State

State

2015 DRAFTING REQUEST

Bill								
Receive	ed: 1	0/15/2014				Received By:	mgallagh	
Wanted	i: A	s time pe	rmits			Same as LRB:		
For:	A	Administra	ation-Budg	et 7-0370		By/Representing:	Potts	
May Co	ontact:					Drafter:	mgallagh	
Subject			aw - drugs			Addl. Drafters:		
	(Occupational Reg misc				Extra Copies:		· .
Reques	Submit via email: Requester's email: Carbon copy (CC) to: michael.gallagher@legis.wisconsin.gov michael.duchek@legis.wisconsin.gov sbostatlanguage@webapps.wi.gov Pre Topic:							
Topic:	:		onitoring p	rogram to con	trolled su	bstances board.		
Instru	ctions:							
See att	tached							
Drafti	ng Histo	ry:		<u>.</u>				
Vers.	Drafted	<u>R</u>	eviewed	<u>Typed</u>	Proofed	Submitted	Jacketed	Required
/P1	mgallag 11/18/2		calvin 1/24/2014	rschluet 11/7/2014		_ sbasford _ 11/7/2014		

mgallagh 12/17/2014

mgallagh

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eweiss

kfollett

12/17/2014

jfrantze

rschluet

11/24/2014

lparisi 11/24/2014

sbasford

LRB-0433 1/30/2015 7:14:52 PM Page 2

Vers.	<u>Drafted</u> 1/23/2015	Reviewed 1/23/2015	<u>Typed</u> 12/18/2014	<u>Proofed</u>	Submitted 12/18/2014	Jacketed	Required
/P4	mgallagh 1/30/2015	kfollett 1/30/2015	jmurphy 1/30/2015		sbasford 1/23/2015		State
/P5		·			srose 1/30/2015		State

FE Sent For:

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State

2015 DRAFTING REQUEST

Bill								
Receiv	ved: 10	/15/2014				Received By:	mgallagh	
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LRB-0433 1/23/2015 10:54:30 AM Page 2

Vers.	<u>Drafted</u> 1/23/2015	Reviewed 1/23/2015	<u>Typed</u> 12/18/2014	Proofed	Submitted 12/18/2014	<u>Jacketed</u>	Required
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Bill								
Receive	ceived: 10/15/2014				Received By:	mgallagh		
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Subject			Law - drugs			Addl. Drafters:		·
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LRB-0433 12/18/2014 10:12:28 AM Page 2

Vers.DraftedReviewedTypedProofedSubmittedJacketedRequired12/18/2014______12/18/2014

FE Sent For:

<**END>**

Bill								
Recei	ved: 1	.0/15/2014				Received By:	mgallagh	
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For:	A	Administratio	n-Bud	get 7-0370		By/Representing:	Potts	
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FE Sent For:

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Bill						
Received:	10/15/2014		Received By:	mgallagh		
Wanted:	As time perm	its	Same as LRB:			
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May Contact:			Drafter:	mgallagh		
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Requester's en	Submit via email: Requester's email: Carbon copy (CC) to: michael.gallagher@legis.wisconsin.gov michael.duchek@legis.wisconsin.gov sbostatlanguage@webapps.wi.gov /					
Pre Topic:						
DOA:Pott	s, BB0148 -					
Topic:						
Move prescrip	otion drug mon	itoring program to control	led substances board.			
Instructions:			-			
See attached	See attached					
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Vers.	<u>Drafted</u>	Reviewed	Typed	<u>Proofed</u>	Submitted	<u>Jacketed</u>	Required
/P1	mgallagh 10/31/2014	scalvin 11/7/2014	rschluet 11/7/2014		sbasford 11/7/2014		
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Bill

Received:

10/15/2014

Received By:

mgallagh

Wanted:

As time permits

Same as LRB:

For:

Administration-Budget 7-0370

By/Representing:

Potts

May Contact:

Drafter:

mgallagh

Subject:

Criminal Law - drugs

Addl. Drafters:

Occupational Reg. - misc

Extra Copies:

Submit via email:

YES

Requester's email:

Carbon copy (CC) to:

michael.gallagher@legis.wisconsin.gov michael.duchek@legis.wisconsin.gov sbostatlanguage@webapps.wi.gov

Pre Topic:

DOA:.....Potts, BB0148 -

Topic:

Move prescription drug monitoring program to controlled substances board.

