

OPIOID PRESCRIBING REGULATIONS

2017 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Raymond P. Ward

Senate Sponsor: Evan J. Vickers

LONG TITLE

General Description:

This bill amends the Division of Occupational and Professional Licensing Act related to the prescribing of certain controlled substances.

Highlighted Provisions:

This bill:

- ▶ limits the number of days for which an opiate may be prescribed for certain individuals;
- ▶ removes an outdated provision from the Utah Controlled Substances Act related to opiate prescribing; and
- ▶ amends provisions of the Controlled Substance Database Act related to provider use of the database.

Money Appropriated in this Bill:

None

Other Special Clauses:

None

Utah Code Sections Affected:

AMENDS:

58-37-6, as last amended by Laws of Utah 2014, Chapter 78

58-37f-301, as last amended by Laws of Utah 2016, Third Special Session, Chapter 5

58-37f-304, as enacted by Laws of Utah 2016, Chapter 275

63I-1-258, as last amended by Laws of Utah 2016, Chapters 89 and 294

30 *Be it enacted by the Legislature of the state of Utah:*

31 Section 1. Section **58-37-6** is amended to read:

32 **58-37-6. License to manufacture, produce, distribute, dispense, administer, or**
33 **conduct research -- Issuance by division -- Denial, suspension, or revocation -- Records**
34 **required -- Prescriptions.**

35 (1) (a) The division may adopt rules relating to the licensing and control of the
36 manufacture, distribution, production, prescription, administration, dispensing, conducting of
37 research with, and performing of laboratory analysis upon controlled substances within this
38 state.

39 (b) The division may assess reasonable fees to defray the cost of issuing original and
40 renewal licenses under this chapter pursuant to Section [63J-1-504](#).

41 (2) (a) (i) Every person who manufactures, produces, distributes, prescribes, dispenses,
42 administers, conducts research with, or performs laboratory analysis upon any controlled
43 substance in Schedules I through V within this state, or who proposes to engage in
44 manufacturing, producing, distributing, prescribing, dispensing, administering, conducting
45 research with, or performing laboratory analysis upon controlled substances included in
46 Schedules I through V within this state shall obtain a license issued by the division.

47 (ii) The division shall issue each license under this chapter in accordance with a
48 two-year renewal cycle established by rule. The division may by rule extend or shorten a
49 renewal period by as much as one year to stagger the renewal cycles it administers.

50 (b) Persons licensed to manufacture, produce, distribute, prescribe, dispense,
51 administer, conduct research with, or perform laboratory analysis upon controlled substances in
52 Schedules I through V within this state may possess, manufacture, produce, distribute,
53 prescribe, dispense, administer, conduct research with, or perform laboratory analysis upon
54 those substances to the extent authorized by their license and in conformity with this chapter.

55 (c) The following persons are not required to obtain a license and may lawfully possess
56 controlled substances included in Schedules II through V under this section:

57 (i) an agent or employee, except a sales representative, of any registered manufacturer,

58 distributor, or dispenser of any controlled substance, if the agent or employee is acting in the
59 usual course of the person's business or employment; however, nothing in this subsection shall
60 be interpreted to permit an agent, employee, sales representative, or detail man to maintain an
61 inventory of controlled substances separate from the location of the person's employer's
62 registered and licensed place of business;

63 (ii) a motor carrier or warehouseman, or an employee of a motor carrier or
64 warehouseman, who possesses any controlled substance in the usual course of the person's
65 business or employment; and

66 (iii) an ultimate user, or any person who possesses any controlled substance pursuant to
67 a lawful order of a practitioner.

68 (d) The division may enact rules waiving the license requirement for certain
69 manufacturers, producers, distributors, prescribers, dispensers, administrators, research
70 practitioners, or laboratories performing analysis if consistent with the public health and safety.

71 (e) A separate license is required at each principal place of business or professional
72 practice where the applicant manufactures, produces, distributes, dispenses, conducts research
73 with, or performs laboratory analysis upon controlled substances.

74 (f) The division may enact rules providing for the inspection of a licensee or applicant's
75 establishment, and may inspect the establishment according to those rules.

76 (3) (a) (i) Upon proper application, the division shall license a qualified applicant to
77 manufacture, produce, distribute, conduct research with, or perform laboratory analysis upon
78 controlled substances included in Schedules I through V, unless it determines that issuance of a
79 license is inconsistent with the public interest.

80 (ii) The division may not issue a license to any person to prescribe, dispense, or
81 administer a Schedule I controlled substance except under Subsection (3)(a)(i).

82 (iii) In determining public interest under this Subsection (3)(a), the division shall
83 consider whether or not the applicant has:

84 (A) maintained effective controls against diversion of controlled substances and any
85 Schedule I or II substance compounded from any controlled substance into other than

86 legitimate medical, scientific, or industrial channels;

87 (B) complied with applicable state and local law;

88 (C) been convicted under federal or state laws relating to the manufacture, distribution,
89 or dispensing of substances;

90 (D) past experience in the manufacture of controlled dangerous substances;

91 (E) established effective controls against diversion; and

92 (F) complied with any other factors that the division establishes that promote the public
93 health and safety.

94 (b) Licenses granted under Subsection (3)(a) do not entitle a licensee to manufacture,
95 produce, distribute, conduct research with, or perform laboratory analysis upon controlled
96 substances in Schedule I other than those specified in the license.

