

By Senator Burt

16-2376-02

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, the
12 Department of Law Enforcement, the Statewide
13 Prosecutor, and State Attorneys to share
14 certain information regarding health care
15 practitioners; requiring a report; requiring
16 the Bureau of Pharmacy Services of the
17 Department of Health to establish an electronic
18 system to monitor the prescribing of certain
19 controlled substances; authorizing the Bureau
20 of Pharmacy Services to contract for the
21 administration of the electronic monitoring
22 system for certain controlled substances;
23 establishing an advisory council and providing
24 for its membership, duties, staff, and
25 compensation; requiring the Bureau of Pharmacy
26 Services of the Department of Health to
27 recommend performance-based measures to the
28 Legislature for the electronic monitoring
29 system; requiring that the Bureau of Pharmacy
30 Services report to the Legislature on
31 implementation of the electronic monitoring

1 system; providing requirements for the report;
2 providing duties of the Bureau of Pharmacy
3 Services with respect to the purposes and use
4 of the electronic monitoring system;
5 prohibiting the use of specified funds for the
6 electronic monitoring system; amending s.
7 456.033, F.S.; eliminating certain requirements
8 for HIV and AIDS education courses; amending s.
9 456.072, F.S., revising penalties; amending s.
10 458.345, F.S.; requiring certain resident
11 physicians, interns, and fellows to complete an
12 educational course in prescribing controlled
13 substances; amending s. 461.013, F.S.;
14 prohibiting the presigning of blank
15 prescription forms and providing penalties;
16 amending s. 893.04, F.S.; providing additional
17 requirements for pharmacists regarding the
18 identification of persons to whom controlled
19 substances are dispensed; prohibiting certain
20 prescribing practitioners from possessing,
21 administering, dispensing, or prescribing
22 controlled substances; providing for
23 construction of the act in pari materia with
24 laws enacted during the Regular Session of the
25 Legislature; providing an effective date.

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27 Be It Enacted by the Legislature of the State of Florida:

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29 Section 1. Physicians; rules establishing prescribing
30 guidelines.--To minimize the diversion and resultant abuse of
31 controlled substances, the Board of Medicine and the Board of

1 Osteopathic Medicine shall adopt rules to establish guidelines
2 for prescribing controlled substances to patients in
3 emergency-department settings. Such guidelines must allow
4 physicians to provide legitimate medical treatment of acute
5 and chronic pain and require them to recognize and prevent
6 abuse of pain medications prescribed in emergency-department
7 settings. The guidelines must also consider requirements of
8 state and federal law and of the Joint Commission on the
9 Accreditation of Healthcare Organizations. Each board shall
10 consult with the Florida College of Emergency Physicians in
11 developing these guidelines.

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

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

1 consultation and referral of patients who are at risk for
2 misuse of medication or diversion of controlled substances,
3 when appropriate.

4 (2) The board may approve additional equivalent
5 courses that satisfy the requirements of subsection (1). Each
6 licensing board that requires a licensee to complete an
7 educational course pursuant to this section shall include the
8 hours required to complete the course in the total required
9 continuing educational requirements.

10 (3) Any person who holds two or more licenses subject
11 to this section may satisfy the requirements of this section
12 by taking only one such board-approved course for relicensure
13 of all such licenses.

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

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

25 (6) The board may adopt rules necessary to administer
26 this section.

27 Section 3. Emergency suspension orders; controlled
28 substances.--Upon receipt of sufficient evidence from any
29 agency authorized to enforce chapter 893, Florida Statutes,
30 regarding a violation of section 458.331(1)(g), section
31 458.331(1)(r), section 458.331(1)(aa), section 459.015(1)(t),

