



# Senate

General Assembly

**File No. 31**

January Session, 2005

Substitute Senate Bill No. 945

*Senate, March 16, 2005*

The Committee on General Law reported through SEN. COLAPIETRO of the 31st Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

## **AN ACT CONCERNING THE PRACTICE OF PHARMACY.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 20-581 of the general statutes is repealed and the  
2 following is substituted in lieu thereof (*Effective from passage*):

3 Any person who violates any provision of sections 20-570 to [20-  
4 630] 20-631, inclusive, and section 20-635 for the violation of which no  
5 other penalty has been provided shall be fined not more than five  
6 thousand dollars or imprisoned not more than five years or both. For  
7 purposes of this section, each instance of patient contact or  
8 consultation that is in violation of any provision of sections 20-570 to  
9 [20-630] 20-631, inclusive, and section 20-635 shall be a separate  
10 offense. Failure to renew in a timely manner any license issued under  
11 said sections is not a violation for purposes of this section.

12 Sec. 2. Section 21a-249 of the general statutes is amended by adding  
13 subsection (m) as follows (*Effective from passage*):

14 (NEW) (m) A practitioner authorized to prescribe controlled  
 15 substances shall not prescribe anabolic steroids for the sole purpose of  
 16 enhancing a patient's athletic ability or performance.

17 Sec. 3. (NEW) (*Effective from passage*) In the absence of a documented  
 18 patient evaluation that includes a physical examination, any request  
 19 for a controlled substance issued solely on the results of answers to an  
 20 electronic questionnaire shall be considered to be issued outside the  
 21 context of a valid practitioner-patient relationship and not be a valid  
 22 prescription. The Commissioner of Consumer Protection may adopt  
 23 regulations, in accordance with chapter 54 of the general statutes,  
 24 concerning such requests for controlled substances. For the purposes  
 25 of this section, "electronic questionnaire" means any form in an  
 26 electronic format that may require personal, financial or medical  
 27 information from a consumer or patient.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>from passage</i>	20-581
Sec. 2	<i>from passage</i>	21a-249
Sec. 3	<i>from passage</i>	New section

**GL**      *Joint Favorable Subst.*

The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either House thereof for any purpose:

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### **OFA Fiscal Note**

#### **State Impact:**

<b>Agency Affected</b>	<b>Fund-Effect</b>	<b>FY 06 \$</b>	<b>FY 07 \$</b>
Consumer Protection, Dept.; Judicial Dept.	GF - Revenue Gain	Less than 50,000 annually	Less than 50,000 annually

Note: GF=General Fund

**Municipal Impact:** None

#### **Explanation**

The bill establishes penalties under the Pharmacy Practice Act for violating the laws concerning collaborative drug therapy management agreements and prescription error reporting. Under the Pharmacy Practice Act a violator is subject to a fine up to \$5,000, imprisonment of up to five years, or both. In FY 04, the Commission of Pharmacy in the Department of Consumer Protection assessed \$4,200 in civil fines for violation of the Pharmacy Practice Act. Therefore, the bill could result in a minimal revenue gain for the Department of Consumer Protection.

The bill expands the scope of the Pharmacy Practice Act, which criminalizes certain behavior. It could therefore increase the number of individuals penalized by the imposition of a fine of up to \$5,000 and/or a period of imprisonment for up to one year. It is anticipated that few additional offenders will be subject to penalties since few prosecutions are made under the Act currently. Consequently, any revenue gain from criminal fines would be minimal.

**OLR Bill Analysis**

sSB 945

**AN ACT CONCERNING THE PRACTICE OF PHARMACY****SUMMARY:**

This bill (1) prohibits practitioners from prescribing anabolic steroids for the sole purpose of enhancing a patient's athletic ability or performance, (2) makes prescriptions for controlled substances invalid if they are based solely on the results of an electronic questionnaire and not a physical examination, and (3) establishes penalties for violating two pharmacy laws.

EFFECTIVE DATE: Upon passage

**PRESCRIPTIONS BASED ON ELECTRONIC QUESTIONNAIRES**

In the absence of a documented patient evaluation that includes a physical examination, the bill deems a request for a controlled substance issued solely on the results of answers to an electronic questionnaire to be issued outside of the context of a valid practitioner-patient relationship and not a valid prescription. It defines "electronic questionnaire" as a form in an electronic format that may ask the consumer or patient for personal, financial, or medical information. The bill authorizes the consumer protection commissioner to adopt regulations about these requests for controlled substances.

**PENALTIES**

The bill establishes penalties for violating the laws concerning collaborative drug therapy management agreements and prescription error reporting. The penalties are the same as those for all other provisions of the Pharmacy Practice Act; a violator is subject to a fine of up to \$5,000, imprisonment for up to five years, or both.

**BACKGROUND*****Anabolic Steroids***

Anabolic steroids are Schedule III controlled substances. Controlled substances are grouped in Schedules I through V, according to their decreasing tendency to promote abuse or dependency (Conn Agencies Reg. § 21a-243-9(f)).

### ***Collaborative Drug Therapy Management Agreements***

The law permits physicians and hospital pharmacists to enter collaborative agreements to manage the drug therapy of individuals receiving inpatient hospital services. The agreements must be based on written protocols and approved by the hospital. All treatments must be based on a written protocol specific to each patient (CGS § 20-631).

### ***Prescription Error Reporting***

The law requires the consumer protection commissioner to adopt regulations requiring pharmacies to establish quality assurance programs designed to detect, identify, and prevent prescription errors. It defines a "prescription error" as a clinically significant act or omission relating to the dispensing of a drug that results, or may reasonably be expected to result, in a patient's injury or death (CGS § 20-635).

## **COMMITTEE ACTION**

General Law Committee

Joint Favorable Substitute

Yea 12    Nay 0