

By the Committee on Health, Aging and Long-Term Care; and  
Senator Burt

317-1775A-02

1                                   A bill to be entitled  
2           An act relating to controlled substances;  
3           providing for specified licensing boards to  
4           adopt rules governing the prescribing of  
5           controlled substances; requiring certain health  
6           care providers to complete education courses  
7           relating to the prescription of controlled  
8           substances; providing penalties and requiring a  
9           report; providing for the emergency suspension  
10          of certain licenses for prescribing violations;  
11          requiring the Department of Health and the  
12          Department of Law Enforcement to share certain  
13          information regarding health care  
14          practitioners; requiring a report; requiring  
15          the Department of Legal Affairs to establish an  
16          electronic system to monitor the prescribing of  
17          certain controlled substances; establishing an  
18          advisory council and providing for its  
19          membership, duties, staff, and compensation;  
20          amending s. 456.033, F.S.; eliminating certain  
21          requirements for HIV and AIDS education  
22          courses; amending s. 456.072, F.S., revising  
23          penalties; amending s. 458.345, F.S.; requiring  
24          certain resident physicians, interns, and  
25          fellows to complete an educational course in  
26          prescribing controlled substances; amending s.  
27          461.013, F.S.; prohibiting the presigning of  
28          blank prescription forms and providing  
29          penalties; amending s. 893.04, F.S.; providing  
30          additional requirements for pharmacists  
31          regarding the identification of persons to whom

1 controlled substances are dispensed;  
2 prohibiting certain prescribing practitioners  
3 from possessing, administering, dispensing, or  
4 prescribing controlled substances; creating s.  
5 893.065, F.S.; establishing protocols requiring  
6 prescriptions for certain controlled substances  
7 to be issued on special forms developed by the  
8 Department of Legal Affairs; establishing  
9 requirements for the design, issuance, and  
10 control of such forms; providing record-keeping  
11 requirements; providing other requirements for  
12 the use of such forms; providing an effective  
13 date.

14  
15 Be It Enacted by the Legislature of the State of Florida:

16  
17 Section 1. Physicians; rules establishing prescribing  
18 guidelines.--To minimize the diversion and resultant abuse of  
19 controlled substances, the Board of Medicine and the Board of  
20 Osteopathic Medicine shall adopt rules to establish guidelines  
21 for prescribing controlled substances to patients in  
22 emergency-department settings. Such guidelines must allow  
23 physicians to provide legitimate medical treatment of acute  
24 and chronic pain and require them to recognize and prevent  
25 abuse of pain medications prescribed in emergency-department  
26 settings. The guidelines must also consider requirements of  
27 state and federal law and of the Joint Commission on the  
28 Accreditation of Healthcare Organizations. Each board shall  
29 consult with the Florida College of Emergency Physicians in  
30 developing these guidelines.

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1           Section 2. Instruction required for certain licensees  
2 in prescribing and pharmacology.--

3           (1) The appropriate professional licensing board shall  
4 require each person licensed under chapter 458, chapter 459,  
5 chapter 461, chapter 462, or chapter 466, Florida Statutes, to  
6 complete a 1-hour educational course, approved by the board,  
7 on appropriate prescribing and pharmacology of controlled  
8 substances, as part of the licensee's initial license renewal  
9 after January 1, 2003. The course shall provide education in  
10 the state and federal laws and rules governing the prescribing  
11 and dispensing of controlled substances; in appropriate  
12 evaluation of patients for any risk of drug diversion and the  
13 resulting abuse of controlled substances; in the use of  
14 informed consent and other protocols, such as discussing the  
15 risks and benefits of using controlled substances, with  
16 patients to prevent drug diversion; in the need to keep  
17 accurate and complete medical records to justify treatment  
18 with controlled substances; in addiction and substance-abuse  
19 issues with respect to patients; in the appropriate use of  
20 recognized pain-management guidelines; and in the need for  
21 consultation and referral of patients who are at risk for  
22 misuse of medication or diversion of controlled substances,  
23 when appropriate.

