

Department of Planning and Budget

2015 Fiscal Impact Statement

1. Bill Number: HB 1841

House of Origin	<input checked="" type="checkbox"/> Introduced	<input type="checkbox"/> Substitute	<input type="checkbox"/> Engrossed
Second House	<input type="checkbox"/> In Committee	<input type="checkbox"/> Substitute	<input type="checkbox"/> Enrolled

2. Patron: Herring

3. Committee: Health, Welfare and Institutions

4. Title: Prescription Monitoring Program; requirements for dispensers.

5. Summary: Requires every prescriber who is authorized to prescribe covered substances and every dispenser to be registered with the Prescription Monitoring Program and allows prescribers and dispensers six months to comply with the registration requirement; provides that a prescriber shall request information about a recipient any time the prescriber prescribes a 90-day supply of benzodiazepine or opiate, regardless of whether a treatment plan has been entered into; requires a dispenser registered with the program to request information about covered substances that have been dispensed to a patient when the dispenser is dispensing benzodiazepines or opiates expected to last more than 90 days; and authorizes the Director the Department of Health Professions to disclose information about a specific recipient to a dispenser for the purpose of establishing a prescription history to assist the dispenser in determining what, if any, other covered substances have been dispensed to the patient. This bill has a delayed effective date of January 1, 2016 for provisions requiring dispensers and prescribers to register with the Prescription Monitoring Program.

6. Budget Amendment Necessary: No.

7. No Fiscal Impact.

8. Fiscal Implications: This bill would have no fiscal impact on the Commonwealth. Any additional impact on the Prescription Monitoring Program staff can be absorbed. The Department of Health Professions has stated that registrations can be handled electronically using existing services. The requests sent to the program are automated; therefore no additional staff is necessary.

9. Specific Agency or Political Subdivisions Affected: Department of Health Professions.

10. Technical Amendment Necessary: No.

11. Other Comments: None.