

## Department of Planning and Budget 2016 Fiscal Impact Statement

**1. Bill Number:** SB491S1

**House of Origin**    ☐ Introduced    ☒ Substitute    ☐ Engrossed  
**Second House**    ☐ In Committee    ☐ Substitute    ☐ 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 (i) information about a specific recipient contained in the Prescription Monitoring Program to a qualified licensed medical professional employed by the health plan of which the recipient is a member to identify potential misuse of covered substances by recipients for the purpose of intervention to prevent misuse and (ii) information about a specific dispenser or prescriber who participates in a health plan to a qualified licensed medical professional employed by that health plan to identify prescribing practices indicative of fraudulent activity.

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

**7. Fiscal Impact Estimates:** Preliminary, 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:** HB1044, introduced by Delegate Landes, is a Companion bill.