97 (c) (i) Practitioners shall be licensed to administer, dispense, or conduct research with
98 substances in Schedules II through V if they are authorized to administer, dispense, or conduct
99 research under the laws of this state.

100 (ii) The division need not require a separate license for practitioners engaging in
101 research with nonnarcotic controlled substances in Schedules II through V where the licensee is
102 already licensed under this chapter in another capacity.

103 (iii) With respect to research involving narcotic substances in Schedules II through V,
104 or where the division by rule requires a separate license for research of nonnarcotic substances
105 in Schedules II through V, a practitioner shall apply to the division prior to conducting
106 research.

107 (iv) Licensing for purposes of bona fide research with controlled substances by a
108 practitioner considered qualified may be denied only on a ground specified in Subsection (4),
109 or upon evidence that the applicant will abuse or unlawfully transfer or fail to safeguard
110 adequately the practitioner's supply of substances against diversion from medical or scientific
111 use.

112 (v) Practitioners registered under federal law to conduct research in Schedule I
113 substances may conduct research in Schedule I substances within this state upon furnishing the

114 division evidence of federal registration.

115 (d) Compliance by manufacturers, producers, and distributors with the provisions of
116 federal law respecting registration, excluding fees, entitles them to be licensed under this
117 chapter.

118 (e) The division shall initially license those persons who own or operate an
119 establishment engaged in the manufacture, production, distribution, dispensation, or
120 administration of controlled substances prior to April 3, 1980, and who are licensed by the
121 state.

122 (4) (a) Any license pursuant to Subsection (2) or (3) may be denied, suspended, placed
123 on probation, or revoked by the division upon finding that the applicant or licensee has:

124 (i) materially falsified any application filed or required pursuant to this chapter;

125 (ii) been convicted of an offense under this chapter or any law of the United States, or
126 any state, relating to any substance defined as a controlled substance;

127 (iii) been convicted of a felony under any other law of the United States or any state
128 within five years of the date of the issuance of the license;

129 (iv) had a federal registration or license denied, suspended, or revoked by competent
130 federal authority and is no longer authorized to manufacture, distribute, prescribe, or dispense
131 controlled substances;

132 (v) had the licensee's license suspended or revoked by competent authority of another
133 state for violation of laws or regulations comparable to those of this state relating to the
134 manufacture, distribution, or dispensing of controlled substances;

135 (vi) violated any division rule that reflects adversely on the licensee's reliability and
136 integrity with respect to controlled substances;

137 (vii) refused inspection of records required to be maintained under this chapter by a
138 person authorized to inspect them; or

139 (viii) prescribed, dispensed, administered, or injected an anabolic steroid for the
140 purpose of manipulating human hormonal structure so as to:

141 (A) increase muscle mass, strength, or weight without medical necessity and without a

142 written prescription by any practitioner in the course of the practitioner's professional practice;
143 or

144 (B) improve performance in any form of human exercise, sport, or game.

145 (b) The division may limit revocation or suspension of a license to a particular
146 controlled substance with respect to which grounds for revocation or suspension exist.

147 (c) (i) Proceedings to deny, revoke, or suspend a license shall be conducted pursuant to
148 this section and in accordance with the procedures set forth in Title 58, Chapter 1, Division of
149 Occupational and Professional Licensing Act, and conducted in conjunction with the
150 appropriate representative committee designated by the director of the department.

151 (ii) Nothing in this Subsection (4)(c) gives the Division of Occupational and
152 Professional Licensing exclusive authority in proceedings to deny, revoke, or suspend licenses,
153 except where the division is designated by law to perform those functions, or, when not
154 designated by law, is designated by the executive director of the Department of Commerce to
155 conduct the proceedings.

156 (d) (i) The division may suspend any license simultaneously with the institution of
157 proceedings under this section if it finds there is an imminent danger to the public health or
158 safety.

159 (ii) Suspension shall continue in effect until the conclusion of proceedings, including
160 judicial review, unless withdrawn by the division or dissolved by a court of competent
161 jurisdiction.

162 (e) (i) If a license is suspended or revoked under this Subsection (4), all controlled
163 substances owned or possessed by the licensee may be placed under seal in the discretion of the
164 division.

165 (ii) Disposition may not be made of substances under seal until the time for taking an
166 appeal has lapsed, or until all appeals have been concluded, unless a court, upon application,
167 orders the sale of perishable substances and the proceeds deposited with the court.

168 (iii) If a revocation order becomes final, all controlled substances shall be forfeited.

169 (f) The division shall notify promptly the Drug Enforcement Administration of all

170 orders suspending or revoking a license and all forfeitures of controlled substances.

171 (g) If an individual's Drug Enforcement Administration registration is denied, revoked,
172 surrendered, or suspended, the division shall immediately suspend the individual's controlled
173 substance license, which shall only be reinstated by the division upon reinstatement of the
174 federal registration, unless the division has taken further administrative action under
175 Subsection (4)(a)(iv), which would be grounds for the continued denial of the controlled
176 substance license.

177 (5) (a) Persons licensed under Subsection (2) or (3) shall maintain records and
178 inventories in conformance with the record keeping and inventory requirements of federal and
179 state law and any additional rules issued by the division.

180 (b) (i) Every physician, dentist, naturopathic physician, veterinarian, practitioner, or
181 other person who is authorized to administer or professionally use a controlled substance shall
182 keep a record of the drugs received by him and a record of all drugs administered, dispensed, or
183 professionally used by him otherwise than by a prescription.

