

Department of Planning and Budget 2016 Fiscal Impact Statement

1. **Bill Number:** SB491ER

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

2. **Patron:** Hanger

3. **Committee:** Education and Health

4. **Title:** Prescription Monitoring Program; disclosures.

5. **Summary:** Provides that the Director of the Department of Health Professions may disclose information in the possession of the Prescription Monitoring Program about a specific recipient who is a member of a Virginia Medicaid managed care program to a physician or pharmacist licensed in the Commonwealth and employed by the Virginia Medicaid managed care program to determine eligibility for and to manage the care of the specific recipient in a Patient Utilization Management Safety or similar program. The bill also requires the Prescription Monitoring Program advisory committee to provide guidance to the Director regarding such disclosures.

6. **Budget Amendment Necessary:** Yes.

7. **Fiscal Impact Estimates:** Final, see item #8.

7a. Expenditure Impact:

<i>Fiscal Year</i>	<i>Dollars</i>	<i>Positions</i>	<i>Fund</i>
2016	\$50,000 - \$100,000	1	Nongeneral
2017	\$50,000 - \$100,000	1	Nongeneral
2018	\$50,000 - \$100,000	1	Nongeneral
2019	\$50,000 - \$100,000	1	Nongeneral
2020	\$50,000 - \$100,000	1	Nongeneral
2021	\$50,000 - \$100,000	1	Nongeneral
2022	\$50,000 - \$100,000	1	Nongeneral

8. **Fiscal Implications:** This bill as amended would have a fiscal impact on the Commonwealth since the bill creates regulatory authority for access to the PMP.

All regulatory and law enforcement requests are processed by PMP personnel, adding health plan access would likely greatly increase the number of these requests that would have to be processed. However this number cannot be determined there is not enough information to determine what the criteria will be as well as who may or may not make a request on the PMP). Additionally, the agency states that the criteria for reporting on prescribing or

dispensing would have to be developed and processed separately from criteria that may be reported to regulatory boards. Lastly, regulatory users are required to be re-authorized or renewed every 2 years. This bill would add to those users that must be managed separately from prescribers and pharmacists which would require an additional position.

Therefore, the fiscal impact would be 1 FTE and personnel cost of \$50,000 yearly to meet the provisions of the bill. If specialized programming is required to meet the requirements of the bill the agency estimates an enhancement cost between \$50,000-100,000 with a 10% yearly maintenance fee.

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

10. Technical Amendment Necessary: No.

11. Other Comments: None.