Instructions:

See attached

Drafting History:

Vers. Drafted

Reviewed

Typed

Proofed

Submitted

Jacketed

Required

/P1

mgallagh

scalvin

10/31/2014

FE Sent For:

<END>

Gallagher, Michael

From:

Hanaman, Cathlene

Sent: To:

Tuesday, October 14, 2014 4:49 PM Duchek, Michael; Gallagher, Michael

Subject:

FW: Statutory Language Drafting Request - BB0148

From: andrew.potts@wisconsin.gov [mailto:andrew.potts@wisconsin.gov]

Sent: Tuesday, October 14, 2014 4:46 PM

To: Hanaman, Cathlene

Cc: Frederick, Caitlin - DOA; Potts, Andrew R - DOA; Connor, Christopher B - DOA

Subject: Statutory Language Drafting Request - BB0148

Biennial Budget: 2015-17

DOA Tracking Code: BB0148

Topic: Prescription Drug Monitoring Program

SBO Team: AEJ

SBO Analyst: Potts, Andrew

Phone: 608-267-0370

E-mail: andrew.potts@wisconsin.gov

Agency Acronym: DRL

Agency Number: 165

Priority: Medium

Intent:

Move the PDMP from the Pharmacy Examining Board to the Controlled Substances Board (CSB). Add Sec of DSPS or designee, chair of the Medical Examining Board or designee, the chair of the Dentistry Examining Board or designee and the chair of the Board of Nursing or designee to the CSB. Remove the psychiatrist member from the CSB.

Give the CSB the authority to monitor and review PDMP records. Authorize the CSB to refer pharmacies and practitioners that do not comply with the PDMP to the appropriate regulatory board. Failure to comply includes failure to deliver records to the PDMP as required and when a prescriber, dispenser or patient may be engaged in critically dangerous behavior. Authorize the CSB to disclose PDMP information regulatory boards and state agencies.

Attachments: False

Please send completed drafts to SBOStatlanguage@webapps.wi.gov



State of Misconsin 2015 - 2016 LEGISLATURE



DOA:.....Potts, BB0148 – Move prescription drug monitoring program to controlled substances board.

FOR 2015-2017 BUDGET — NOT READY FOR INTRODUCTION

D-Note.

AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau SAFETY AND PROFESSIONAL SERVICES

PROFESSIONAL LICENSURE

Current law requires the Pharmacy Examining Board to establish by rule and administer a prescription drug monitoring program (PDMP). The PDMP requires pharmacies and physicians or other practitioners to generate a record documenting each dispensing of a prescription drug by the pharmacy or practitioner that is covered by the PDMP, generally a controlled substance or other drug the Pharmacy Examining Board identifies as having a substantial potential for abuse. Among other requirements, the pharmacy or practitioner must deliver records generated under the PDMP to the Pharmacy Examining Board.

This bill transfers the PDMP to the Controlled Substances Board, which, like the Pharmacy Examining Board, is attached to DSPS.

Also, under current law, the membership of the Controlled Substances Board consists of all of the following five members:

1. The attorney general or his or her designee.

2. The secretary of health services or his or her designee.

3. The secretary of agriculture, trade and consumer protection or his or her designee.

The thai spesson of the Pharmacy Examining Board.

4. The thai spesson of the Pharmacy Examining Board.

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Ø. One psychiatrist for a three-year term.

8. One pharmacologist for a three-year term.

The bill eliminates the psychiatrist member from that list but adds all of the following, for a total of eight members:

- 1. The secretary of safety and professional services or his or her designee.
- 2. The chairperson of the Medical Examining Board or his or her designee.
- 3. The chairperson of the Dentistry Examining Board or his or her designee.
- 4. The chairperson of the Board of Nursing or his or her designee.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 15.405 (5g) of the statutes is amended to read:

15.405 (5g) Controlled substances board consisting of the attorney general, the secretary of health services and, the secretary of agriculture, trade and consumer protection, and the secretary of safety and professional services, or their designees; the chairperson of the pharmacy examining board, the chairperson of the medical examining board, the chairperson of the dentistry examining board, and the chairperson of the board of nursing, or a designee their designees; and one psychiatrist and one pharmacologist appointed for a 3-year terms term.