184 (ii) A person using small quantities or solutions or other preparations of those drugs for
185 local application has complied with this Subsection (5)(b) if the person keeps a record of the
186 quantity, character, and potency of those solutions or preparations purchased or prepared by
187 him, and of the dates when purchased or prepared.

188 (6) Controlled substances in Schedules I through V may be distributed only by a
189 licensee and pursuant to an order form prepared in compliance with division rules or a lawful
190 order under the rules and regulations of the United States.

191 (7) (a) A person may not write or authorize a prescription for a controlled substance
192 unless the person is:

193 (i) a practitioner authorized to prescribe drugs and medicine under the laws of this state
194 or under the laws of another state having similar standards; and

195 (ii) licensed under this chapter or under the laws of another state having similar
196 standards.

197 (b) A person other than a pharmacist licensed under the laws of this state, or the

198 pharmacist's licensed intern, as required by Sections 58-17b-303 and 58-17b-304, may not
199 dispense a controlled substance.

200 (c) (i) A controlled substance may not be dispensed without the written prescription of
201 a practitioner, if the written prescription is required by the federal Controlled Substances Act.

202 (ii) That written prescription shall be made in accordance with Subsection (7)(a) and in
203 conformity with Subsection (7)(d).

204 (iii) In emergency situations, as defined by division rule, controlled substances may be
205 dispensed upon oral prescription of a practitioner, if reduced promptly to writing on forms
206 designated by the division and filed by the pharmacy.

207 (iv) Prescriptions reduced to writing by a pharmacist shall be in conformity with
208 Subsection (7)(d).

209 (d) Except for emergency situations designated by the division, a person may not issue,
210 fill, compound, or dispense a prescription for a controlled substance unless the prescription is
211 signed by the prescriber in ink or indelible pencil or is signed with an electronic signature of
212 the prescriber as authorized by division rule, and contains the following information:

213 (i) the name, address, and registry number of the prescriber;

214 (ii) the name, address, and age of the person to whom or for whom the prescription is
215 issued;

216 (iii) the date of issuance of the prescription; and

217 (iv) the name, quantity, and specific directions for use by the ultimate user of the
218 controlled substance.

219 (e) A prescription may not be written, issued, filled, or dispensed for a Schedule I
220 controlled substance unless:

221 (i) the person who writes the prescription is licensed under Subsection (2); and

222 (ii) the prescribed controlled substance is to be used in research.

223 (f) Except when administered directly to an ultimate user by a licensed practitioner,
224 controlled substances are subject to the ~~following~~ restrictions~~[:]~~ of this Subsection (7)(f).

225 (i) ~~(A)~~ A prescription for a Schedule II substance may not be refilled.

226 ~~[(B)]~~ (ii) A Schedule II controlled substance may not be filled in a quantity to exceed a
227 one-month's supply, as directed on the daily dosage rate of the prescriptions.

228 (iii) (A) Except as provided in Subsection (7)(f)(iii)(B), a prescription for a Schedule II
229 or Schedule III controlled substance that is an opiate and that is issued for an acute condition
230 shall be completely or partially filled in a quantity not to exceed a seven-day supply as directed
231 on the daily dosage rate of the prescription.

232 (B) Subsection (7)(f)(iii)(A) does not apply to a prescription issued for a surgery when
233 the practitioner determined that a quantity exceeding seven days is needed, in which case the
234 practitioner may prescribe up to a 30-day supply, with a partial fill at the discretion of the
235 practitioner.

236 (C) Subsection (7)(f)(iii)(A) does not apply to prescriptions issued for complex or
237 chronic conditions which are documented as being complex or chronic in the medical record.

238 (D) A pharmacist is not required to verify that a prescription is in compliance with
239 Subsection (7)(f)(iii).

240 ~~[(ii)]~~ (iv) A Schedule III or IV controlled substance may be filled only within six
241 months of issuance, and may not be refilled more than six months after the date of its original
242 issuance or be refilled more than five times after the date of the prescription unless renewed by
243 the practitioner.

244 ~~[(iii)]~~ (v) All other controlled substances in Schedule V may be refilled as the
245 prescriber's prescription directs, but they may not be refilled one year after the date the
246 prescription was issued unless renewed by the practitioner.

247 ~~[(iv)]~~ (vi) Any prescription for a Schedule II substance may not be dispensed if it is not
248 presented to a pharmacist for dispensing by a pharmacist or a pharmacy intern within 30 days
249 after the date the prescription was issued, or 30 days after the dispensing date, if that date is
250 specified separately from the date of issue.

251 ~~[(v)]~~ (vii) A practitioner may issue more than one prescription at the same time for the
252 same Schedule II controlled substance, but only under the following conditions:

253 (A) no more than three prescriptions for the same Schedule II controlled substance may

254 be issued at the same time;

255 (B) no one prescription may exceed a 30-day supply; and

256 (C) a second or third prescription shall include the date of issuance and the date for
257 dispensing[; ~~and~~].

