THE GENERAL ASSEMBLY OF PENNSYLVANIA

SENATE BILL

1349 Session of 2015

INTRODUCED BY YAW, TEPLITZ, VULAKOVICH, BREWSTER, SCAVELLO, BAKER, ARGALL, COSTA, FOLMER, WHITE, RESCHENTHALER, HUTCHINSON, YUDICHAK, BROWNE, RAFFERTY, STEFANO AND KILLION, OCTOBER 12, 2016

REFERRED TO CONSUMER PROTECTION AND PROFESSIONAL LICENSURE, OCTOBER 12, 2016

AN ACT

- Amending Title 35 (Health and Safety) of the Pennsylvania Consolidated Statutes, in public safety, providing for 2 restrictions on prescribing opioids. 3 4 The General Assembly of the Commonwealth of Pennsylvania hereby enacts as follows: 6 Section 1. Title 35 of the Pennsylvania Consolidated 7 Statutes is amended by adding a chapter in Part III to read: 8 CHAPTER 52 9 PRESCRIBING OPIOIDS Sec.
- 10
- 5201. <u>Definitions</u>. 11
- 12 5202. Restrictions on prescribing opioids.
- 13 5203. Consent.
- 14 5204. Exception.
- 5205. Medical record. 15
- 16 § 5201. Definitions.
- The following words and phrases when used in this chapter 17

- 1 shall have the meanings given to them in this section unless the
- 2 <u>context clearly indicates otherwise:</u>
- 3 "Medical emergency." A situation that in a prescriber's
- 4 good faith medical judgment creates an immediate threat of
- 5 serious risk to the life or physical health of an individual.
- 6 "Medical professional." An individual who is authorized
- 7 <u>under the laws of this Commonwealth to distribute, dispense or</u>
- 8 <u>administer a controlled substance containing an opioid in the</u>
- 9 <u>course of professional practice in this Commonwealth. The term</u>
- 10 does not include a veterinarian.
- 11 "Opioid." Any of the following:
- 12 (1) A preparation or derivative of opium.
- 13 (2) A synthetic narcotic that has opiate-like effects
- but is not derived from opium.
- 15 (3) A group of naturally occurring peptides that bind at
- or otherwise influence opiate receptors, including opioid
- 17 agonist.
- 18 § 5202. Restrictions on prescribing opioids.
- 19 (a) General rule. -- A medical professional may not prescribe
- 20 to an individual more than a seven-day supply of a controlled
- 21 <u>substance containing an opioid.</u>
- 22 (b) Exceptions. -- Notwithstanding subsection (a), a medical
- 23 professional may prescribe to an individual more than a seven-
- 24 day supply of a controlled substance containing an opioid if any
- 25 of the following apply:
- 26 (1) In the professional medical judgment of the medical
- 27 <u>professional, more than a seven-day supply of a controlled</u>
- substance containing an opioid is required to stabilize the
- 29 individual's acute medical condition and the medical
- 30 professional:

1	(i) documents the acute medical condition in the
2	individual's record; and
3	(ii) indicates the reason why a nonopioid
4	alternative is not appropriate to address the acute
5	medical condition.
6	(2) The prescription is for:
7	(i) management of pain associated with cancer;
8	(ii) use in palliative or hospice care; or
9	(iii) management of chronic pain not associated with
10	cancer.
11	(c) Medical professional requirements Except as provided
12	in section 5203 (relating to consent), before issuing an
13	individual the first prescription in a single course of
14	treatment for a controlled substance containing an opioid, a
15	<pre>medical professional shall:</pre>
16	(1) Assess whether the individual has taken or is
17	currently taking prescription drugs for treatment of a
18	substance abuse disorder.
19	(2) Discuss with the individual all of the following:
20	(i) The risks of addiction and overdose associated
21	with the controlled substance containing an opioid.
22	(ii) The dangers of taking a controlled substance
23	containing an opioid with benzodiazepines, alcohol or
24	other central nervous system depressants.
25	(iii) Any other information in the patient
26	counseling information section of the labeling for
27	controlled substances containing an opioid required under
28	21 C.F.R. 201.57(c)(18) (relating to specific
29	requirements on content and format of labeling for human
30	prescription drug and biological products described in §

- 1 201.56(b)(1)).
- 2 (3) Obtain written consent for the prescription from the
- 3 individual.
- 4 <u>§ 5203.</u> Consent.
- 5 A medical professional shall record the consent required
- 6 under section 5202(c)(3) (relating to restrictions on
- 7 prescribing opioids) on a form prescribed by the Department of
- 8 Health. The form shall be separate from any other document the
- 9 medical professional uses to obtain informed consent for other
- 10 treatment provided to the individual. The form shall contain all
- 11 of the following:
- 12 (1) the name and quantity of the controlled substance
- containing an opioid being prescribed and the amount of the
- 14 <u>initial dose;</u>
- 15 (2) a statement indicating that a controlled substance
- is a drug or other substance that the United States Drug
- 17 Enforcement Administration has identified as having a
- 18 potential for abuse;
- 19 (3) a statement certifying that the medical professional
- 20 <u>discussed the matters described in paragraph (2);</u>
- 21 (4) the number of refills, if any, authorized by the
- 22 prescription; and
- 23 (5) the signature of the individual consenting to the
- 24 medical treatment and the date of signing.
- 25 <u>§ 5204. Exception.</u>
- The requirements under section 5202(c) (relating to
- 27 <u>restrictions on prescribing opioids) do not apply if the</u>
- 28 treatment with a controlled substance containing an opioid meets
- 29 any of the following criteria:
- 30 (1) the treatment is associated with or incident to a

- 1 <u>medical emergency; or</u>
- 2 (2) in the medical professional's judgment, fulfilling
- 3 the requirements of section 5202(c) with respect to the
- 4 <u>treatment would be detrimental to the individual's health or</u>
- 5 <u>safety.</u>
- 6 § 5205. Medical record.
- 7 <u>A signed consent form obtained under this chapter shall be</u>
- 8 maintained in the individual's medical record.
- 9 Section 2. This act shall take effect in 60 days.