1 section 459.015(1)(u), section 459.015(1)(ee), section
2 461.013(1)(o), section 461.013(1)(p), section 461.013(1)(dd),
3 section 462.14(1)(q), section 462.14(1)(r), section
4 462.14(1)(aa), section 464.018(1)(i), section 465.016(1)(e),
5 section 465.016(1)(i), section 466.028(1)(p), section
6 466.028(1)(q), section 466.028(1)(r), or section
7 466.028(1)(dd), Florida Statutes, or of chapter 893, Florida
8 Statutes, by a licensed health care practitioner who is
9 authorized to prescribe, dispense, or administer controlled
10 substances, the Department of Health shall review the case and
11 if there is a reason to believe that the practitioner is a
12 danger to the public health, safety, or welfare as set forth
13 in section 120.60(6), Florida Statutes, shall recommend the
14 suspension or restriction of the practitioner's license to the
15 Secretary of Health within 10 working days after receiving
16 such evidence. If a sufficient basis is found to exist, the
17 Secretary of Health must suspend or restrict the license of
18 the practitioner in accordance with section 120.60(6), Florida
19 Statutes.

20 Section 4. Sharing of arrest, formal-charging, and
21 other information regarding health care practitioners.--

22 (1) In order to facilitate the efficiency of the
23 Department of Health's investigation of applicable violations
24 involving the diversion of controlled substances by such
25 practitioners, or other violations of criminal law that may
26 adversely affect a practitioner's licensed practice, any law
27 enforcement agency that arrests a person known or suspected to
28 be a health care practitioner licensed by the state shall
29 promptly notify the Department of Health and provide it with:
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1 (a) Notice of the arrest, including the name of the
2 arresting agency and lead investigator, detective, or officer
3 in the case;

4 (b) The name of the person charged;

5 (c) All known personal identifying information related
6 to the person arrested;

7 (d) The date of the arrest;

8 (e) The charges for which the person is arrested;

9 (f) The agency case number assigned to the arrest; and

10 (g) The arrest report, investigative report, or
11 statement of the allegations supporting the arrest.

12 (2) A state attorney or the Statewide Prosecutor, upon
13 the filing of an indictment or information against a person
14 known or suspected to be a health care practitioner licensed
15 by the state, shall forward a copy of the indictment or
16 information to the Department of Health.

17 (3) The Medical Examiners Commission within the
18 Department of Law Enforcement shall report to the Department
19 of Health quarterly any information in its possession
20 regarding the deaths of persons who had lethal levels of
21 controlled substances in their bodies as such information has
22 been reported to the commission by the medical examiners
23 within the state.

24 (4) Upon receipt of arrest information from a law
25 enforcement agency or notice of formal charging by a
26 prosecuting entity, the Department of Health or the board
27 having regulatory authority over the practitioner shall
28 investigate any information received and determine whether it
29 has reasonable grounds to believe that the practitioner has
30 violated any law or rule relating to the practitioner's
31 practice and shall take appropriate licensure action as

1 provided by law or rule. If the Department of Health receives
2 information pursuant to this section which suggests that the
3 person arrested or charged is also licensed by the state in
4 another field or profession, the Department of Health shall
5 forward such information to the appropriate licensing entity
6 for review and appropriate licensure action as provided by law
7 or rule.

8 (5) To help the Department of Health and regulatory
9 boards control the diversion and resultant abuse of controlled
10 substances, the Department of Health and the Department of Law
11 Enforcement shall study the feasibility of expanding the
12 electronic exchange of information to facilitate the transfer
13 to the Department of Health of criminal-history information
14 involving licensed health care practitioners who are
15 authorized to prescribe, administer, or dispense controlled
16 substances. The study must address whether the collection and
17 retention of fingerprint information concerning licensed
18 health care practitioners subject to the profiling provisions
19 of sections 456.039 and 456.0391, Florida Statutes, is
20 advisable as a means of better regulating such practitioners
21 and guarding against abuse of the privileges of such licensure
22 with respect to controlling the diversion and resultant abuse
23 of controlled substances. The Department of Law Enforcement
24 shall investigate the feasibility of the electronic
25 transmission of information from medical examiners within this
26 state to the Department of Health regarding autopsies and
27 other public reports that attribute death to
28 controlled-substance abuse. The Department of Law Enforcement,
29 in consultation with the Department of Health, must submit a
30 report of its findings to the Legislature by November 1, 2002.