258 [~~(D) unless the practitioner determines there is a valid medical reason to the contrary;~~
259 ~~the date for dispensing a second or third prescription may not be fewer than 30 days from the~~
260 ~~dispensing date of the previous prescription.]~~

261 (g) An order for a controlled substance in Schedules II through V for use by an
262 inpatient or an outpatient of a licensed hospital is exempt from all requirements of this
263 Subsection (7) if the order is:

264 (i) issued or made by a prescribing practitioner who holds an unrestricted registration
265 with the federal Drug Enforcement Administration, and an active Utah controlled substance
266 license in good standing issued by the division under this section, or a medical resident who is
267 exempted from licensure under Subsection [58-1-307\(1\)\(c\)](#);

268 (ii) authorized by the prescribing practitioner treating the patient and the prescribing
269 practitioner designates the quantity ordered;

270 (iii) entered upon the record of the patient, the record is signed by the prescriber
271 affirming the prescriber's authorization of the order within 48 hours after filling or
272 administering the order, and the patient's record reflects the quantity actually administered; and

273 (iv) filled and dispensed by a pharmacist practicing the pharmacist's profession within
274 the physical structure of the hospital, or the order is taken from a supply lawfully maintained by
275 the hospital and the amount taken from the supply is administered directly to the patient
276 authorized to receive it.

277 (h) A practitioner licensed under this chapter may not prescribe, administer, or
278 dispense a controlled substance to a child, without first obtaining the consent required in
279 Section [78B-3-406](#) of a parent, guardian, or person standing in loco parentis of the child except
280 in cases of an emergency. For purposes of this Subsection (7)(h), "child" has the same
281 meaning as defined in Section [78A-6-105](#), and "emergency" means any physical condition

282 requiring the administration of a controlled substance for immediate relief of pain or suffering.

283 (i) A practitioner licensed under this chapter may not prescribe or administer dosages
284 of a controlled substance in excess of medically recognized quantities necessary to treat the
285 ailment, malady, or condition of the ultimate user.

286 (j) A practitioner licensed under this chapter may not prescribe, administer, or dispense
287 any controlled substance to another person knowing that the other person is using a false name,
288 address, or other personal information for the purpose of securing the controlled substance.

289 (k) A person who is licensed under this chapter to manufacture, distribute, or dispense
290 a controlled substance may not manufacture, distribute, or dispense a controlled substance to
291 another licensee or any other authorized person not authorized by this license.

292 (l) A person licensed under this chapter may not omit, remove, alter, or obliterate a
293 symbol required by this chapter or by a rule issued under this chapter.

294 (m) A person licensed under this chapter may not refuse or fail to make, keep, or
295 furnish any record notification, order form, statement, invoice, or information required under
296 this chapter.

297 (n) A person licensed under this chapter may not refuse entry into any premises for
298 inspection as authorized by this chapter.

299 (o) A person licensed under this chapter may not furnish false or fraudulent material
300 information in any application, report, or other document required to be kept by this chapter or
301 willfully make any false statement in any prescription, order, report, or record required by this
302 chapter.

303 (8) (a) (i) Any person licensed under this chapter who is found by the division to have
304 violated any of the provisions of Subsections (7)(k) through (o) or Subsection (10) is subject to
305 a penalty not to exceed \$5,000. The division shall determine the procedure for adjudication of
306 any violations in accordance with Sections [58-1-106](#) and [58-1-108](#).

307 (ii) The division shall deposit all penalties collected under Subsection (8)(a)(i) in the
308 General Fund as a dedicated credit to be used by the division under Subsection [58-37f-502\(1\)](#).

309 (b) Any person who knowingly and intentionally violates Subsections (7)(h) through (j)

310 or Subsection (10) is:

311 (i) upon first conviction, guilty of a class B misdemeanor;

312 (ii) upon second conviction, guilty of a class A misdemeanor; and

313 (iii) on third or subsequent conviction, guilty of a third degree felony.

314 (c) Any person who knowingly and intentionally violates Subsections (7)(k) through
315 (o) shall upon conviction be guilty of a third degree felony.

316 (9) Any information communicated to any licensed practitioner in an attempt to
317 unlawfully procure, or to procure the administration of, a controlled substance is not considered
318 to be a privileged communication.

319 (10) A person holding a valid license under this chapter who is engaged in medical
320 research may produce, possess, administer, prescribe, or dispense a controlled substance for
321 research purposes as licensed under Subsection (2) but may not otherwise prescribe or dispense
322 a controlled substance listed in Section [58-37-4.2](#).

323 Section 2. Section **58-37f-301** is amended to read:

324 **58-37f-301. Access to database.**

325 (1) The division shall make rules, in accordance with Title 63G, Chapter 3, Utah
326 Administrative Rulemaking Act, to:

327 (a) effectively enforce the limitations on access to the database as described in this
328 part; and

329 (b) establish standards and procedures to ensure accurate identification of individuals
330 requesting information or receiving information without request from the database.