History: 1973 c. 90, 156; 1975 c. 39, 86, 199, 200, 383, 422; 1977 c. 26, 29, 203; 1977 c. 418; 1979 c. 34 ss. 45, 47 to 52; 1979 c. 221, 304; 1981 c. 94 ss. 5, 9; 1981 c. 356; 1983 a. 27, 403, 485, 538; 1985 a. 340; 1987 a. 257 s. 2; 1987 a. 264, 265, 316; 1989 a. 316, 340; 1991 a. 39, 78, 160, 189, 269; 1993 a. 16, 102, 463, 465, 491; 1995 a. 27 s. 9126 (19); 1995 a. 225; 1995 a. 305 s. 1; 1995 a. 321, 412; 1997 a. 96, 252, 300; 2001 a. 16, 80; 2003 a. 111, 270; 2005 a. 25, 314; 2007 a. 20 s. 9121 (6) (a); 2009 a. 106; 2009 a. 149 s. 3; 2011 a. 32 ss. 110, 130 to 153; 2011 a. 190; 2013 a. 124, 358; s. 13,92 (2) (i).

Section 2. 20.165 (1) (hg) of the statutes is amended to read:

20.165 (1) (hg) General program operations; medical examining board; prescription drug monitoring program. Biennially, the amounts in the schedule for the licensing, rule-making, and regulatory functions of the medical examining board and the affiliated credentialing boards attached to the medical examining board, except for preparing, administering, and grading examinations; and for the pharmacy examining controlled substances board's operation of the prescription

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1 drug monitoring program under s. 450.19 961.385. Ninety percent of all moneys 2 received for issuing and renewing credentials under ch. 448 shall be credited to this 3 appropriation.

History: 1971 c. 125; 1973 c. 90, 156, 333; 1975 c. 39; 1977 c. 29, 400, 418; 1979 c. 34; 1979 c. 175 s. 53; 1979 c. 221 s. 2202 (45); 1981 c. 20; 1983 a. 27; 1985 a. 29; 1989 a. 31, 307; 1991 a. 167, 269, 315; 1993 a. 16, 102, 360; 1995 a. 27, 461; 1997 a. 27; 1999 a. 9; 2001 a. 16; 2007 a. 20; 2009 a. 28, 111; 2011 a. 32 ss. 447 to 476, 478, 480 to 484, 486 to 488, 494 to 495; 2011 a. 146; 2013 a. 20, 358.

Section 3. 146.82 (1) of the statutes is amended to read:

146.82 (1) Confidentiality. All patient health care records shall remain confidential. Patient health care records may be released only to the persons designated in this section or to other persons with the informed consent of the patient or of a person authorized by the patient. This subsection does not prohibit reports made in compliance with s. 253.12 (2), 255.40, or 979.01; records generated or disclosed pursuant to rules promulgated under s. 450.19 961.385; testimony authorized under s. 905.04 (4) (h); or releases made for purposes of health care operations, as defined in 45 CFR 164.501, and as authorized under 45 CFR 164. subpart E.

History: 1979 c. 221; 1983 a. 398; 1985 a. 29, 241, 332, 340; 1987 a. 40, 70, 127, 215, 233, 380, 399; 1989 a. 31, 102, 334, 336; 1991 a. 39; 1993 a. 16, 27, 445, 479; 1995 a. 98, 169, 417; 1997 a. 35, 114, 231, 272, 292, 305; 1999 a. 32, 78, 83, 114, 151; 2001 a. 38, 59, 69, 105; 2003 a. 281; 2005 a. 187, 344, 387, 388, 434; 2007 a. 20 s. 9121 (6) (a); 2007 a. 45, 106, 108, 130; 2009 a. 28, 276, 362; 2011 a. 32, 161; 2013 a. 20, 334. 14

Section 4. 450.11 (1b) (bm) of the statutes is amended to read:

450.11 (1b) (bm) A pharmacist or other person dispensing or delivering a drug shall legibly record the name on each identification card presented under par. (b) to the pharmacist or other person, and the name of each person to whom a drug is dispensed or delivered subject to par. (e) 2., and shall maintain that record for a time established by the board by rule or, for a record that is subject to s. 450.19 961.385, until the name is delivered to the controlled substances board under s. 450.19 961.385, whichever is sooner.

History: 1985 a. 146; 1997 a. 27, 175, 283; 2001 a. 109; 2005 a. 187, 195, 196, 242; 2007 a. 97; 2009 a. 113, 280; 2011 a. 159, 161; 2013 a. 199, 200, 239; s. 13.92 (2) (i). SECTION 5. 450.19 of the statutes is renumbered 961.385, and 961.385 (2) (a)

3., (c) and (f) and (2m) (b), as renumbered, are amended to read:

 $\mathbf{2}$

Section 5

961.385 (2) (a) 3. The prescription order is for a monitored prescription drug
that is a substance listed in the schedule in s. 961.22 and is not a narcotic drug, as
defined in s. 961.01 (15), and the prescription order is for a number of doses that is
intended to last the patient 7 days or less.

