17104611D

HOUSE BILL NO. 1885

AMENDMENT IN THE NATURE OF A SUBSTITUTE

(Proposed by the House Committee on Health, Welfare and Institutions on January 26, 2017)

(Patron Prior to Substitute—Delegate Hugo)

A BILL to amend and reenact § 54.1-2522.1, as it is currently effective, of the Code of Virginia and to amend and reenact the second enactment of Chapter 113 and the second enactment of Chapter 406 of the Acts of Assembly of 2016, relating to prescription of opioids; limit.

Be it enacted by the General Assembly of Virginia:

1. That § 54.1-2522.1, as it is currently effective, of the Code of Virginia is amended and reenacted as follows:

§ 54.1-2522.1. (Effective until July 1, 2019) Requirements of prescribers.

A. Any prescriber who is licensed in the Commonwealth to treat human patients and is authorized pursuant to §§ 54.1-3303 and 54.1-3408 to issue a prescription for a covered substance shall be registered with the Prescription Monitoring Program by the Department of Health Professions.

B. A prescriber registered with the Prescription Monitoring Program or a person to whom he has delegated authority to access information in the possession of the Prescription Monitoring Program pursuant to § 54.1-2523.2 shall, at the time of initiating a new course of treatment to a human patient that includes the prescribing of opioids anticipated at the onset of treatment to last more than ~~14~~ *seven* consecutive days, request information from the Director for the purpose of determining what, if any, other covered substances are currently prescribed to the patient. In addition, any prescriber who holds a special identification number from the Drug Enforcement Administration authorizing the prescribing of controlled substances approved for use in opioid addiction therapy shall, prior to or as a part of execution of a treatment agreement with the patient, request information from the Director for the purpose of determining what, if any, other covered substances the patient is currently being prescribed. Nothing in this section shall prohibit prescribers from making additional periodic requests for information from the Director as may be required by routine prescribing practices.

C. A prescriber shall not be required to meet the provisions of subsection B if:

1. The opioid is prescribed to a patient currently receiving hospice or palliative care;

2. The opioid is prescribed to a patient as part of treatment for a surgical or invasive procedure and such prescription is ~~not refillable~~ *for no more than 14 consecutive days*;

3. The opioid is prescribed to a patient during an inpatient hospital admission or at discharge;

4. The opioid is prescribed to a patient in a nursing home or a patient in an assisted living facility that uses a sole source pharmacy;

5. The Prescription Monitoring Program is not operational or available due to temporary technological or electrical failure or natural disaster; or

6. The prescriber is unable to access the Prescription Monitoring Program due to emergency or disaster and documents such circumstances in the patient's medical record.

2. That the second enactment of Chapter 113 and the second enactment of Chapter 406 of the Acts of Assembly of 2016 are amended and reenacted as follows:

2. That the provisions of this act shall expire on July 1, ~~2019~~ *2022*.