331 (2) The division shall make information in the database and information obtained from
332 other state or federal prescription monitoring programs by means of the database available only
333 to the following individuals, in accordance with the requirements of this chapter and division
334 rules:

335 (a) (i) personnel of the division specifically assigned to conduct investigations related
336 to controlled substance laws under the jurisdiction of the division; and

337 (ii) the following law enforcement officers, but the division may only provide

338 nonidentifying information, limited to gender, year of birth, and postal ZIP code, regarding
339 individuals for whom a controlled substance has been prescribed or to whom a controlled
340 substance has been dispensed:

341 (A) a law enforcement agency officer who is engaged in a joint investigation with the
342 division; and

343 (B) a law enforcement agency officer to whom the division has referred a suspected
344 criminal violation of controlled substance laws;

345 (b) authorized division personnel engaged in analysis of controlled substance
346 prescription information as a part of the assigned duties and responsibilities of their
347 employment;

348 (c) a board member if:

349 (i) the board member is assigned to monitor a licensee on probation; and

350 (ii) the board member is limited to obtaining information from the database regarding
351 the specific licensee on probation;

352 (d) a member of a diversion committee established in accordance with Subsection
353 58-1-404(2) if:

354 (i) the diversion committee member is limited to obtaining information from the
355 database regarding the person whose conduct is the subject of the committee's consideration;
356 and

357 (ii) the conduct that is the subject of the committee's consideration includes a violation
358 or a potential violation of Chapter 37, Utah Controlled Substances Act, or another relevant
359 violation or potential violation under this title;

360 (e) in accordance with a written agreement entered into with the department,
361 employees of the Department of Health:

362 (i) whom the director of the Department of Health assigns to conduct scientific studies
363 regarding the use or abuse of controlled substances, if the identity of the individuals and
364 pharmacies in the database are confidential and are not disclosed in any manner to any
365 individual who is not directly involved in the scientific studies;

366 (ii) when the information is requested by the Department of Health in relation to a
367 person or provider whom the Department of Health suspects may be improperly obtaining or
368 providing a controlled substance; or

369 (iii) in the medical examiner's office;

370 (f) in accordance with a written agreement entered into with the department, a designee
371 of the director of the Department of Health, who is not an employee of the Department of
372 Health, whom the director of the Department of Health assigns to conduct scientific studies
373 regarding the use or abuse of controlled substances pursuant to an application process
374 established in rule by the Department of Health, if:

375 (i) the designee provides explicit information to the Department of Health regarding
376 the purpose of the scientific studies;

377 (ii) the scientific studies to be conducted by the designee:

378 (A) fit within the responsibilities of the Department of Health for health and welfare;

379 (B) are reviewed and approved by an Institutional Review Board that is approved for
380 human subject research by the United States Department of Health and Human Services; and

381 (C) are not conducted for profit or commercial gain; and

382 (D) are conducted in a research facility, as defined by division rule, that is associated
383 with a university or college accredited by one or more regional or national accrediting agencies
384 recognized by the United States Department of Education;

385 (iii) the designee protects the information as a business associate of the Department of
386 Health; and

387 (iv) the identity of the prescribers, patients, and pharmacies in the database are
388 de-identified, confidential, not disclosed in any manner to the designee or to any individual
389 who is not directly involved in the scientific studies;

390 (g) in accordance with the written agreement entered into with the department and the
391 Department of Health, authorized employees of a managed care organization, as defined in 42
392 C.F.R. Sec. 438, if:

393 (i) the managed care organization contracts with the Department of Health under the

394 provisions of Section 26-18-405 and the contract includes provisions that:

395 (A) require a managed care organization employee who will have access to information
396 from the database to submit to a criminal background check; and

397 (B) limit the authorized employee of the managed care organization to requesting either
398 the division or the Department of Health to conduct a search of the database regarding a
399 specific Medicaid enrollee and to report the results of the search to the authorized employee;
400 and

401 (ii) the information is requested by an authorized employee of the managed care
402 organization in relation to a person who is enrolled in the Medicaid program with the managed
403 care organization, and the managed care organization suspects the person may be improperly
404 obtaining or providing a controlled substance;

405 (h) a licensed practitioner having authority to prescribe controlled substances, to the
406 extent the information:

407 (i) (A) relates specifically to a current or prospective patient of the practitioner; and

408 (B) is provided to or sought by the practitioner for the purpose of:

409 (I) prescribing or considering prescribing any controlled substance to the current or
410 prospective patient;

411 (II) diagnosing the current or prospective patient;

412 (III) providing medical treatment or medical advice to the current or prospective
413 patient; or

414 (IV) determining whether the current or prospective patient:

415 (Aa) is attempting to fraudulently obtain a controlled substance from the practitioner;

416 or

417 (Bb) has fraudulently obtained, or attempted to fraudulently obtain, a controlled
418 substance from the practitioner;

419 (ii) (A) relates specifically to a former patient of the practitioner; and

420 (B) is provided to or sought by the practitioner for the purpose of determining whether
421 the former patient has fraudulently obtained, or has attempted to fraudulently obtain, a

422 controlled substance from the practitioner;

423 (iii) relates specifically to an individual who has access to the practitioner's Drug
424 Enforcement Administration identification number, and the practitioner suspects that the
425 individual may have used the practitioner's Drug Enforcement Administration identification
426 number to fraudulently acquire or prescribe a controlled substance;

427 (iv) relates to the practitioner's own prescribing practices, except when specifically
428 prohibited by the division by administrative rule;

429 (v) relates to the use of the controlled substance database by an employee of the
430 practitioner, described in Subsection (2)(i); or

431 (vi) relates to any use of the practitioner's Drug Enforcement Administration
432 identification number to obtain, attempt to obtain, prescribe, or attempt to prescribe, a
433 controlled substance;

434 (i) in accordance with Subsection (3)(a), an employee of a practitioner described in
435 Subsection (2)(h), for a purpose described in Subsection (2)(h)(i) or (ii), if:

436 (i) the employee is designated by the practitioner as an individual authorized to access
437 the information on behalf of the practitioner;