1 Section 5. Electronic monitoring system for
2 prescriptions.--

3 (1) By July 1, 2003, the Bureau of Pharmacy Services
4 of the Department of Health shall design and establish an
5 electronic system consistent with the National Council of
6 Prescription Drug Programs (NCPDP) standards or the American
7 Society for Automation in Pharmacy (ASAP) standards to monitor
8 the prescribing of Schedule II controlled substances; other
9 drugs designated by rule by the Secretary of Health under this
10 section; and codeine, hydrocodone, dihydrocodeine,
11 ethylmorphine, and morphine, as scheduled in Schedule II and
12 Schedule III, by health care practitioners within the state or
13 the dispensing of such controlled substances to an address
14 within the state by a pharmacy permitted or registered by the
15 Board of Pharmacy. The Bureau of Pharmacy Services of the
16 Department of Health may administer or contract for the
17 administration of the electronic monitoring system established
18 under this section.

19 (2) All Schedule II controlled substances; codeine,
20 hydrocodone, dihydrocodeine, ethylmorphine, and morphine as
21 scheduled in Schedule II and Schedule III; and any other drug
22 designated by the Secretary of Health under this section shall
23 be included in the electronic monitoring system. The Secretary
24 of Health may, by rule, designate any other drug for inclusion
25 in such system after making a determination that the drug is a
26 drug of abuse. The Secretary of Health must consider the
27 recommendations of the prescription-monitoring advisory
28 council created by this section before designating a drug of
29 abuse for inclusion in the electronic monitoring system and
30 only after he or she determines that the current level of
31 regulation over the prescribing and dispensing of such drug is

1 inadequate and that the drug has a high potential for abuse or
2 is being excessively misused, abused, or diverted into illicit
3 drug trafficking.

4 (3) Beginning September 1, 2002, or upon the effective
5 date of the rule prescribing the format for the electronic
6 monitoring system, whichever occurs later, each controlled
7 substance or drug subject to this section which is dispensed
8 in this state must be timely reported to the Bureau of
9 Pharmacy Services of the Department of Health. Such data must
10 be reported each time that:

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

12 (b) A drug that is designated by the Secretary of
13 Health under subsection (2) is dispensed; or

14 (c) Codeine, hydrocodone, dihydrocodeine,
15 ethylmorphine, or morphine as scheduled in Schedule II and
16 Schedule III is dispensed.

17 (4) This section does not apply to controlled
18 substances or drugs:

19 (a) Ordered from an institutional pharmacy licensed
20 under section 465.019(2), Florida Statutes, in accordance with
21 the institutional policy for such controlled substances or
22 drugs; or

23 (b) Administered by a health care practitioner to a
24 patient or resident receiving care from a hospital, nursing
25 home, assisted living facility, home health agency, hospice,
26 or intermediate care facility for the developmentally disabled
27 which is licensed in this state.

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

29 (a) The patient's name.

30 (b) The patient's address.

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1 (c) The national drug code number of the substance
2 dispensed.

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

4 (e) The quantity of substance dispensed.

5 (f) The dispenser's National Association of Board's of
6 Pharmacy (NABP) number.

7 (g) The prescribing practitioner's United States Drug
8 Enforcement Administration Number.

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

11 (7) A dispenser must transmit the information required
12 by this section in an electronic format approved by rule of
13 the Board of Pharmacy after consultation with the advisory
14 council and the Bureau of Pharmacy Services of the Department
15 of Health unless a specific waiver is granted to that
16 dispenser by the Bureau of Pharmacy Services. The information
17 transmitted may be maintained by any department receiving it
18 for up to 12 months. However, any department receiving such
19 information may maintain it longer than 12 months if the
20 information is pertinent to an ongoing investigation arising
21 under this act. Notwithstanding section 119.041, Florida
22 Statutes, the information transmitted under this section for
23 each prescription dispensed must be purged from the electronic
24 monitoring system within 2 years after the date of the
25 prescription. For purposes of this subsection, a refill of a
26 prescription is a new prescription.

