



# House of Representatives

General Assembly

**File No. 173**

January Session, 2013

House Bill No. 6406

*House of Representatives, March 26, 2013*

The Committee on General Law reported through REP. BARAM of the 15th Dist., Chairperson of the Committee on the part of the House, that the bill ought to pass.

## **AN ACT CONCERNING THE ELECTRONIC PRESCRIPTION DRUG MONITORING PROGRAM.**

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

1 Section 1. Subsection (j) of section 21a-254 of the general statutes is  
2 repealed and the following is substituted in lieu thereof (*Effective from*  
3 *passage*):

4 (j) (1) The commissioner shall, within available appropriations,  
5 establish an electronic prescription drug monitoring program to  
6 collect, by electronic means, prescription information for schedules II,  
7 III, IV and V controlled substances, as defined in subdivision (9) of  
8 section 21a-240, that are dispensed by pharmacies, [and] nonresident  
9 pharmacies, as defined in section 20-627, outpatient pharmacies in  
10 hospitals or institutions or by any other dispenser, as defined in  
11 section 21a-240. The program shall be designed to provide information  
12 regarding the prescription of controlled substances in order to prevent  
13 the improper or illegal use of the controlled substances and shall not  
14 infringe on the legitimate prescribing of a controlled substance by a

15 prescribing practitioner acting in good faith and in the course of  
16 professional practice.

17 (2) The commissioner may identify other products or substances to  
18 be included in the electronic prescription drug monitoring program  
19 established pursuant to subdivision (1) of this subsection.

20 ~~[(2)]~~ (3) Each pharmacy, [and each] nonresident pharmacies, as  
21 defined in section 20-627, outpatient pharmacy in a hospital or  
22 institution and dispenser, as defined in section 21a-240, shall report to  
23 the commissioner, at least [twice monthly] weekly, by electronic means  
24 or, if a pharmacy or outpatient pharmacy does not maintain records  
25 electronically, in a format approved by the commissioner, the  
26 following information for all controlled substance prescriptions  
27 dispensed by such pharmacy or outpatient pharmacy: (A) Dispenser  
28 identification number; (B) the date the prescription for the controlled  
29 substance was filled; (C) the prescription number; (D) whether the  
30 prescription for the controlled substance is new or a refill; (E) the  
31 national drug code number for the drug dispensed; (F) the amount of  
32 the controlled substance dispensed and the number of days' supply of  
33 the controlled substance; (G) a patient identification number; (H) the  
34 patient's first name, last name and street address, including postal  
35 code; (I) the date of birth of the patient; (J) the date the prescription for  
36 the controlled substance was issued by the prescribing practitioner and  
37 the prescribing practitioner's Drug Enforcement Agency's  
38 identification number; and (K) the type of payment.

39 ~~[(3)]~~ (4) The commissioner may contract with a vendor for purposes  
40 of electronically collecting such controlled substance prescription  
41 information. The commissioner and any such vendor shall maintain  
42 the information in accordance with the provisions of chapter 400j.

43 ~~[(4)]~~ (5) The commissioner and any such vendor shall not disclose  
44 controlled substance prescription information reported pursuant to  
45 subdivision ~~[(2)]~~ (3) of this subsection, except as authorized pursuant  
46 to the provisions of sections 21a-240 to 21a-283, inclusive. Any person  
47 who knowingly violates any provision of this subdivision or

48 subdivision [(3)] (4) of this subsection shall be guilty of a class D  
49 felony.

50 [(5)] (6) The commissioner shall provide, upon request, controlled  
51 substance prescription information obtained in accordance with  
52 subdivision [(2)] (3) of this subsection to the following: (A) The  
53 prescribing practitioner who is treating or has treated a specific  
54 patient, provided the information is obtained for purposes related to  
55 the treatment of the patient, including the monitoring of controlled  
56 substances obtained by the patient; (B) the prescribing practitioner  
57 with whom a patient has made contact for the purpose of seeking  
58 medical treatment, provided the request is accompanied by a written  
59 consent, signed by the prospective patient, for the release of controlled  
60 substance prescription information; or (C) the pharmacist who is  
61 dispensing controlled substances for a patient, provided the  
62 information is obtained for purposes related to the scope of the  
63 pharmacist's practice and management of the patient's drug therapy,  
64 including the monitoring of controlled substances obtained by the  
65 patient. The prescribing practitioner or pharmacist shall submit a  
66 written and signed request to the commissioner for controlled  
67 substance prescription information. Such prescribing practitioner or  
68 pharmacist shall not disclose any such request except as authorized  
69 pursuant to sections 20-570 to 20-630, inclusive, or sections 21a-240 to  
70 21a-283, inclusive.

