Amendment No. 164

Senate Amendment to Senate Bill No. 114	(BDR 40-239)					
Proposed by: Senator Hardy						
Amendment Box: Consistent with Amendment No. 76.						
Amends: Summary: No Title: Yes Preamble: No Joint Sponsorship: No	Digest: Yes					

ASSEMBLY ACTION		Initial and Date	SENATE ACTIO	N Initial and Date	
Adopted		Lost		Adopted	Lost
Concurred In		Not	1	Concurred In	Not
Receded		Not	1	Receded	Not

EXPLANATION: Matter in (1) *blue bold italics* is new language in the original bill; (2) variations of <u>green bold underlining</u> is language proposed to be added in this amendment; (3) <u>red strikethrough</u> is deleted language in the original bill; (4) <u>purple double strikethrough</u> is language proposed to be deleted in this amendment; (5) <u>orange double underlining</u> is deleted language in the original bill proposed to be retained in this amendment.

EWR/RBL



S.B. No. 114—Makes changes relating to prescriptions for certain controlled substances. (BDR 40-239)

* A S B 1 1 4 1 6 4 *

Date: 4/18/2015

SENATE BILL NO. 114-SENATOR HARDY

Prefiled February 1, 2015

Referred to Committee on Health and Human Services

SUMMARY—Makes changes relating to prescriptions for certain controlled substances. (BDR 40-239)

FISCAL NOTE: Effect on Local Government: No.

Effect on the State: Yes.

EXPLANATION – Matter in **bolded italics** is new; matter between brackets [omitted material] is material to be omitted.

AN ACT relating to controlled substances; requiring the State Board of Pharmacy and the Investigation Division of the Department of Public Safety to provide access to the computerized program to track prescriptions of controlled substances developed by the State Board of Pharmacy and the Investigation Division of the Department of Public Safety to include certain information; authorizing access to such information for to certain purposes; occupational licensing boards; requiring the Board and the Division to use such provide information for errain purposes; concerning the inappropriate use of a controlled substance by a patient to the occupational licensing board of a practitioner who prescribes the controlled substance to the patient; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law requires the State Board of Pharmacy and the Investigation Division of the Department of Public Safety to cooperatively develop a computerized program to track prescriptions for certain controlled substances that are filled by a pharmacy or dispensed by a practitioner that is registered with the Board. This program is required to be designed to provide certain information concerning the use of controlled substances, including data relating to the use of controlled substances that is not specific to a particular patient. The Board and Division use the program to identify any suspected fraudulent or illegal activity related to the dispensing of controlled substances and are required to report such activity to the appropriate law enforcement agency or occupational licensing board. (NRS 453.1545) This bill less pands the information that this computerized system is required to be designed to provide to also include data relating to the prescribing of controlled substances that is specific to a particular patient. This bill also requires the Board and the Division to monitor the prescription activity of prescribing practitioners for certain controlled substances and notify a practitioner if he or she has written a certain comparatively high number of such prescriptions. Finally, this bill authorizes access to information concerning particular patients to: (1) the Board and the Division for the purpose of such monitoring; and (2) a practitioner who has received such notice from the Board for the purpose of enfirming the accuracy of information contained in the notice.] requires the Board and the Division to report to the occupational licensing board of a practitioner who prescribes a controlled substance to a patient any activity that may indicate that the patient is using the controlled substance

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inappropriately. This bill also requires the Board and the Division to give access to the database of the program to the occupational licensing boards of practitioners for the purpose of investigating such inappropriate use, if the occupational licensing board determines that an investigation is warranted.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. NRS 453.1545 is hereby amended to read as follows:

453.1545 1. The Board and the Division shall cooperatively develop a computerized program to track each prescription for a controlled substance listed in schedule II, III or IV that is filled by a pharmacy that is registered with the Board or that is dispensed by a practitioner who is registered with the Board. The program must:

(a) Be designed to provide information regarding:

(1) The inappropriate use by a patient of controlled substances listed in schedules II, III and IV to pharmacies, practitioners and appropriate state agencies *and occupational licensing boards* to prevent the improper or illegal use of those controlled substances; and

(2) Statistical data relating to the use of those controlled substances that is not specific to a particular patient. It and

(3) Data relating to the prescribing of those controlled substances that is specific to a particular patient, access to which must be restricted to persons who are authorized to access such information for the purposes set forth in subsections 3, 4 and 5.]

(b) Be administered by the Board, the Investigation Division, the Division of Public and Behavioral Health of the Department and various practitioners, representatives of professional associations for practitioners, representatives of occupational licensing boards and prosecuting attorneys selected by the Board and the Investigation Division.