438 (ii) the practitioner provides written notice to the division of the identity of the
439 employee; and

440 (iii) the division:

441 (A) grants the employee access to the database; and

442 (B) provides the employee with a password that is unique to that employee to access
443 the database in order to permit the division to comply with the requirements of Subsection
444 [58-37f-203\(5\)](#) with respect to the employee;

445 (j) an employee of the same business that employs a licensed practitioner under
446 Subsection (2)(h) if:

447 (i) the employee is designated by the practitioner as an individual authorized to access
448 the information on behalf of the practitioner;

449 (ii) the practitioner and the employing business provide written notice to the division of

450 the identity of the designated employee; and

451 (iii) the division:

452 (A) grants the employee access to the database; and

453 (B) provides the employee with a password that is unique to that employee to access

454 the database in order to permit the division to comply with the requirements of Subsection

455 [58-37f-203\(5\)](#) with respect to the employee;

456 (k) a licensed pharmacist having authority to dispense a controlled substance to the

457 extent the information is provided or sought for the purpose of:

458 (i) dispensing or considering dispensing any controlled substance; or

459 (ii) determining whether a person:

460 (A) is attempting to fraudulently obtain a controlled substance from the pharmacist; or

461 (B) has fraudulently obtained, or attempted to fraudulently obtain, a controlled

462 substance from the pharmacist;

463 (l) in accordance with Subsection (3)(a), a licensed pharmacy technician and pharmacy

464 intern who is an employee of a pharmacy as defined in Section [58-17b-102](#), for the purposes

465 described in Subsection (2)(j)(i) or (ii), if:

466 (i) the employee is designated by the pharmacist-in-charge as an individual authorized

467 to access the information on behalf of a licensed pharmacist employed by the pharmacy;

468 (ii) the pharmacist-in-charge provides written notice to the division of the identity of

469 the employee; and

470 (iii) the division:

471 (A) grants the employee access to the database; and

472 (B) provides the employee with a password that is unique to that employee to access

473 the database in order to permit the division to comply with the requirements of Subsection

474 [58-37f-203\(5\)](#) with respect to the employee;

475 (m) pursuant to a valid search warrant, federal, state, and local law enforcement

476 officers and state and local prosecutors who are engaged in an investigation related to:

477 (i) one or more controlled substances; and

- 478 (ii) a specific person who is a subject of the investigation;
- 479 (n) subject to Subsection (7), a probation or parole officer, employed by the
480 Department of Corrections or by a political subdivision, to gain access to database information
481 necessary for the officer's supervision of a specific probationer or parolee who is under the
482 officer's direct supervision;
- 483 (o) employees of the Office of Internal Audit and Program Integrity within the
484 Department of Health who are engaged in their specified duty of ensuring Medicaid program
485 integrity under Section [26-18-2.3](#);
- 486 (p) a mental health therapist, if:
 - 487 (i) the information relates to a patient who is:
 - 488 (A) enrolled in a licensed substance abuse treatment program; and
 - 489 (B) receiving treatment from, or under the direction of, the mental health therapist as
490 part of the patient's participation in the licensed substance abuse treatment program described
491 in Subsection (2)(p)(i)(A);
 - 492 (ii) the information is sought for the purpose of determining whether the patient is
493 using a controlled substance while the patient is enrolled in the licensed substance abuse
494 treatment program described in Subsection (2)(p)(i)(A); and
 - 495 (iii) the licensed substance abuse treatment program described in Subsection
496 (2)(p)(i)(A) is associated with a practitioner who:
 - 497 (A) is a physician, a physician assistant, an advance practice registered nurse, or a
498 pharmacist; and
 - 499 (B) is available to consult with the mental health therapist regarding the information
500 obtained by the mental health therapist, under this Subsection (2)(p), from the database;
 - 501 (q) an individual who is the recipient of a controlled substance prescription entered into
502 the database, upon providing evidence satisfactory to the division that the individual requesting
503 the information is in fact the individual about whom the data entry was made;
 - 504 (r) an individual under Subsection (2)(q) for the purpose of obtaining a list of the
505 persons and entities that have requested or received any information from the database

506 regarding the individual, except if the individual's record is subject to a pending or current
507 investigation as authorized under this Subsection (2);

508 (s) the inspector general, or a designee of the inspector general, of the Office of
509 Inspector General of Medicaid Services, for the purpose of fulfilling the duties described in
510 Title 63A, Chapter 13, Part 2, Office and Powers; and

511 (t) the following licensed physicians for the purpose of reviewing and offering an
512 opinion on an individual's request for workers' compensation benefits under Title 34A, Chapter
513 2, Workers' Compensation Act, or Title 34A, Chapter 3, Utah Occupational Disease Act:

514 (i) a member of the medical panel described in Section 34A-2-601;

515 (ii) a physician employed as medical director for a licensed workers' compensation
516 insurer or an approved self-insured employer; or

517 (iii) a physician offering a second opinion regarding treatment.

518 (3) (a) (i) A practitioner described in Subsection (2)(h) may designate [~~up to three~~] one
519 or more employees to access information from the database under Subsection (2)(i), (2)(j), or
520 (4)(c).

521 (ii) A pharmacist described in Subsection (2)(k) who is a pharmacist-in-charge may
522 designate up to five employees to access information from the database under Subsection (2)(l).