- (c) Specify the persons to whom a record may be disclosed and the circumstances under which the disclosure may occur. The rule promulgated under this paragraph shall permit the board to share a record generated by the program with relevant boards or agencies of this state and relevant agencies of other states.
- (f) Specify the Refer to the appropriate board for discipline for failure a pharmacist, pharmacy, or practitioner that fails to comply with rules promulgated under this subsection.
- (2m) (b) After consultation with representatives of licensed pharmacists and pharmacies, and subject to the approval of the secretary of safety and professional services, the board may delay the requirement that a record delivered to the board contain the name recorded under s. 450.11 (1b) (bm) for an additional period beyond the date specified in par. (a).

History: 2009 a. 362; 2011 a. 260 s. 81; 2013 a. 3, 20, 124, 199; s. 13.92 (2) (i).

Section 9138. Nonstatutory provisions; Safety and Professional Services.

- (1) Transfer of prescription drug monitoring program.
- (a) Assets and liabilities. The assets and liabilities of the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program become the assets and liabilities of the controlled substances board on the effective date of this paragraph.

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- (b) Tangible personal property. On the effective date of this paragraph, all tangible personal property, including records, of the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program is transferred to the controlled substances board.
- (c) Contracts. All contracts that were entered into by the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program, and that are in effect on the effective date of this paragraph, remain in effect and are transferred to the controlled substances board. The controlled substances board shall carry out any obligations under such a contract until the contract is modified or rescinded by the controlled substances board to the extent allowed under the contract.
- (d) Rules and orders. All rules promulgated, and all orders issued, by the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program, and that are in effect on the effective date of this paragraph, remain in effect until their specified expiration date or until amended, rescinded, or repealed by the controlled substances board.
- (e) *Pending matters*. Any matter pending with the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program is transferred to the controlled substances board, and all materials submitted to or actions taken by the pharmacy examining board with respect to the pending matter are considered as having been submitted to or taken by the controlled substances board.

(END)

DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

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Andy:

Please review this draft carefully to ensure that it is consistent with the intent.

I did not include any language specifying that failure to deliver records under the PDMP is a failure to comply with the PDMP. That is already true under current law. Let me know if something else is intended by that language in the drafting instructions that I may be missing.

I also did not include the language from the drafting instructions that it is a failure to comply with the PDMP if there is a "failure to deliver records when a prescriber, dispenser or patient may be engaged in critically dangerous behavior." I have the following comments and questions about that language:

- 1. The PDMP requires a record to be generated after a monitored prescription drug is dispensed to a patient at a pharmacy or by a practitioner. There is no requirement that a record be generated based on a person's observed behavior. Is the intent to create such a requirement under the PDMP?
- 2. It is not clear to me what might constitute engaging in a "critically dangerous behavior," especially for a practitioner or pharmacist. Can we define that behavior?
- 3. In the case of a practitioner dispensing a prescription drug to a patient in the practitioner's office, who is to make a record of such behavior and deliver the record to the PDMP? In the case of a pharmacist engaging in such behavior, is it the pharmacy that must report it?
- 4. If a practitioner or a pharmacist observes such behavior in a patient, might be or she have some obligation under current law concerning that behavior?
- 5. Is the idea that the practitioner or pharmacist must refuse to dispense the monitored prescription drug to a patient and report such behavior under the PDMP when such behavior is observed? Or, is the intent that the practitioner or pharmacist dispense the monitored prescription drug to the patient but include a description of any such behavior in the record delivered under the PDMP.

If you want to discuss my questions, please do not hesitate to contact me. Thank you.

