# The Florida Senate BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepared By: The Professional Staff of the Committee on Health Policy						
BILL:	SB 964					
INTRODUCER:	Senator Grimsley					
SUBJECT:	Prescription Drug Monitoring Program					
DATE:	January 28, 2016 REVISED:					
ANALYST		STAF	F DIRECTOR	REFERENCE		ACTION
1. Stovall		Stovall		HP	<b>Pre-meeting</b>	
2.				CJ		
3.				FP		

## I. Summary:

SB 964 exempts a rehabilitative hospital, assisted living facility, or nursing home that dispenses a dosage of a controlled substance to a patient from reporting that act of dispensing to the prescription drug monitoring program database.

### II. Present Situation:

## The Prescription Drug Monitoring Program

Starting in the early 2000s, Florida began experiencing a marked increase in deaths resulting from prescription drug abuse. In 2010 the Florida Office of Drug Control identified prescription drug abuse as the most threatening substance abuse issue in Florida. Between 2003 and 2009 the number of deaths caused by at least one prescription drug increased by 102 percent (from 1,234 to 2,488). These numbers translated into seven Floridians dying from prescription drug overdoses per day.

Between 2009 and 2011, the Legislature enacted a series of reforms to combat prescription drug abuse. These reforms included strict regulation of pain management clinics; creating the Prescription Drug Monitoring Database (PDMP); and stricter regulation on selling, distributing, and dispensing controlled substances.<sup>2</sup>

Chapter 2009-197, Laws of Fla., established the PDMP in s. 893.055, F.S. The PDMP uses a comprehensive electronic system/database to monitor the prescribing and dispensing of certain controlled substances.<sup>3</sup> The PDMP became operational on September 1, 2011, when it began

<sup>&</sup>lt;sup>1</sup> Executive Office of the Governor, *Florida Office of Drug Control 2010 Annual Report* (on file with the Senate Committee on Health Policy).

<sup>&</sup>lt;sup>2</sup> See chs. 2009-197, 2010-211, and 2011-141, Laws of Fla.

<sup>&</sup>lt;sup>3</sup> Section 893.055(2)(a), F.S.

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receiving prescription data from pharmacies and dispensing practitioners.<sup>4</sup> Dispensers have reported over 163 million controlled substance prescriptions to the PDMP since its inception.<sup>5</sup> Health care practitioners began accessing the PDMP on October 17, 2011.<sup>6</sup> Law enforcement agencies began requesting data from the PDMP in support of active criminal investigations on November 14, 2011.<sup>7</sup>

Dispensers of controlled substances listed in Schedule II, Schedule III, or Schedule IV must report specified information to the PDMP database within seven days after dispensing, each time the controlled substance is dispensed. The information required to be reported includes:<sup>8</sup>

- Name of the dispensing practitioner and Drug Enforcement Administration registration number, National Provider Identification, or other applicable identifier;
- Date the prescription is dispensed;
- Name, address, and date of birth of the person to whom the controlled substance is dispensed; and
- Name, national drug code, quantity, and strength of the controlled substance dispensed.<sup>9</sup>

Current law exempts certain acts of dispensing or administering from PDMP reporting:

- A health care practitioner when administering a controlled substance directly to a patient if the amount of the controlled substance is adequate to treat the patient during that particular treatment session.
- A pharmacist or health care practitioner when administering a controlled substance to a
  patient or resident receiving care as a patient at a hospital, nursing home, ambulatory surgical
  center, hospice, or intermediate care facility for the developmentally disabled which is
  licensed in this state.
- A practitioner when administering or dispensing a controlled substance in the health care system of the Department of Corrections.
- A practitioner when administering a controlled substance in the emergency room of a licensed hospital.
- A health care practitioner when administering or dispensing a controlled substance to a person under the age of 16.
- A pharmacist or a dispensing practitioner when dispensing a one-time, 72-hour emergency resupply of a controlled substance to a patient.

## III. Effect of Proposed Changes:

SB 964 exempts a rehabilitative hospital, assisted living facility, or nursing home that dispenses a certain dosage of a controlled substance, as needed, to a patient pursuant to an order of the

<sup>&</sup>lt;sup>4</sup> Florida Dep't of Health, 2012-2013 Prescription Drug Monitoring Program Annual Report (December 1, 2013), available at <a href="http://www.floridahealth.gov/reports-and-data/e-forcse/news-reports/\_documents/2012-2013pdmp-annual-report.pdf">http://www.floridahealth.gov/reports-and-data/e-forcse/news-reports/\_documents/2012-2013pdmp-annual-report.pdf</a> (last visited on Jan. 7, 2016).

<sup>&</sup>lt;sup>5</sup> Florida Dep't of Health, 2014-2015 Prescription Drug Monitoring Program Annual Report (December 1, 2015), available at <a href="http://www.floridahealth.gov/statistics-and-data/e-forcse/news-reports/\_documents/2015-pdmp-annual-report.pdf">http://www.floridahealth.gov/statistics-and-data/e-forcse/news-reports/\_documents/2015-pdmp-annual-report.pdf</a> (last visited on Jan. 7, 2016).

<sup>&</sup>lt;sup>6</sup> Supra note 16

<sup>&</sup>lt;sup>7</sup> Supra note 16

<sup>&</sup>lt;sup>8</sup> The specific information reported depends upon the whether the reporter is a pharmacy or practitioner.

<sup>&</sup>lt;sup>9</sup> See s. 893.055(3), F.S.

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patient's treating physician from reporting that act of dispensing to the prescription drug monitoring program database. These settings are low-risk with administration being monitored by facility staff.

The effective date of the bill is July 1, 2016.

### IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

## V. Fiscal Impact Statement:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

Eliminating the reporting requirement will have a favorable impact on rehabilitative hospitals, assisted living facilities, and nursing homes due to increased efficiencies and reduced administrative costs.

C. Government Sector Impact:

None.

### VI. Technical Deficiencies:

None.

## VII. Related Issues:

None.

## VIII. Statutes Affected:

This bill substantially amends section 893.055 of the Florida Statutes.

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#### IX. **Additional Information:**

Committee Substitute – Statement of Changes: (Summarizing differences between the Committee Substitute and the prior version of the bill.) A.

None.

B. Amendments:

None.

This Senate Bill Analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.