523 (b) The division shall make rules, in accordance with Title 63G, Chapter 3, Utah
524 Administrative Rulemaking Act, to:

525 (i) establish background check procedures to determine whether an employee
526 designated under Subsection (2)(i), (2)(j), or (4)(c) should be granted access to the database;
527 and

528 (ii) establish the information to be provided by an emergency [~~room~~] department
529 employee under Subsection (4); and

530 (iii) facilitate providing controlled substance prescription information to a third party
531 under Subsection (5).

532 (c) The division shall grant an employee designated under Subsection (2)(i), (2)(j), or
533 (4)(c) access to the database, unless the division determines, based on a background check, that

534 the employee poses a security risk to the information contained in the database.

535 (4) (a) An individual who is employed in the emergency [room] department of a
536 hospital may exercise access to the database under this Subsection (4) on behalf of a licensed
537 practitioner if the individual is designated under Subsection (4)(c) and the licensed practitioner:

538 (i) is employed in the emergency [room] department;

539 (ii) is treating an emergency [room] department patient for an emergency medical
540 condition; and

541 (iii) requests that an individual employed in the emergency [room] department and
542 designated under Subsection (4)(c) obtain information regarding the patient from the database
543 as needed in the course of treatment.

544 (b) The emergency [room] department employee obtaining information from the
545 database shall, when gaining access to the database, provide to the database the name and any
546 additional identifiers regarding the requesting practitioner as required by division
547 administrative rule established under Subsection (3)(b).

548 (c) An individual employed in the emergency [room] department under this Subsection
549 (4) may obtain information from the database as provided in Subsection (4)(a) if:

550 (i) the employee is designated by the practitioner as an individual authorized to access
551 the information on behalf of the practitioner;

552 (ii) the practitioner and the hospital operating the emergency [room] department
553 provide written notice to the division of the identity of the designated employee; and

554 (iii) the division:

555 (A) grants the employee access to the database; and

556 (B) provides the employee with a password that is unique to that employee to access
557 the database in order to permit the division to comply with the requirements of Subsection
558 [58-37f-203\(5\)](#) with respect to the employee.

559 (d) The division may impose a fee, in accordance with Section [63J-1-504](#), on a
560 practitioner who designates an employee under Subsection (2)(i), (2)(j), or (4)(c) to pay for the
561 costs incurred by the division to conduct the background check and make the determination

562 described in Subsection (3)(b).

563 (5) (a) (i) An individual may request that the division provide the information under
564 Subsection (5)(b) to a third party who is designated by the individual each time a controlled
565 substance prescription for the individual is dispensed.

566 (ii) The division shall upon receipt of the request under this Subsection (5)(a) advise
567 the individual in writing that the individual may direct the division to discontinue providing the
568 information to a third party and that notice of the individual's direction to discontinue will be
569 provided to the third party.

570 (b) The information the division shall provide under Subsection (5)(a) is:

571 (i) the fact a controlled substance has been dispensed to the individual, but without
572 identifying the controlled substance; and

573 (ii) the date the controlled substance was dispensed.

574 (c) (i) An individual who has made a request under Subsection (5)(a) may direct that
575 the division discontinue providing information to the third party.

576 (ii) The division shall:

577 (A) notify the third party that the individual has directed the division to no longer
578 provide information to the third party; and

579 (B) discontinue providing information to the third party.

580 (6) (a) An individual who is granted access to the database based on the fact that the
581 individual is a licensed practitioner or a mental health therapist shall be denied access to the
582 database when the individual is no longer licensed.

583 (b) An individual who is granted access to the database based on the fact that the
584 individual is a designated employee of a licensed practitioner shall be denied access to the
585 database when the practitioner is no longer licensed.

586 (7) A probation or parole officer is not required to obtain a search warrant to access the
587 database in accordance with Subsection (2)(n).

588 (8) The division shall review and adjust the database programming which
589 automatically logs off an individual who is granted access to the database under Subsections

590 (2)(h), (2)(i), (2)(j), and (4)(c) to maximize the following objectives:

591 (a) to protect patient privacy;

592 (b) to reduce inappropriate access; and

593 (c) to make the database more useful and helpful to a person accessing the database

594 under Subsections (2)(h), (2)(i), (2)(j), and (4)(c), especially in high usage locations such as an
595 emergency department.

596 Section 3. Section **58-37f-304** is amended to read:

597 **58-37f-304. Database utilization.**

598 (1) As used in this section:

599 (a) "Dispenser" means a licensed pharmacist, as described in Section **58-17b-303**, or
600 the pharmacist's licensed intern, as described in Section **58-17b-304**, who is also licensed to
601 dispense a controlled substance under Title 58, Chapter 37, Utah Controlled Substances Act.

602 [~~(b) "Opioid" means those substances listed in Subsection **58-37-4(2)(b)(i)** or~~
603 ~~**(2)(b)(ii)**.]~~

604 [~~(c)~~] (b) "Outpatient" means a setting in which an individual visits a licensed
605 healthcare facility or a healthcare provider's office for a diagnosis or treatment but is not
606 admitted to a licensed healthcare facility for an overnight stay.

607 [~~(d)~~] (c) "Prescriber" means an individual authorized to prescribe a controlled
608 substance under Title 58, Chapter 37, Utah Controlled Substances Act.