27 (8) The Bureau of Pharmacy Services of the Department
28 of Health shall establish a 15-member prescription-monitoring
29 advisory council to assist it in identifying drugs of abuse
30 for inclusion in the monitoring system and in implementing the
31 system.

1 (a) The Governor shall appoint members to serve on the
2 advisory council. The members of the council shall include the
3 Secretary of Health or his or her designee, who shall serve as
4 the chairperson; the Attorney General or his or her designee;
5 the executive director of the Department of Law Enforcement or
6 his or her designee; the director of the Office of Drug
7 Control within the Executive Office of Governor or his or her
8 designee; a physician who is licensed in this state under
9 chapter 458, Florida Statutes, who is recommended by the
10 Florida Medical Association; a physician who is licensed in
11 this state under chapter 458 or chapter 459, Florida Statutes,
12 who is recommended by the Florida Academy of Pain Medicine; a
13 physician who is licensed in this state under chapter 459,
14 Florida Statutes, who is recommended by the Florida
15 Osteopathic Medical Association; a physician who is licensed
16 in this state under chapter 458 or chapter 459, Florida
17 Statutes, who is recommended by the Florida Academy of Family
18 Physicians; a podiatric physician who is licensed in this
19 state under chapter 461, Florida Statutes, who is recommended
20 by the Florida Podiatric Medical Association; a pharmacist who
21 is licensed in this state under chapter 465, Florida Statutes,
22 who is recommended by the Florida Pharmacy Association; a
23 pharmacist who is licensed in this state under chapter 465,
24 Florida Statutes, who is recommended by the Florida Retail
25 Federation; a pharmacist who is licensed in this state under
26 chapter 465, Florida Statutes, who is recommended by the
27 National Community Pharmacy Association; a dentist who is
28 licensed in this state under chapter 466, Florida Statutes,
29 who is recommended by the Florida Dental Association; a
30 veterinarian who is licensed in this state under chapter 474,
31 Florida Statutes, who is recommended by the Florida Veterinary

1 Medical Association; and a prosecutor who has expertise in the
2 criminal prosecution of drug-diversion cases.

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

9 (c) The Bureau of Pharmacy Services of the Department
10 of Health shall provide staff and other administrative
11 assistance that is reasonably necessary to assist the advisory
12 council in carrying out its responsibilities.

13 (9) The Bureau of Pharmacy Services of the Department
14 of Health shall submit a report to the President of the Senate
15 and the Speaker of the House of Representatives by March 1,
16 2003, which recommends performance-based measures for the
17 electronic monitoring system established under this section
18 and provides the status of implementation of the system. By
19 July 1 of each year, beginning in 2004, the Bureau of Pharmacy
20 Services shall report to the President of the Senate and the
21 Speaker of the House of Representatives on the status of
22 implementation of the electronic monitoring system. The annual
23 report must include a report of the Bureau of Pharmacy
24 Services' compliance with any performance-based measures
25 established by the Legislature for the electronic monitoring
26 system and other relevant statistics and information.

27 (10) The Bureau of Pharmacy Services of the Department
28 of Health shall use the electronic monitoring system
29 established under this section for the principal purpose of
30 the reasonable monitoring of prescription practices by
31 licensed health care practitioners. The Bureau of Pharmacy

1 Services shall make an effort to identify licensed health care
2 practitioners who may be involved, knowingly or unknowingly,
3 in the unauthorized prescribing, dispensing, or receipt of
4 controlled substances or drugs of abuse, whether by means of
5 prescription counterfeiting, fraud, forgery, over-prescribing,
6 or any other method. The Bureau of Pharmacy Services shall
7 immediately refer any case of possible unauthorized conduct
8 identified through the electronic monitoring system to the
9 appropriate licensing board, if the facts support a
10 disciplinary complaint, or to an appropriate law enforcement
11 agency. The Bureau of Pharmacy Services may provide
12 information contained in the electronic monitoring system to a
13 licensed health care practitioner for the purpose of providing
14 diagnostic or treatment services to the patient or consumer
15 identified in the information.