Michael Gallagher Legislative Attorney (608) 267–7511 michael.gallagher@legis.wisconsin.gov



DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

LRB-0433/P1dn MPG:sac:rs

November 7, 2014

Andy:

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- 1. The PDMP requires a record to be generated after a monitored prescription drug is dispensed to a patient at a pharmacy or by a practitioner. There is no requirement that a record be generated based on a person's observed behavior. Is the intent to create such a requirement under the PDMP?
- 2. It is not clear to me what might constitute engaging in a "critically dangerous behavior," especially for a practitioner or pharmacist. Can we define that behavior?
- 3. In the case of a practitioner dispensing a prescription drug to a patient in the practitioner's office, who is to make a record of such behavior and deliver the record to the PDMP? In the case of a pharmacist engaging in such behavior, is it the pharmacy that must report it?
- 4. If a practitioner or a pharmacist observes such behavior in a patient, might be or she have some obligation under current law concerning that behavior?
- 5. Is the idea that the practitioner or pharmacist must refuse to dispense the monitored prescription drug to a patient and report such behavior under the PDMP when such behavior is observed? Or, is the intent that the practitioner or pharmacist dispense the monitored prescription drug to the patient but include a description of any such behavior in the record delivered under the PDMP?

If you want to discuss my questions, please do not hesitate to contact me. Thank you.

Michael Gallagher Legislative Attorney (608) 267–7511 michael.gallagher@legis.wisconsin.gov

STATE OF WISCONSIN – LEGISLATIVE REFERENCE BUREAU

LRB

Research (608-266-0341)

Library (608-266-7040)

Legal (608-266-3561)

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In: 11/18 State of Wisconsin 2015 – 2016 **LEGISLATURE**



DOA:.....Potts, BB0148 - Move prescription drug monitoring program to controlled substances board.

FOR 2015-2017 BUDGET -- NOT READY FOR INTRODUCTION

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Analysis by the Legislative Reference Bureau SAFETY AND PROFESSIONAL SERVICES

PROFESSIONAL LICENSURE

Current law requires the Pharmacy Examining Board to establish by rule and administer a prescription drug monitoring program (PDMP). The PDMP requires pharmacies and physicians or other practitioners to generate a record documenting each dispensing of a prescription drug by the pharmacy or practitioner that is covered by the PDMP, generally a controlled substance or other drug the Pharmacy Examining Board identifies as having a substantial potential for abuse. Among other requirements, the pharmacy or practitioner must deliver records generated under the PDMP to the Pharmacy Examining Board.

This bill transfers the PDMP to the Controlled Substances Board, which, like the Pharmacy Examining Board, is attached to DSPS. (CSB)

Also, under current law, the membership of the Controlled Substances Board consists of all of the following six members:

1. The attorney general or his or her designee.

2. The secretary of health services or his or her designee.

3. The secretary of agriculture, trade and consumer protection or his or her designee.

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- 4. The chairperson of the Pharmacy Examining Board.
- 5. One psychiatrist for a three-year term.
- 6. One pharmacologist for a three-year term.

The bill eliminates the psychiatrist member from that list but adds all of the following, for a total of nine members:

- 1. The secretary of safety and professional services or his or her designee.
- 2. The chairperson of the Medical Examining Board or his or her designee.
- 3. The chairperson of the Dentistry Examining Board or his or her designee.
- 4. The chairperson of the Board of Nursing or his or her designee.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 15.405 (5g) of the statutes is amended to read:

15.405 (5g) Controlled substances board consisting of the attorney general, the secretary of health services and, the secretary of agriculture, trade and consumer protection, and the secretary of safety and professional services, or their designees; the chairperson of the pharmacy examining board, the chairperson of the medical examining board, the chairperson of the dentistry examining board, and the chairperson of the board of nursing, or a designee; and one psychiatrist their designees; and one pharmacologist appointed for a 3-year terms term.

SECTION 2. 20.165 (1) (hg) of the statutes is amended to read:

20.165 (1) (hg) General program operations; medical examining board; prescription drug monitoring program. Biennially, the amounts in the schedule for the licensing, rule-making, and regulatory functions of the medical examining board and the affiliated credentialing boards attached to the medical examining board, except for preparing, administering, and grading examinations; and for the pharmacy examining controlled substances board's operation of the prescription

drug monitoring program under s. 450.19 961.385. Ninety percent of all moneys received for issuing and renewing credentials under ch. 448 shall be credited to this appropriation.

SECTION 3. 146.82 (1) of the statutes is amended to read:

146.82 (1) Confidential. All patient health care records shall remain confidential. Patient health care records may be released only to the persons designated in this section or to other persons with the informed consent of the patient or of a person authorized by the patient. This subsection does not prohibit reports made in compliance with s. 253.12 (2), 255.40, or 979.01; records generated or disclosed pursuant to rules promulgated under s. 450.19 961.385; testimony authorized under s. 905.04 (4) (h); or releases made for purposes of health care operations, as defined in 45 CFR 164.501, and as authorized under 45 CFR 164, subpart E.