609 [~~(2) To address the serious public health concern of life-altering and life-threatening~~
610 ~~opioid abuse and overdose, and to achieve the purposes of this chapter and as described in~~
611 ~~Section **58-37f-201**, which includes identifying and reducing the prescribing and dispensing of~~
612 ~~opioids in an unprofessional or unlawful manner or in quantities or frequencies inconsistent~~
613 ~~with generally recognized standards of dosage for an opioid, through utilization of the carefully~~
614 ~~developed and highly respected database:]~~

615 [~~(a) a prescriber or dispenser of an opioid for individual outpatient usage shall access~~
616 ~~and review the database as necessary in the prescriber's or dispenser's professional judgment~~
617 ~~and to achieve the purpose of this chapter as described in Section **58-37f-201**; (b) a]~~

618 (d) "Schedule II opioid" means those substances listed in Subsection 58-37-4(2)(b)(i)
619 or (2)(b)(ii).

620 (e) "Schedule III opioid" means those substances listed in Subsection 58-37-4(2)(c)
621 that are opioids.

622 (2) (a) A prescriber shall substantially comply with this Subsection (2).

623 (b) Except as provided in Subsection (2)(b), a prescriber shall check the database for
624 information about a patient before the first time the prescriber gives a prescription to a patient
625 for a Schedule II opioid or a Schedule III opioid.

626 (c) A prescriber is not required to check the database under Subsection (2)(b) if:

627 (i) the prescription for a Schedule II opioid or a Schedule III opioid is for three days or
628 fewer on the daily dosage instructions on the prescription;

629 (ii) the prescriber has prior knowledge of the patient's prescription history based on the
630 prescriber's review of the patient's health record; or

631 (iii) the prescription for a Schedule II opioid or a Schedule III opioid is a post surgical
632 prescription and the total duration of opioid written after the surgery has been for 30 days or
633 fewer.

634 (d) If a prescriber is repeatedly prescribing a Schedule II opioid or Schedule III opioid
635 to a patient, the prescriber shall periodically review information about the patient in:

636 (i) the database; or

637 (ii) other similar records of controlled substances the patient has filled.

638 (e) A prescriber may assign the access and review required under [Subsection (2)(a) to
639 an employee, in accordance with Subsections 58-37f-301(2)(g) and (h)] Subsections (2)(b) and
640 (2)(c) to one or more employees in accordance with Subsections 58-37f-301(2)(i) and (j).

641 (f) The division shall not take action against the license of a prescriber for failure to
642 follow this Subsection (2) if the prescriber demonstrates substantial compliance with the
643 requirements of this Subsection (2).

644 (3) The division shall, in collaboration with the licensing boards for prescribers and
645 dispensers:

646 (a) develop a system that gathers and reports to prescribers and dispensers the progress
647 and results of the prescriber's and dispenser's individual access and review of the database, as
648 provided in this section; and

649 (b) reduce or waive the division's continuing education requirements regarding opioid
650 prescriptions, described in Section 58-37-6.5, including the online tutorial and test relating to
651 the database, for prescribers and dispensers whose individual utilization of the database
652 ~~[contribute to the life-saving and public safety purposes of this section and as described in~~
653 Subsection (2)]., as determined by the division, demonstrates substantial compliance with this
654 section.

655 (4) If the dispenser's access and review of the database suggest that the individual
656 seeking an opioid may be obtaining opioids in quantities or frequencies inconsistent with
657 generally recognized standards as provided in this section and Section 58-37f-201, the
658 dispenser shall reasonably attempt to contact the prescriber to obtain the prescriber's informed,
659 current, and professional decision regarding whether the prescribed opioid is medically
660 justified, notwithstanding the results of the database search.

661 Section 4. Section 63I-1-258 is amended to read:

662 **63I-1-258. Repeal dates, Title 58.**

663 (1) Title 58, Chapter 13, Health Care Providers Immunity from Liability Act, is
664 repealed July 1, 2026.

665 (2) Title 58, Chapter 15, Health Facility Administrator Act, is repealed July 1, 2025.

666 (3) Title 58, Chapter 20a, Environmental Health Scientist Act, is repealed July 1, 2018.

667 (4) Section 58-37-4.3 is repealed July 1, 2021.

668 (5) Subsection 58-37-6(7)(f)(iii) is repealed July 1, 2022, and the Office of Legislative
669 Research and General Counsel is authorized to renumber the remaining subsections
670 accordingly.

671 ~~[(5)] (6)~~ Title 58, Chapter 40, Recreational Therapy Practice Act, is repealed July 1,
672 2023.

673 ~~[(6)] (7)~~ Title 58, Chapter 41, Speech-Language Pathology and Audiology Licensing

674 Act, is repealed July 1, 2019.

675 [~~7~~] (8) Title 58, Chapter 42a, Occupational Therapy Practice Act, is repealed July 1,
676 2025.

677 [~~8~~] (9) Title 58, Chapter 46a, Hearing Instrument Specialist Licensing Act, is
678 repealed July 1, 2023.

679 [~~9~~] (10) Title 58, Chapter 47b, Massage Therapy Practice Act, is repealed July 1,
680 2024.

681 [~~10~~] (11) Title 58, Chapter 61, Part 7, Behavior Analyst Licensing Act, is repealed
682 July 1, 2026.

683 [~~11~~] (12) Title 58, Chapter 72, Acupuncture Licensing Act, is repealed July 1, 2017.

684 [~~12~~] (13) Title 58, Chapter 86, State Certification of Commercial Interior Designers
685 Act, is repealed July 1, 2021.