24           (2) The board may approve additional equivalent  
25 courses that satisfy the requirements of subsection (1). Each  
26 licensing board that requires a licensee to complete an  
27 educational course pursuant to this section shall include the  
28 hours required to complete the course in the total required  
29 continuing educational requirements.

30           (3) Any person who holds two or more licenses subject  
31 to this section may satisfy the requirements of this section

1 by taking only one such board-approved course for relicensure  
2 of all such licenses.

3 (4) A licensee who fails to comply with this section  
4 is subject to disciplinary action under each respective  
5 practice act and section 456.072(1)(k), Florida Statutes. In  
6 addition to discipline by the board, the licensee must  
7 complete the course.

8 (5) The board shall require, as a condition of  
9 granting a license under the chapter specified in subsection  
10 (1), that an applicant for initial licensure complete an  
11 educational course set forth in subsection (1). An applicant  
12 who has not taken a course at the time of licensure shall be  
13 allowed 6 months within which to complete this requirement.

14 (6) The board may adopt rules necessary to administer  
15 this section.

16 Section 3. Emergency suspension orders; controlled  
17 substances.--Upon receipt of sufficient evidence from any  
18 agency authorized to enforce chapter 893, Florida Statutes,  
19 regarding a violation of section 458.331(1)(q), section  
20 458.331(1)(r), section 458.331(1)(aa), section 459.015(1)(t),  
21 section 459.015(1)(u), section 459.015(1)(ee), section  
22 461.013(1)(o), section 461.013(1)(p), section 461.013(1)(dd),  
23 section 462.14(1)(q), section 462.14(1)(r), section  
24 462.14(1)(aa), section 464.018(1)(i), section 465.016(1)(e),  
25 section 465.016(1)(i), section 466.028(1)(p), section  
26 466.028(1)(q), section 466.028(1)(r), or section  
27 466.028(1)(dd) or of chapter 893, Florida Statutes, by a  
28 licensed health care practitioner who is authorized to  
29 prescribe, dispense, or administer controlled substances, the  
30 Department of Health shall review the case and if the  
31 practitioner is a danger to the public health, safety, or

1 welfare of the public as set forth in section 120.60(6),  
2 Florida Statutes, recommend the suspension or restriction of  
3 the practitioner's license to the Secretary of Health within  
4 10 working days after receiving such evidence. The Secretary  
5 of Health may suspend or restrict the license of the  
6 practitioner in accordance with section 120.60(6), Florida  
7 Statutes.

8       Section 4. Sharing of arrest and other information  
9 regarding certain health care practitioners.--In order to  
10 facilitate the efficiency of the Department of Health's  
11 investigation of applicable violations involving the diversion  
12 of controlled substances by such practitioners, the Department  
13 of Law Enforcement shall, when practicable, notify and provide  
14 investigative information to the Department of Health  
15 regarding the arrest of any licensed health care practitioner  
16 who is authorized to prescribe, dispense, or administer  
17 controlled substances.

18       (1) The Medical Examiner's Commission within the  
19 Department of Law Enforcement shall report quarterly to the  
20 Department of Health any deaths attributed to the abuse of  
21 controlled substances, based on autopsy reports completed  
22 within this state, and any other public information that may  
23 facilitate that department's expeditious investigation of the  
24 information to determine whether any of the deaths have  
25 involved conduct by a licensed health care practitioner which  
26 is subject to disciplinary action under section 456.073,  
27 Florida Statutes. The Department of Health or the board having  
28 regulatory authority over the practitioner shall investigate  
29 any information received by the department or the board when  
30 it has reasonable grounds to believe that the practitioner has  
31 violated any law relating to the practitioner's practice.