SECTION 4. 450.11 (1b) (bm) of the statutes is amended to read:

450.11 (**1b**) (bm) A pharmacist or other person dispensing or delivering a drug shall legibly record the name on each identification card presented under par. (b) to the pharmacist or other person, and the name of each person to whom a drug is dispensed or delivered subject to par. (e) 2., and shall maintain that record for a time established by the board by rule or, for a record that is subject to s. 450.19 961.385, until the name is delivered to the <u>controlled substances</u> board under s. 450.19 961.385, whichever is sooner.

SECTION 5. 450.19 of the statutes is renumbered 961.385, and 961.385 (2) (a) 3., (c) and (f) and (2m) (b), as renumbered, are amended to read:

961.385 (2) (a) 3. The prescription order is for a monitored prescription drug that is a substance listed in the schedule in s. 961.22 and is not a narcotic drug, as

defined in s. 961.01 (15), and the prescription order is for a number of doses that is
intended to last the patient 7 days or less.

- (c) Specify the persons to whom a record may be disclosed and the circumstances under which the disclosure may occur. The rule promulgated under this paragraph shall permit the board to share a record generated by the program with relevant boards or agencies of this state and relevant agencies of other states.
- (f) Specify the Refer to the appropriate board for discipline for failure a pharmacist, pharmacy, or practitioner that fails to comply with rules promulgated under this subsection.
- (2m) (b) After consultation with representatives of licensed pharmacists and pharmacies, and subject to the approval of the secretary of safety and professional services, the board may delay the requirement that a record delivered to the board contain the name recorded under s. 450.11 (1b) (bm) for an additional period beyond the date specified in par. (a).

Section 9138. Nonstatutory provisions; Safety and Professional Services.

- (1) Transfer of prescription drug monitoring program.
- (a) Assets and liabilities. The assets and liabilities of the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program become the assets and liabilities of the controlled substances board on the effective date of this paragraph.
- (b) Tangible personal property. On the effective date of this paragraph, all tangible personal property, including records, of the pharmacy examining board that the secretary of safety and professional services determines to be primarily related

to the prescription drug monitoring program is transferred to the controlled substances board.

- (c) Contracts. All contracts that were entered into by the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program, and that are in effect on the effective date of this paragraph, remain in effect and are transferred to the controlled substances board. The controlled substances board shall carry out any obligations under such a contract until the contract is modified or rescinded by the controlled substances board to the extent allowed under the contract.
- (d) Rules and orders. All rules promulgated, and all orders issued, by the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program, and that are in effect on the effective date of this paragraph, remain in effect until their specified expiration date or until modified, amended, rescinded, or repealed by the controlled substances board.
- (e) *Pending matters*. Any matter pending with the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program is transferred to the controlled substances board, and all materials submitted to or actions taken by the pharmacy examining board with respect to the pending matter are considered as having been submitted to or taken by the controlled substances board.

2015–2016 DRAFTING INSERT FROM THE LEGISLATIVE REFERENCE BUREAU

1 INSERT A

Also under current law, the rules promulgated under the PDMP must permit the PEB to disclose a record generated under the PDMP to relevant state and local agencies. The bill specifies that those agencies include law enforcement and that the circumstances under which the CSB, under the bill, may disclose a record generated under the PDMP include circumstances indicating suspicious or critically-dangerous behavior of a pharmacy, pharmacist, practitioner, or patient. The bill requires the CSB to define "suspicious or critically-dangerous behavior" for purposes of the PDMP.

conduct or practices

Current law further requires the PEB to specify by rule the discipline for failure to comply with the PDMP. Under the bill, the rules promulgated by the CSB must permit the board to refer to the appropriate board for discipline, or the appropriate law enforcement agency for investigation and possible prosecutions, a pharmacist, pharmacy, or practitioner that fails to comply with the PDMP, including by failing to generate a recordin compliance with the PDMP. That is required by

For further information see the **state** fiscal estimate, which will be printed as

an appendix to this bill.

END INSERT A

INSERT 4-2

circumstances under which the disclosure may occur. The rule promulgated under this paragraph shall permit the board to share disclose a record generated by the program with to relevant state and local boards and agencies, including law enforcement, and relevant agencies of other states, including under circumstances indicating suspicious or critically—dangerous behavior of a pharmacy, pharmacist, practitioner, or patient. The board shall define what constitutes suspicious or critically—dangerous behavior for purposes of the rule promulgated under this paragraph.

