



HB 49 – SB 529

April 10, 2013

SUMMARY OF ORIGINAL BILL: Reduces, from a Class B to a Class C misdemeanor, the offense of practicing medicine or surgery without first obtaining the applicable, valid certificate.

FISCAL IMPACT OF ORIGINAL BILL:

NOT SIGNIFICANT

SUMMARY OF AMENDMENT (006245): Deletes all language after the enacting clause.

Prohibits nurse practitioners and physician assistants from prescribing schedule II, III, and IV controlled substances unless the prescription in question is specifically authorized by the formulary or expressly approved after consultation with the supervising physician before initial issuance of the prescription or before dispensing the medication.

Limits the schedule II or III opioid that nurse practitioners and physician assistants can prescribe to an opioid listed on the formulary and only for a maximum of a non-refillable, thirty-day course of treatment, unless the prescription in question is specifically authorized by the formulary or expressly approved after consultation with the supervising physician before initial issuance of the prescription or before dispensing the medication.

Requires the Department of Health, by July 1st of each year to:

- Identify the 50 prescribers of controlled substances from the previous calendar year from the data available in the controlled substances monitoring database;
- Send a letter to each advanced practice nurse, physician assistant, and physician on the list and, if applicable, to such nurse's or physician assistant's supervising physician, notifying the supervising physician that the nurse or physician assistant has been identified, and the letter shall contain:
 - The significant controlled substances prescribed by the advanced practice nurse, physician assistant, or physician;
 - The number of patients prescribed these controlled substances by the advanced practice nurse, physician assistant, or physician;
 - The total milligrams in morphine equivalents of controlled substances prescribed during the relevant period of time; and
 - Any other relevant information sought by the department.

Within 15 business days of receiving the letter, the supervising physician or physician shall submit to the Department an explanation justifying the amounts of controlled substances

prescribed by the nurse or physician assistant in the relevant period of times, demonstrating that these amounts were medically necessary and that the supervising physician had reviewed and approved the amounts or that the amounts prescribed by the physician are justifiable.

Authorizes the Department of Health to develop a form to assist physicians and supervising physicians when completing an explanation. Further authorizes the Department to contract with an expert reviewer to determine if the explanation is acceptable.

If the Department is unsatisfied with a physician's or supervising physician's explanation, the physician or supervising physician may attempt to rectify the concerns. If the Department remains unsatisfied, then the committee may turn the matter over to the member of the Controlled Substance Database Committee who represents the board which has licensed the individual.

All records relevant to the identification of the nurses, physician assistants, or physician as well as the physicians' or supervising physicians' explanations shall be confidential, but may be used by the Department of Health or other appropriate entity to build a case against a nurse, physician assistant, physician, or supervising physician. All correspondence shall be maintained for five years and organized by prescriber so that any future matters may be aggregated.

Failure to timely respond to the department's request for information by the nurse, physician assistant, physician, or supervising physician may be cause for disciplinary action by the physician's or supervising physicians' licensing board and may include a penalty up to \$1,000 per day for failure to respond or failure to respond in a timely manner.

FISCAL IMPACT OF BILL WITH PROPOSED AMENDMENT:

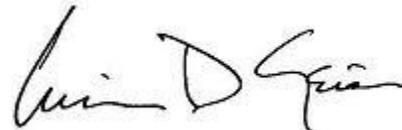
Unchanged from the original fiscal note.

Assumption for the bill as amended:

- According to the Department of Health, the bill as amended will not significantly change the current operations of the Department. Any changes can be handled within the Department's existing resources.

CERTIFICATION:

The information contained herein is true and correct to the best of my knowledge.



Lucian D. Geise, Executive Director

/jdb