1           (2) To help the Department of Health and regulatory  
2 boards control the diversion and resultant abuse of controlled  
3 substances, the Department of Health and the Department of Law  
4 Enforcement shall study the feasibility of expanding the  
5 electronic exchange of information to facilitate the transfer  
6 to the Department of Health of criminal history information  
7 involving licensed health care practitioners who are  
8 authorized to prescribe, administer, or dispense controlled  
9 substances. The Department of Law Enforcement shall  
10 investigate the feasibility of the electronic transmission of  
11 information from medical examiners within this state to the  
12 Department of Health regarding autopsies and other public  
13 reports that attribute death to controlled-substance abuse.  
14 The Department of Law Enforcement, in consultation with the  
15 Department of Health, must submit a report of its findings to  
16 the Legislature by November 1, 2002.

17           Section 5. Electronic monitoring system for  
18 prescriptions.--

19           (1) By July 1, 2003, the Department of Legal Affairs  
20 shall design and establish an electronic system consistent  
21 with the National Council of Prescription Drug Programs  
22 (NCPDP) standards to monitor the prescribing of Schedule II  
23 controlled substances, other drugs designated by rule by the  
24 Attorney General under this section, and codeine, hydrocodone,  
25 dihydrocodeine, ethylmorphine, and morphine, as scheduled in  
26 Schedule II and Schedule III, by health care practitioners  
27 within the state or the dispensing of such controlled  
28 substances to an address within the state by a pharmacy  
29 permitted or registered by the Board of Pharmacy.

30           (2) All Schedule II controlled substances, and codeine  
31 hydrocodone, dihydrocodeine, ethylmorphine, and morphine as

1 scheduled in Schedule II and Schedule III, and any other drug  
2 designated by the Attorney General under this section shall be  
3 included in the electronic monitoring system. The Attorney  
4 General may, by rule, designate any other drug for inclusion  
5 in such system after making a determination that the drug is a  
6 drug of abuse. The Attorney General must consider the  
7 recommendations of the prescription-monitoring advisory  
8 council created by this section before designating a drug of  
9 abuse for inclusion in the electronic monitoring system and  
10 only after he or she determines that the current level of  
11 regulation over the prescribing and dispensing of such drug is  
12 inadequate and that the drug has a high potential for abuse or  
13 is being excessively misused, abused, or diverted into illicit  
14 drug trafficking.

15 (3) Each controlled substance or drug subject to this  
16 section which is dispensed in this state must be timely  
17 reported to the Department of Legal Affairs. Such data must be  
18 reported each time that:

19 (a) A Schedule II controlled substance is dispensed;

20 (b) A drug that is designated by the Attorney General  
21 under subsection (2) is dispensed; or

22 (c) Codeine, hydrocodone, dihydrocodeine,  
23 ethylmorphine, or morphine as scheduled in Schedule II and  
24 Schedule III is dispensed.

25 (4) This section does not apply to controlled  
26 substances or drugs:

27 (a) Ordered from an institutional pharmacy licensed  
28 under section 465.019(2), Florida Statutes, in accordance with  
29 the institutional policy for such controlled substances or  
30 drugs; or

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1           (b) Administered by a health care practitioner to a  
2 patient or resident receiving care from a hospital, nursing  
3 home, assisted living facility, home health agency, hospice,  
4 or intermediate care facility for the developmentally disabled  
5 which is licensed in this state.

6           (5) The data required under this section includes:

7           (a) The patient's name.

8           (b) The patient's address.

9           (c) The national drug code number of the substance  
10 dispensed.

11           (d) The date that the substance is dispensed.

12           (e) The quantity of substance dispensed.

13           (f) The dispenser's National Association of Board's of  
14 Pharmacy (NABP) number.

15           (g) The prescribing practitioner's United States Drug  
16 Enforcement Administration Number.

17           (6) The information must be reported within 30 days  
18 after the date the controlled substance or drug is dispensed.

19           (7) A dispenser must transmit the information required  
20 by this section in an electronic format approved by rule of  
21 the Board of Pharmacy after consultation with the advisory  
22 council and the Department of Legal Affairs unless a specific  
23 waiver is granted to that dispenser by the Department of Legal  
24 Affairs.

25           (8) The Department of Legal Affairs shall establish a  
26 13-member prescription-monitoring program advisory council to  
27 assist it in identifying drugs of abuse for inclusion in the  
28 monitoring system and in implementing the system.