16 (11) Funds from the Medical Quality Assurance Trust
17 Fund may not be used to establish, use, or maintain the
18 electronic monitoring system.

19 (12) The Bureau of Pharmacy Services of the Department
20 of Health shall adopt rules pursuant to section 120.536(1) and
21 section 120.574, Florida Statutes, necessary to administer
22 this section.

23 Section 6. Subsections (1) and (9) of section 456.033,
24 Florida Statutes, are amended to read:

25 456.033 Requirement for instruction for certain
26 licensees on HIV and AIDS.--

27 (1) The appropriate board shall require each person
28 licensed or certified under chapter 457; ~~chapter 458;~~ ~~chapter~~
29 ~~459;~~chapter 460; ~~chapter 461;~~chapter 463; part I of chapter
30 464; chapter 465; ~~chapter 466;~~part II, part III, part V, or
31 part X of chapter 468; or chapter 486 to complete a continuing

1 educational course, approved by the board, on human
2 immunodeficiency virus and acquired immune deficiency syndrome
3 as part of biennial relicensure or recertification. The course
4 shall consist of education on the modes of transmission,
5 infection control procedures, clinical management, and
6 prevention of human immunodeficiency virus and acquired immune
7 deficiency syndrome. Such course shall include information on
8 current Florida law on acquired immune deficiency syndrome and
9 its impact on testing, confidentiality of test results,
10 treatment of patients, and any protocols and procedures
11 applicable to human immunodeficiency virus counseling and
12 testing, reporting, the offering of HIV testing to pregnant
13 women, and partner notification issues pursuant to ss. 381.004
14 and 384.25.

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

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

25 Section 7. Paragraph (d) of subsection (2) of section
26 456.072, Florida Statutes, is amended to read:

27 456.072 Grounds for discipline; penalties;
28 enforcement.--

29 (2) When the board, or the department when there is no
30 board, finds any person guilty of the grounds set forth in
31 subsection (1) or of any grounds set forth in the applicable

1 practice act, including conduct constituting a substantial
2 violation of subsection (1) or a violation of the applicable
3 practice act which occurred prior to obtaining a license, it
4 may enter an order imposing one or more of the following
5 penalties:

6 (d) Imposition of an administrative fine not to exceed
7 ~~\$10,000~~\$25,000 for each count or separate offense. If the
8 violation is for fraud or making a false or fraudulent
9 representation, the board, or the department if there is no
10 board, must impose a fine of ~~\$10,000~~\$25,000 per count or
11 offense.

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

14 458.345 Registration of resident physicians, interns,
15 and fellows; list of hospital employees; prescribing of
16 medicinal drugs; penalty.--

17 (1) Any person desiring to practice as a resident
18 physician, assistant resident physician, house physician,
19 intern, or fellow in fellowship training which leads to
20 subspecialty board certification in this state, or any person
21 desiring to practice as a resident physician, assistant
22 resident physician, house physician, intern, or fellow in
23 fellowship training in a teaching hospital in this state as
24 defined in s. 408.07(44) or s. 395.805(2), who does not hold a
25 valid, active license issued under this chapter shall apply to
26 the department to be registered and shall remit a fee not to
27 exceed \$300 as set by the board. The department shall
28 register any applicant the board certifies has met the
29 following requirements:

30 (d) Has completed, upon initial registration, the
31 1-hour educational course in the prescribing of controlled

1 substances as set forth in section 2 of this act. An applicant
2 who has not taken a course at the time of registration shall
3 be allowed up to 6 months within which to complete this
4 requirement.

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

7 461.013 Grounds for disciplinary action; action by the
8 board; investigations by department.--

9 (1) The following acts constitute grounds for denial
10 of a license or disciplinary action, as specified in s.
11 456.072(2):

12 (dd) Presigning blank prescription forms.