(f) Specify Permit the board to refer to the appropriate board for discipline for failure, or the appropriate law enforcement agency for investigation and possible prosecution, a pharmacist, pharmacy, or practitioner that fails to comply with rules

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promulgated under this subsection, including by failing to generate a record in

compliance with the program.

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that is required by

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IN: 12-17 Thanks

State of Misconsin 2015 - 2016 LEGISLATURE



DOA:.....Potts, BB0148 - Move prescription drug monitoring program to controlled substances board.

FOR 2015-2017 BUDGET -- NOT READY FOR INTRODUCTION

/P3

SA

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AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau SAFETY AND PROFESSIONAL SERVICES

PROFESSIONAL LICENSURE

Current law requires the Pharmacy Examining Board (PEB) to establish by rule and administer a prescription drug monitoring program (PDMP). The PDMP requires pharmacies and physicians or other practitioners to generate a record documenting each dispensing of a prescription drug by the pharmacy or practitioner that is covered by the PDMP, generally a controlled substance or other drug the PEB identifies as having a substantial potential for abuse. Among other requirements, the pharmacy or practitioner must deliver records generated under the PDMP to the PEB.

This bill transfers the PDMP to the Controlled Substances Board (CSB), which, like the PEB, is attached to DSPS.

Also, under current law, the membership of the CSB consists of all of the following six members:

- 1. The attorney general or his or her designee.
- 2. The secretary of health services or his or her designee.
- 3. The secretary of agriculture, trade and consumer protection or his or her designee.

to the membership of the LSP

- 4. The chairperson of the PEB.
- 5. One psychiatrist for a three-year term.
- 6. One pharmacologist for a three-year term.

The bill <u>climinates</u> the psychiatrist member from that list but adds all of the following, for a total of nine members:

- (1. The secretary of safety and professional services or his or her designee.)
- 2. The chairperson of the Medical Examining Board or his or her designee.
- 3. The chairperson of the Dentistry Examining Board or his or her designee.
- -4. The chairperson of the Board of Nursing or his or her designee.

Also under current law, the rules promulgated under the PDMP must permit the PEB to disclose a record generated under the PDMP to relevant state and local agencies. The bill specifies that those agencies include law enforcement and that the circumstances under which the CSB, under the bill, may disclose a record generated under the PDMP include circumstances indicating suspicious or critically dangerous conduct or practices of a pharmacy, pharmacist, practitioner, or patient. The bill requires the CSB to define "suspicious or critically dangerous behavior" for purposes of the PDMP.

Current law further requires the PEB to specify by rule the discipline for failure to comply with the PDMP. Under the bill, the rules promulgated by the CSB must permit the board to refer to the appropriate board for discipline, or the appropriate law enforcement agency for investigation and possible prosecution, a pharmacist, pharmacy, or practitioner that fails to comply with the PDMP, including by failure to generate a record that is required by the PDMP.

For further information see the *state* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

1 Section 1. 15.405 (5g) of the statutes is amended to read:

15.405 (5g) CONTROLLED SUBSTANCES BOARD. There is created in the department

of safety and professional services a controlled substances board consisting of the

attorney general, the secretary of health services, and the secretary of agriculture,

trade and consumer protection, and the secretary of safety and professional services,

or their designees; the chairperson of the pharmacy examining board, the

chairperson of the medical examining board, the chairperson of the dentistry

examining board, and the chairperson of the board of nursing, or a designee; and one

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psychiatrist their designees and one pharmacologist appointed for a 3-year terms

term.

Section 2. 20.165 (1) (hg) of the statutes is amended to read:

20.165 (1) (hg) General program operations; medical examining board; prescription drug monitoring program. Biennially, the amounts in the schedule for the licensing, rule-making, and regulatory functions of the medical examining board and the affiliated credentialing boards attached to the medical examining board, except for preparing, administering, and grading examinations; and for the pharmacy examining controlled substances board's operation of the prescription drug monitoring program under s. 450.19 961.385. Ninety percent of all moneys received for issuing and renewing credentials under ch. 448 shall be credited to this appropriation.

SECTION 3. 146.82 (1) of the statutes is amended to read:

146.82 (1) Confidential. All patient health care records shall remain confidential. Patient health care records may be released only to the persons designated in this section or to other persons with the informed consent of the patient or of a person authorized by the patient. This subsection does not prohibit reports made in compliance with s. 253.12 (2), 255.40, or 979.01; records generated or disclosed pursuant to rules promulgated under s. 450.19 961.385; testimony authorized under s. 905.04 (4) (h); or releases made for purposes of health care operations, as defined in 45 CFR 164.501, and as authorized under 45 CFR 164, subpart E.