29           (a) The Governor shall appoint members to serve on the  
30 advisory council. The members of the council shall include the  
31 Attorney General or his or her designee who shall serve as the



1 \_\_\_\_\_  
2 the executive director of the Department of Law Enforcement or  
3 his or her designee; the director of the Office of Drug  
4 \_\_\_\_\_  
5 designee; a physician who is licensed in this state under  
6 chapter 458, Florida Statutes, who is recommended by the  
7 \_\_\_\_\_  
8 this state under chapter 459, Florida Statutes, who is  
recommended by the Florida Osteopathic Medical Association; a  
podiatric physician who is licensed in this state under  
chapter 461, Florida Statutes, who is recommended by the  
Florida Podiatric Medical Association; a pharmacist who is  
licensed in this state under chapter 465, Florida Statutes,  
who is recommended by the Florida Pharmacy Association; a  
pharmacist who is licensed in this state under chapter 465,  
Florida Statutes, who is recommended by the Florida Retail  
Federation; a pharmacist who is licensed in this state under  
chapter 465, Florida Statutes, who is recommended by the  
National Community Pharmacy Association; a dentist who is  
licensed in this state under chapter 466, Florida Statutes,  
who is recommended by the Florida Dental Association; a  
veterinarian who is licensed in this state under chapter 474,  
Florida Statutes, who is recommended by the Florida Veterinary  
Medical Association; and a prosecutor who has expertise in the  
criminal prosecution of drug-diversion cases.

(b) The advisory council members shall meet no more  
often than quarterly at the call of the chairperson, and serve  
without compensation. However, such members may receive  
reimbursement, as provided in section 112.061, Florida  
Statutes, for per diem and travel expenses incurred in the  
performance of their official duties.

**CODING:**            ~~stricken~~                            underlined



1           (9)~~(a)~~ In lieu of completing a course as required in  
2 subsection (1), the licensee may complete a course in  
3 end-of-life care and palliative health care, so long as the  
4 licensee completed an approved AIDS/HIV course in the  
5 immediately preceding biennium.

6           ~~(b) In lieu of completing a course as required by~~  
7 ~~subsection (1), a person licensed under chapter 466 who has~~  
8 ~~completed an approved AIDS/HIV course in the immediately~~  
9 ~~preceding 2 years may complete a course approved by the Board~~  
10 ~~of Dentistry.~~

11           Section 7. Paragraph (d) of subsection (2) of section  
12 456.072, Florida Statutes, is amended to read:

13           456.072 Grounds for discipline; penalties;  
14 enforcement.--

15           (2) When the board, or the department when there is no  
16 board, finds any person guilty of the grounds set forth in  
17 subsection (1) or of any grounds set forth in the applicable  
18 practice act, including conduct constituting a substantial  
19 violation of subsection (1) or a violation of the applicable  
20 practice act which occurred prior to obtaining a license, it  
21 may enter an order imposing one or more of the following  
22 penalties:

23           (d) Imposition of an administrative fine not to exceed  
24 \$25,000~~\$10,000~~ for each count or separate offense. If the  
25 violation is for fraud or making a false or fraudulent  
26 representation, the board, or the department if there is no  
27 board, must impose a fine of \$10,000 per count or offense.

28           Section 8. Paragraph (d) is added to subsection (1) of  
29 section 458.345, Florida Statutes, to read:

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1           458.345 Registration of resident physicians, interns,  
2 and fellows; list of hospital employees; prescribing of  
3 medicinal drugs; penalty.--

4           (1) Any person desiring to practice as a resident  
5 physician, assistant resident physician, house physician,  
6 intern, or fellow in fellowship training which leads to  
7 subspecialty board certification in this state, or any person  
8 desiring to practice as a resident physician, assistant  
9 resident physician, house physician, intern, or fellow in  
10 fellowship training in a teaching hospital in this state as  
11 defined in s. 408.07(44) or s. 395.805(2), who does not hold a  
12 valid, active license issued under this chapter shall apply to  
13 the department to be registered and shall remit a fee not to  
14 exceed \$300 as set by the board. The department shall  
15 register any applicant the board certifies has met the  
16 following requirements:

17           (d) Has completed, upon initial registration, the  
18 1-hour educational course in the prescribing of controlled  
19 substances as set forth in section 2 of this act. An applicant  
20 who has not taken a course at the time of registration shall  
21 be allowed up to 6 months within which to complete this  
22 requirement.