71 (7) No person or employer shall prohibit, discourage or impede a  
72 prescribing practitioner or pharmacist from requesting controlled  
73 substance prescription information pursuant to this subsection.

74 [(6)] (8) The commissioner shall adopt regulations, in accordance  
75 with chapter 54, concerning the reporting, evaluation, management  
76 and storage of electronic controlled substance prescription  
77 information.

78 Sec. 2. Section 21a-317 of the general statutes is repealed and the  
79 following is substituted in lieu thereof (*Effective from passage*):

80 Every practitioner who distributes, administers or dispenses any  
 81 controlled substance or who proposes to engage in distributing,  
 82 prescribing, administering or dispensing any controlled substance  
 83 within this state shall (1) obtain a certificate of registration issued by  
 84 the Commissioner of Consumer Protection in accordance with the  
 85 provisions of this chapter, and (2) register for access to the electronic  
 86 prescription drug monitoring program established pursuant to  
 87 subsection (j) of section 21a-254, as amended by this act. Registration  
 88 for access to said program shall be in a manner prescribed by said  
 89 commissioner.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>from passage</i>	21a-254(j)
Sec. 2	<i>from passage</i>	21a-317

**GL** Joint Favorable

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

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***OFA Fiscal Note******State Impact:*** None***Municipal Impact:*** None***Explanation***

There is no fiscal impact to the Department of Consumer Protection (DCP) in requiring additional prescription information reporting by impacted entities as the DCP prescription monitoring system requires no modifications due to the bill.

***The Out Years******State Impact:*** None***Municipal Impact:*** None

**OLR Bill Analysis****HB 6406*****AN ACT CONCERNING THE ELECTRONIC PRESCRIPTION DRUG MONITORING PROGRAM.*****SUMMARY:**

This bill expands the electronic prescription drug monitoring program by requiring prescription information reporting by (1) out-of-state pharmacies that ship, mail, or deliver prescription drugs into the state and (2) any other drug dispensing practitioner. Practitioners include certain medical professionals (physicians, dentists, veterinarians, and podiatrists), researchers, pharmacies, hospitals, and other people or institutions permitted to dispense drugs in the course of professional practice or research. Currently, pharmacies and out-patient pharmacies in hospitals or institutions must report information.

Currently, the program collects information on schedules II through V controlled substances. The bill allows the Department of Consumer Protection (DCP) commissioner to identify additional products to be included in the program.

The bill requires a weekly report from covered pharmacies and practitioners, rather than the twice monthly report currently required.

The bill prohibits any person or employer from preventing a participating prescribing practitioner or pharmacy from requesting controlled substance prescription information from DCP.

The bill requires practitioners who distribute, administer, or dispense controlled substances, or who seek to do so, to register for access to the program, in a manner DCP's chooses, in addition to the current requirement for such practitioners to register with DCP. These

practitioners include certain medical professionals (physicians, dentists, veterinarians, podiatrists, optometrists, physician assistants, advanced practice registered nurses, and nurse-midwives) scientific investigators, hospitals, and other people or institutions who dispense in the course of professional practice or research.

EFFECTIVE DATE: Upon passage

## **BACKGROUND**

### ***Electronic Prescription Drug Monitoring Program***

This program requires DCP to collect prescription information to prevent improper or illegal drug use. Pharmacists must electronically report certain drug information to DCP, including the dispensing date, dispenser identification and prescription number, and certain patient identification data.

### ***Related Bills***

HB 6389, reported favorably by the Public Health Committee, also requires practitioners who distribute, administer, or dispense controlled substances, or who seek to do so, to register for access to the program. It takes effect October 1, 2013.

HB 5906, reported favorably by the General Law Committee, requires practitioners who distribute, prescribe, administer, or dispense controlled substances, or who seek to do so, to access the program and review their patient's history with controlled substances before do so.

## **COMMITTEE ACTION**

General Law Committee

Joint Favorable

Yea 18    Nay 0    (03/12/2013)