enforcement agency or health occupations board if, in the judgment of PDMP, a delay could result in imminent danger to public health or safety.

Current Law: Before PDMP may provide notification of a possible violation of law or breach of professional standards to a prescriber or dispenser, it must first obtain from TAC (1) clinical guidance regarding indications of a possible violation of law or breach of professional standards and (2) interpretation of the prescription monitoring data that indicates a possible violation of law or breach of professional standards.

Chapter 166 of 2011 established PDMP to assist with the identification and prevention of prescription drug abuse and the identification and investigation of unlawful prescription drug diversion. PDMP must monitor the prescribing and dispensing of Schedule II through V controlled dangerous substances (CDS). Since July 1, 2017, all CDS dispensers have been required to register with PDMP. Beginning July 1, 2018, a prescriber must (1) request at least the prior four months of prescription monitoring data for a patient before initiating a course of treatment that includes prescribing or dispensing an opioid or a benzodiazepine; (2) request prescription monitoring data for the patient at least every 90 days until the course of treatment has ended; and (3) assess prescription monitoring data before deciding whether to prescribe or dispense – or continue prescribing or dispensing – an opioid or a benzodiazepine. A prescriber is not required to request prescription monitoring data if the opioid or benzodiazepine is prescribed or dispensed to specified individuals and in other specified circumstances.

Background: Pursuant to Chapter 147 of 2016, the Maryland Department of Health (MDH) submitted a September 2017 [report](#) on (1) the status of the implementation of providing education and notice of a possible violation of law or a possible breach of professional standards to prescribers and pharmacists and (2) a recommendation on whether the authority of PDMP to report possible violations of law or possible breaches of professional standards should be expanded to allow unsolicited reporting to law enforcement agencies, licensing boards, or other units of the department. The report noted that PDMP was identifying patients with multiple provider episodes (“doctor shopping”) and continuing to work with partner academic researchers to develop code to “red flag” high-risk provider, dispenser, and patient behavior. MDH indicated that, rather than

expanding unsolicited reporting, the department’s focus was on implementing mandatory registration and use deadlines and enhancing the operational coordination and effectiveness of the Office of Controlled Substances Administration (the unit of the department that enforces CDS laws and issues CDS permits).

As of December 28, 2017, there were 30,172 prescribers and 10,515 pharmacists registered to use PDMP.

State Expenditures: General fund expenditures increase by \$179,146 in fiscal 2019, which accounts for the bill’s October 1, 2018 effective date. This estimate reflects the cost of hiring 1.5 full-time equivalent (FTE) grade 17 epidemiologist III positions and 1.5 FTE grade 15 administrative officer II positions to conduct data preparation, analysis, and coordination with law enforcement and health occupations boards; acquire, store, and analyze additional datasets to facilitate the expanded work of TAC; and notify and provide education for prescribers and dispensers. It includes salaries, fringe benefits, one-time start-up costs, and ongoing operating expenses. Additional expenditures for information technology upgrades to ensure secure data transfer to law enforcement and health occupations boards are anticipated but are not reflected in this analysis.

Positions	3
Salaries and Fringe Benefits	\$158,180
One-time Start-up Costs	19,560
Ongoing Operating Expenses	<u>1,406</u>
Total FY 2019 State Expenditures	\$179,146

Future year expenditures reflect full salaries with annual increases and employee turnover and ongoing operating expenses.

To the extent that notifications of possible breaches of professional standards to health occupations board (specifically the State boards of Dental Examiners, Nursing, Pharmacy, and Physicians) result in additional investigations of prescribers and dispensers and/or additional disciplinary actions against licensees, special fund expenditures may increase by an indeterminate amount.

Additional Information

Prior Introductions: None.

Cross File: HB 88 (Delegate Barron, *et al.*) - Health and Government Operations.

Information Source(s): Maryland Department of Health; Department of Legislative Services

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md/ljm

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