23           Section 9. Paragraph (dd) is added to subsection (1)  
24 of section 461.013, Florida Statutes, to read:

25           461.013 Grounds for disciplinary action; action by the  
26 board; investigations by department.--

27           (1) The following acts constitute grounds for denial  
28 of a license or disciplinary action, as specified in s.  
29 456.072(2):

30           (dd) Presigning blank prescription forms.

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1           Section 10. Paragraphs (h), (i), (j), (k), and (l) are  
2 added to subsection (1) of section 893.04, Florida Statutes,  
3 to read:

4           893.04 Pharmacist and practitioner.--

5           (1) A pharmacist, in good faith and in the course of  
6 professional practice only, may dispense controlled substances  
7 upon a written or oral prescription of a practitioner, under  
8 the following conditions:

9           (h) A pharmacist may not dispense a Schedule II  
10 controlled substance; codeine, hydrocodone, dihydrocodeine,  
11 ethylmorphine, or morphine, as scheduled in Schedule II and  
12 Schedule III; or drug of abuse designated by the Attorney  
13 General by rule under the prescription-monitoring system to  
14 any individual not personally known to the pharmacist, without  
15 first obtaining suitable identification and documenting, by  
16 signature on a log book kept by the pharmacist, the identity  
17 of the individual obtaining the controlled substance. If the  
18 individual does not have suitable identification or it is  
19 impracticable to obtain such identification, the pharmacist  
20 must verify the validity of the prescription and identity of  
21 the patient with the prescribing practitioner, or the  
22 prescribing practitioner's authorized agent, before dispensing  
23 the controlled substance or drug as provided by rule of the  
24 Board of Pharmacy. The Board of Pharmacy must adopt, by rule,  
25 procedures for a pharmacist to verify the validity of a  
26 prescription for a Schedule II controlled substance; other  
27 drug designated by the Attorney General under this section; or  
28 codeine, hydrocodone, dihydrocodeine, ethylmorphine, or  
29 morphine, as scheduled in Schedule II and Schedule III, for  
30 circumstances when it is otherwise impracticable for the  
31 pharmacist or dispensing practitioner to obtain suitable

2 identification from the patient or the patient's agent. For

3 it contains the photograph, the printed name, and the  
4 signature of the individual obtaining the Schedule II

5 \_\_\_\_\_  
6 prescription-monitoring system.

7 (i) Any pharmacist that dispenses a Schedule II

8 \_\_\_\_\_  
9 this section when dispensed by mail shall be exempt from the  
10 requirements to obtain suitable identification.

11 (j) All prescriptions issued for a Schedule II  
12 controlled substance; codeine, hydrocodone, dihydrocodeine,  
13 ethylmorphine, or morphine, as scheduled in Schedule II and  
14 Schedule III; or a drug of abuse under the  
15 prescription-monitoring system which has been designated by  
16 the Attorney General by rule, must include both a written and  
17 numerical notation of quantity on the face of the  
18 prescription.

19 (k) A pharmacist may not dispense more than a 30-day  
20 supply of a controlled substance listed in Schedule III upon  
21 an oral prescription.

22 (l) A pharmacist may not knowingly fill a prescription  
23 that has been mutilated or forged for a Schedule II controlled  
24 substance; codeine, hydrocodone, dihydrocodeine,  
25 ethylmorphine, and morphine, as scheduled in Schedule II and  
26 Schedule III; or a drug of abuse under the  
27 prescription-monitoring system which has been designated by  
28 the Attorney General by rule.