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

16 893.04 Pharmacist and practitioner.--

17 (1) A pharmacist, in good faith and in the course of
18 professional practice only, may dispense controlled substances
19 upon a written or oral prescription of a practitioner, under
20 the following conditions:

21 (h) A pharmacist may not dispense a Schedule II
22 controlled substance; codeine, hydrocodone, dihydrocodeine,
23 ethylmorphine, or morphine as scheduled in Schedule II and
24 Schedule III; or a drug of abuse designated by the Secretary
25 of Health by rule under the prescription-monitoring system to
26 any individual not personally known to the pharmacist without
27 first obtaining suitable identification and documenting, in a
28 log book kept by the pharmacist, the identity of the
29 individual obtaining the controlled substance. The log book
30 entry must contain the printed name, address, telephone number
31 if available, driver's license number or other suitable

1 identification number, and signature of the person obtaining
2 the controlled substance or drug. If the individual does not
3 have suitable identification or it is impracticable to obtain
4 such identification, the pharmacist may dispense the
5 controlled substance or drug only when the pharmacist
6 determines, in the exercise of her or his professional
7 judgment, that the order is valid and necessary for treatment.
8 In such a case, the pharmacist or his or her designee must
9 obtain the other information required under this paragraph,
10 and the pharmacist or pharmacist's designee must sign the log
11 to indicate that suitable identification was not available and
12 that the pharmacist's professional judgment was exercised
13 prior to dispensing the controlled substance or drug. The
14 Board of Pharmacy may adopt, by rule, procedures by which a
15 pharmacist must verify the validity of a prescription for a
16 Schedule II controlled substance; other drug designated by the
17 Secretary of Health under this section; or codeine,
18 hydrocodone, dihydrocodeine, ethylmorphine, or morphine as
19 scheduled in Schedule II and Schedule III, for circumstances
20 when it is otherwise impracticable for the pharmacist or
21 dispensing practitioner to obtain suitable identification from
22 the patient or the patient's agent. For purposes of this
23 section, identification is suitable only if it contains the
24 photograph, the printed name, and the signature of the
25 individual obtaining the Schedule II controlled substance or
26 drug of abuse under the prescription-monitoring system.

27 (i) Any pharmacist that dispenses a Schedule II
28 controlled substance or drug subject to the requirements of
29 this section when dispensed by mail shall be exempt from the
30 requirements to obtain suitable identification.

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1 (j) All prescriptions issued for a Schedule II
2 controlled substance; codeine, hydrocodone, dihydrocodeine,
3 ethylmorphine, or morphine as scheduled in Schedule II and
4 Schedule III; or a drug of abuse under the
5 prescription-monitoring system which has been designated by
6 the Secretary of Health by rule, must include both a written
7 and numerical notation of quantity on the face of the
8 prescription.

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

12 (l) A pharmacist may not knowingly fill a prescription
13 that has been mutilated or forged for a Schedule II controlled
14 substance; codeine, hydrocodone, dihydrocodeine,
15 ethylmorphine, and morphine as scheduled in Schedule II and
16 Schedule III; or a drug of abuse under the
17 prescription-monitoring system which has been designated by
18 the Secretary of Health by rule.

19 Section 11. If any law that is amended by this act was
20 also amended by a law enacted at the 2002 Regular Session of
21 the Legislature, such laws shall be construed as if they had
22 been enacted at the same session of the Legislature, and full
23 effect should be given to each if that is possible.

24 Section 12. This act shall take effect July 1, 2002.
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SENATE SUMMARY

Requires the Board of Medicine and the Board of Osteopathic Medicine to adopt rules governing the prescribing of controlled substances; Requires health care providers to complete an educational course on prescribing controlled substances. Authorizes the Department of Health to suspend the license of a health care professional for a prescribing violation. Requires that the Department of Health and the Department of Law Enforcement, the Statewide Prosecutor, and State Attorneys share certain information regarding health care practitioners. Requires that the Bureau of Pharmacy Services of the Department of Health establish an electronic monitoring system to monitor the prescribing of certain controlled substances and drugs. Prohibits a health care practitioner from presigning blank prescription forms. Requires that a pharmacist obtain the identification of any person obtaining a controlled substance. (See bill for details.)