(c) Not infringe on the legal use of a controlled substance for the management of severe or intractable pain.

- (d) Include the contact information of each person who elects to access the database of the program pursuant to subsection 2, including, without limitation:
 - (1) The name of the person;
 - (2) The physical address of the person;
 - (3) The telephone number of the person; and
- (4) If the person maintains an electronic mail address, the electronic mail address of the person.
- 2. The Board shall provide Internet access to the database of the program established pursuant to subsection 1 to: {each}
- (a) Each practitioner who is authorized to write prescriptions for and each person who is authorized to dispense controlled substances listed in schedule II, III or IV who:

[(a)] (1) Elects to access the database of the program; and

(b) (2) Completes the course of instruction described in subsection 7. [9.]

(b) An occupational licensing board that licenses any practitioner who is authorized to write prescriptions for controlled substances listed in schedule II, III or IV.

3. [A practitioner who is provided Internet access to the database of the program pursuant to subsection 2 must, for the purposes of complying with the

provisions of subsection 5, be provided access to information specific to the prescriptions for controlled substances listed in schedule II, III or IV written by the practitioner, including, without limitation, the name of each patient for whom the practitioner has written such a prescription and, for each such patient:

(a) The date on which the prescription was written by the practitioner;

— (b) The name, dosage and amount of the controlled substance prescribed by the practitioners and

(c) The number of refills authorized and filled for the controlled substance.

— 4.1 The Board and the Division must have access to the program established pursuant to subsection 1 to identify any suspected fraudulent or illegal activity related to the dispensing of controlled substances.

4. 15. The Board and the Division shall access the program established pursuant to subsection 1 to monitor the prescription activity of practitioners authorized to write prescriptions for controlled substances listed in schedule II, III or IV, and to tabulate and compare the number of such prescriptions written monthly by each practitioner in a particular medical specialty or other category established by the Board for this purpose. When the number of such prescriptions written in a month by any practitioner exceeds the monthly average of 95 percent of the other practitioners in that specialty or eategory, the Board shall notify the practitioner in writing and via electronic mail, if available. Within 10 days after receiving such notice from the Board, the practitioner shall:

(a) Review the information described in subsection 3 to determine the accuracy of the information; and

(b) Submit a written report to the Board, on a form approved by the Board, of the accuracy of the information or identifying any inaccuracies in the information.

— 6.1 The Board or the Division shall report any activity it reasonably suspects may [be]:

<u>(a) Be</u> fraudulent or illegal to the appropriate law enforcement agency or occupational licensing board and provide the law enforcement agency or occupational licensing board with the relevant information obtained from the program for further investigation.

(b) Indicate the inappropriate use by a patient of a controlled substance to the occupational licensing board of each practitioner who has prescribed the controlled substance to the patient. The occupational licensing board may access the database of the program established pursuant to subsection I to determine which practitioners are prescribing the controlled substance to the patient. The occupational licensing board may use this information for any purpose it deems necessary, including, without limitation, alerting a practitioner that a patient may be fraudulently obtaining a controlled substance or determining whether a practitioner is engaged in unlawful or unprofessional conduct. This paragraph shall not be construed to require an occupational licensing board to conduct an investigation or take any action against a practitioner upon receiving information from the Board or the Division.

5. [77] The Board and the Division may cooperatively enter into a written agreement with an agency of any other state to provide, receive or exchange information obtained by the program with a program established in that state which is substantially similar to the program established pursuant to subsection 1, including, without limitation, providing such state access to the database of the program or transmitting information to and receiving information from such state. Any information provided, received or exchanged as part of an agreement made pursuant to this section may only be used in accordance with the provisions of this chapter.

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- 6. 18.1 Information obtained from the program relating to a practitioner or a patient is confidential and, except as otherwise provided by this section and NRS 239.0115, must not be disclosed to any person. That information must be disclosed:
- (a) Upon the request of a person about whom the information requested concerns or upon the request on behalf of that person by his or her attorney; or

(b) Upon the lawful order of a court of competent jurisdiction.

- 7. [9.] The Board and the Division shall cooperatively develop a course of training for persons who elect to access the database of the program pursuant to subsection 2 and require each such person to complete the course of training before the person is provided with Internet access to the database pursuant to subsection 2.
- 8. #10-1 A practitioner who is authorized to write prescriptions for and each person who is authorized to dispense controlled substances listed in schedule II, III or IV who acts with reasonable care when transmitting to the Board or the Division a report or information required by this section or a regulation adopted pursuant thereto is immune from civil and criminal liability relating to such action.
- **9. HH.** The Board and the Division may apply for any available grants and accept any gifts, grants or donations to assist in developing and maintaining the program required by this section.