29 Section 11. Section 893.065, Florida Statutes, is  
30 created to read:

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1           893.065 Prescriptions required for certain controlled  
2 substances.--

3           (1) On or after July 1, 2002, a person may not issue a  
4 prescription for a Schedule II controlled substance; codeine,  
5 hydrocodone, dihydrocodeine, ethylmorphine, or morphine, as  
6 scheduled in Schedule II and Schedule III; or any drug  
7 included as a drug of abuse under the prescription-monitoring  
8 system which has been designated by the Attorney General by  
9 rule, unless the prescription meets the requirements of this  
10 section.

11           (2) The Department of Legal Affairs shall develop a  
12 counterfeit-proof prescription blank for use by practitioners  
13 who prescribe controlled substances classified in:

14           (a) Schedule II;

15           (b) Any drug that is designated by the Attorney  
16 General by rule under subsection (1).

17           (c) Schedule II or Schedule III as codeine,  
18 hydrocodone, dihydrocodeine, ethylmorphine, or morphine.

19           (3) Prescription blanks shall be issued by the  
20 Department of Legal Affairs to such practitioners. The  
21 prescription blanks must be printed on distinctive paper and  
22 must bear the preprinted full name, address, and category of  
23 professional licensure of the practitioner to whom they are  
24 issued and that practitioner's federal registry number for  
25 controlled substances. The prescription blanks may not be  
26 transferred.

27           (4) The Department of Legal Affairs must cover all  
28 costs for the electronic prescription-monitoring program,  
29 including the department's actual costs of preparing, issuing,  
30 and tracking prescription blanks.

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1           (5) Notwithstanding s. 893.04(1)(a)-(d), a person may  
2 not prescribe a Schedule II controlled substance; codeine,  
3 hydrocodone, dihydrocodeine, ethylmorphine, or morphine, as  
4 scheduled in Schedule II and Schedule III; or any drug which  
5 has been designated by the Attorney General by rule under  
6 subsection (1), nor may any person fill, compound, or dispense  
7 such a prescription, unless it complies with this section.

8           (a) The signature on each such prescription form must  
9 be wholly written in ink or indelible pencil in the  
10 handwriting of the prescribing practitioner. Each prescription  
11 must be prepared, dated, and signed by the prescribing  
12 practitioner on the day when issued, and must contain,  
13 typewritten or handwritten by the physician or an employee of  
14 the physician, the full name and address of the person for  
15 whom, or the owner of the animal for which, the controlled  
16 substance is prescribed; the name, quantity, and strength of  
17 the controlled substance; directions for use; and the address,  
18 category of professional licensure, and federal controlled  
19 substance registration number of the prescribing practitioner.  
20 If the prescription is for an animal, the prescription must  
21 state the species of animal for which it is prescribed. If the  
22 prescribing practitioner does not specify the address of the  
23 person for whom, or animal for which, the prescription is  
24 prescribed, the pharmacist filling the prescription or an  
25 employee acting under the direction of the pharmacist must  
26 write or type the address on the prescription or maintain the  
27 information in a readily retrievable form in the pharmacy.

28           (b) The original of the prescription must be delivered  
29 to the pharmacist filling the prescription. The original must  
30 be retained on file by the proprietor of the pharmacy in which  
31 it is filled for a period of 2 years, properly endorsed by the



1 pharmacist with the name and address of the pharmacy, the  
2 pharmacy's state permit number, the date that the prescription  
3 was filled, and the signature of the pharmacist, and a copy  
4 must be available for inspection by the Department of Legal  
5 Affairs. Notwithstanding any provision of this section, the  
6 prescribing practitioner's address, category of professional  
7 licensure, or federal controlled substances registration  
8 number need not appear on the prescription if that information  
9 is readily retrievable in the pharmacy.

10 (c) All prescriptions issued for a Schedule II  
11 controlled substance; codeine, hydrocodone, dihydrocodeine,  
12 ethylmorphine, or morphine, as scheduled in Schedule II and  
13 Schedule III; or any drug which has been designated by the  
14 Attorney General by rule under subsection (1), must include  
15 both a written and numerical notation of quantity on the face  
16 of the prescription.

