

By the Committees on Rules; Governmental Oversight and Accountability; and Health Policy; and Senator Clemens

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1 A bill to be entitled
2 An act relating to controlled substance prescribing;
3 providing legislative findings; requiring that
4 specified physicians who are registered with the
5 United States Drug Enforcement Administration to
6 prescribe controlled substances complete a continuing
7 education course before a certain date; specifying
8 requirements for the continuing education course;
9 authorizing the course to be offered in a distance
10 learning format; creating grounds for disciplinary
11 actions for failure to meet the course requirements;
12 providing that completion of the course is a condition
13 of licensure renewal as of a certain date; amending s.
14 893.055, F.S.; revising requirements for reporting the
15 dispensing of controlled substances; limiting an
16 exception to reporting requirements for certain
17 facilities that dispense controlled substances;
18 authorizing certain employees of the United States
19 Department of Veterans Affairs access to certain
20 information in the prescription drug monitoring
21 program database; specifying when a revised reporting
22 requirement takes effect; providing effective dates.

23
24 Be It Enacted by the Legislature of the State of Florida:

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26 Section 1. The Legislature finds that the road to drug
27 addiction may begin as early as 3 days after the initiation of
28 opioid treatment for acute pain. Because of the potentially
29 devastating effects of such addiction, the Legislature also

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30 finds that awareness of this potentially life-threatening
31 problem must be raised among Florida's practitioners. Before
32 December 31, 2017, each physician licensed pursuant to chapter
33 458, Florida Statutes, or chapter 459, Florida Statutes, who is
34 registered with the United States Drug Enforcement
35 Administration to prescribe controlled substances pursuant to 21
36 U.S.C. s. 822 shall complete a 2-hour continuing education
37 course offered by a statewide professional association of
38 physicians in this state which is accredited to provide
39 educational activities designated for the American Medical
40 Association Physician's Recognition Award (AMA PRA) Category 1
41 Credit or the American Osteopathic Association (AOA) Category 1-
42 A continuing medical education (CME) credit. The course must
43 contain information on the current standards regarding opiate
44 prescribing and alternatives to these standards, and information
45 on the risks of opioid addiction following even brief periods of
46 treatment in the management of acute pain. The course may be
47 offered in a distance learning format and must be included
48 within the number of continuing medical education hours required
49 by law. Failure to complete the course before December 31, 2017
50 constitutes grounds for disciplinary action under s.
51 456.072(1)(e), Florida Statutes, and chapter 458, Florida
52 Statutes, or chapter 459, Florida Statutes, as applicable.
53 Effective January 1, 2020, completion of this course is required
54 as a condition of licensure renewal for every physician
55 registered with the United States Drug Enforcement
56 Administration to prescribe controlled substances.

57 Section 2. Subsection (4), paragraph (g) of subsection (5),
58 and paragraphs (a) and (b) of subsection (7) of section 893.055,

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59 Florida Statutes, are amended to read:

60 893.055 Prescription drug monitoring program.—

61 (4) Each time a controlled substance is dispensed to an
62 individual, the controlled substance shall be reported to the
63 department through the system as soon thereafter as possible,
64 but no later than the close of the next business day ~~not more~~
65 ~~than 7 days~~ after the day ~~date~~ the controlled substance is
66 dispensed unless an extension is approved by the department for
67 cause as determined by rule. A dispenser must meet the reporting
68 requirements of this section by submitting via the department-
69 approved electronic system ~~providing~~ the required information
70 concerning each controlled substance that it dispensed ~~in a~~
71 ~~department-approved, secure methodology and format. Such~~
72 ~~approved formats may include, but are not limited to, submission~~
73 ~~via the Internet, on a disc, or by use of regular mail.~~

74 (5) When the following acts of dispensing or administering
75 occur, the following are exempt from reporting under this
76 section for that specific act of dispensing or administration:

77 (g) A rehabilitative hospital, assisted living facility, or
78 nursing home dispensing a certain dosage of a controlled
79 substance, as needed, to a patient while the patient is present
80 and receiving care as ordered by the patient's treating
81 physician.

82 (7) (a) A practitioner or pharmacist who dispenses a
83 controlled substance must submit the information required by
84 this section in an electronic ~~or other~~ method in an ASAP format
85 approved by rule of the department unless otherwise provided in
86 this section. The cost to the dispenser in submitting the
87 information required by this section may not be material or

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88 extraordinary. Costs not considered to be material or
89 extraordinary include, but are not limited to, regular postage,
90 electronic media, regular electronic mail, and facsimile
91 charges.

92 (b) A pharmacy, prescriber, or dispenser, or the designee
93 of a pharmacy, prescriber, or dispenser, shall have access to
94 information in the prescription drug monitoring program's
95 database which relates to a patient of that pharmacy,
96 prescriber, or dispenser in a manner established by the
97 department as needed for the purpose of reviewing the patient's
98 controlled substance prescription history. An employee of the
99 United States Department of Veterans Affairs who provides health
100 care services pursuant to such employment and who has the
101 authority to prescribe controlled substances shall have access
102 to the information in the program's database in a manner
103 established by the department. Such access is limited to the
104 information that relates to a patient of such employee and may
105 be accessed only for the purpose of reviewing the patient's
106 controlled substance prescription history. Other access to the
107 program's database shall be limited to the program's manager and
108 to the designated program and support staff, who may act only at
109 the direction of the program manager or, in the absence of the
110 program manager, as authorized. Access by the program manager or
111 such designated staff is for prescription drug program
112 management only or for management of the program's database and
113 its system in support of the requirements of this section and in
114 furtherance of the prescription drug monitoring program.
115 Confidential and exempt information in the database shall be
116 released only as provided in paragraph (c) and s. 893.0551. The

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117 program manager, designated program and support staff who act at
118 the direction of or in the absence of the program manager, and
119 any individual who has similar access regarding the management
120 of the database from the prescription drug monitoring program
121 shall submit fingerprints to the department for background
122 screening. The department shall follow the procedure established
123 by the Department of Law Enforcement to request a statewide
124 criminal history record check and to request that the Department
125 of Law Enforcement forward the fingerprints to the Federal
126 Bureau of Investigation for a national criminal history record
127 check.

128 Section 3. The requirement in s. 893.055(4), Florida
129 Statutes, as amended by this act, that the dispensing of a
130 controlled substance be reported to the Department of Health no
131 later than the next business day shall take effect January 1,
132 2018.

133 Section 4. Except as otherwise expressly provided in this
134 act, this act shall take effect July 1, 2017.