17 (d) A pharmacist may not dispense more than a 30-day  
18 supply of a controlled substance listed in Schedule III upon  
19 an oral prescription.

20 (e) A pharmacist may not knowingly fill a prescription  
21 that has been mutilated or forged for a Schedule II controlled  
22 substance; codeine, hydrocodone, dihydrocodeine,  
23 ethylmorphine, or morphine, as scheduled in Schedule II and  
24 Schedule III; or any drug which has been designated by the  
25 Attorney General by rule under subsection (1).

26 (f) Any controlled substance listed in Schedule III;  
27 codeine, hydrocodone, dihydrocodeine, ethylmorphine, or  
28 morphine, as scheduled in Schedule II and Schedule III; or any  
29 drug which has been designated by the Attorney General by rule  
30 under subsection (1), may be dispensed by a pharmacist upon an  
31 oral prescription, if before filling the prescription, the

1 pharmacist reduces it to writing in ink or indelible pencil in  
2 the handwriting of the pharmacist, upon an official form  
3 issued by the Department of Legal Affairs for that purpose.

4 Such prescriptions must contain the date of the oral  
5 authorization and the information required by paragraph (a).

6 (6) Any pharmacist that dispenses a Schedule II  
7 controlled substance or drug subject to the requirements of  
8 this section when dispensed by mail shall be exempt from the  
9 requirements to use the required prescription blanks.

10 Section 12. This act shall take effect July 1, 2002.

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1 STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN  
2 COMMITTEE SUBSTITUTE FOR  
3 Senate Bill 636

4 The Committee Substitute for SB 636 revises requirements for  
5 an electronic prescription monitoring system in Florida for  
6 controlled substances to limit the drugs covered by the system  
7 to controlled substances in Schedule II; codeine, hydrocodone,  
8 dihydrocodeine, ethylmorphine, and morphine, as scheduled in  
9 Schedule II and Schedule III; and other drugs as designated by  
10 the Attorney General, by rule. The Attorney General may, by  
11 rule, designate any other drug for inclusion in the system  
12 after making a determination that the drug is a drug of abuse  
13 and the consideration of specified criteria.

14 An exemption to the reporting requirements of the prescription  
15 monitoring system is created for controlled substances or  
16 drugs that: (1) are ordered from an institutional pharmacy  
17 licensed under s. 465.19(2), F.S., in accordance with  
18 institutional policy for such controlled substances or drugs;  
19 or (2) are administered by a health care practitioner to a  
20 patient or resident receiving care from a hospital, nursing  
21 home, assisted living facility, home health agency, hospice or  
22 intermediate care facility for the developmentally disabled  
23 which is licensed in Florida.

24 The bill revises the requirements for special prescription  
25 blanks to require only a single-copy counterfeit-proof  
26 prescription blank and limits the scope of drugs to be covered  
27 by the blanks to those covered by the electronic prescription  
28 monitoring system. An exemption to the requirements for the  
29 prescription blanks is created for drugs dispensed through the  
30 mail in Florida.

31 The bill revises the membership and duties of the prescription  
monitoring program advisory council.

The bill deletes provisions that require the Department of  
Health or boards to impose a mandatory \$25,000 fine per count  
or offense if the violation is for inappropriate or excessive  
prescribing of any controlled substance.

The bill deletes a procedure for the surrender of serialized  
prescription blanks in the event of a criminal proceeding when  
a practitioner is named in a warrant of arrest or is charged  
with a felony violation of chapter 499, Florida Statutes,  
relating to drugs, devices and household products or chapter  
893, Florida Statutes, relating to controlled substances.

The bill revises the requirements for pharmacists to obtain  
suitable identification prior to dispensing certain drugs and  
provides exemptions for drugs dispensed through the mail.

The bill specifies that the Department of Legal Affairs must  
bear the costs of the prescription monitoring program.