SECTION 4. 450.11 (1b) (bm) of the statutes is amended to read:

450.11 (1b) (bm) A pharmacist or other person dispensing or delivering a drug shall legibly record the name on each identification card presented under par. (b) to

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the pharmacist or other person, and the name of each person to whom a drug is dispensed or delivered subject to par. (e) 2., and shall maintain that record for a time established by the board by rule or, for a record that is subject to s. 450.19 961.385, until the name is delivered to the controlled substances board under s. 450.19 961.385, whichever is sooner.

SECTION 5. 450.19 of the statutes is renumbered 961.385, and 961.385 (2) (a) 3., (c) and (f) and (2m) (b), as renumbered, are amended to read:

961.385 (2) (a) 3. The prescription order is for a monitored prescription drug that is a substance listed in the schedule in s. 961.22 and is not a narcotic drug, as defined in s. 961.01 (15), and the prescription order is for a number of doses that is intended to last the patient 7 days or less.

- (c) Specify the persons to whom a record may be disclosed and the circumstances under which the disclosure may occur. The rule promulgated under this paragraph shall permit the board to share disclose a record generated by the program with to relevant state and local boards and agencies, including law enforcement, and relevant agencies of other states, including under circumstances indicating suspicious or critically dangerous conduct or practices of a pharmacy, pharmacist, practitioner, or patient. The board shall define what constitutes suspicious or critically dangerous conduct or practices for purposes of the rule promulgated under this paragraph.
- (f) Specify Permit the board to refer to the appropriate board for discipline for failure, or the appropriate law enforcement agency for investigation and possible prosecution, a pharmacist, pharmacy, or practitioner that fails to comply with rules promulgated under this subsection, including by failure to generate a record that is required by the program.

(2m) (b) After consultation with representatives of licensed pharmacists and pharmacies, and subject to the approval of the secretary of safety and professional services, the board may delay the requirement that a record delivered to the board contain the name recorded under s. 450.11 (1b) (bm) for an additional period beyond the date specified in par. (a).

Section 9138. Nonstatutory provisions; Safety and Professional Services.

- (1) Transfer of Prescription drug monitoring program.
- (a) Assets and liabilities. The assets and liabilities of the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program become the assets and liabilities of the controlled substances board on the effective date of this paragraph.
- (b) Tangible personal property. On the effective date of this paragraph, all tangible personal property, including records, of the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program is transferred to the controlled substances board.
- (c) Contracts. All contracts that were entered into by the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program, and that are in effect on the effective date of this paragraph, remain in effect and are transferred to the controlled substances board. The controlled substances board shall carry out any obligations under such a contract until the contract is modified or rescinded by the controlled substances board to the extent allowed under the contract.

- (d) Rules and orders. All rules promulgated, and all orders issued, by the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program, and that are in effect on the effective date of this paragraph, remain in effect until their specified expiration date or until modified, amended, rescinded, or repealed by the controlled substances board.
- (e) *Pending matters*. Any matter pending with the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program is transferred to the controlled substances board, and all materials submitted to or actions taken by the pharmacy examining board with respect to the pending matter are considered as having been submitted to or taken by the controlled substances board.

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Gallagher, Michael

From:

Potts, Andrew R - DOA <Andrew.Potts@wisconsin.gov> Thursday, January 15, 2015 12:09 PM Gallagher, Michael

Sent:

To:

Subject:

PDMP

Attachments:

20150115115653372.pdf

DSPS comments.

Andrew R. Potts

Executive Budget and Policy Analyst Wisconsin Department of Administration State Budget Office (608) 267-0370

Non-Statutory Language Regarding PDMP Staff for Budget Bill
Section 9138.

(f) Employee assignments. On the effective date of this paragraph, all positions, and the incumbent employees who hold those positions in the department performing duties that are primarily related.

employees who hold those positions, in the department performing duties that are primarily related to the prescription drug monitoring program, as determined by the secretary of safety and professional services, are assigned duties related to the controlled substances board. The secretary may employ, assign and reassign such staff as are required by the controlled substances board in the performance of its functions.

Line 20-after the word "board" insert of by DSPS on behalf of the Pharmacy Examining Board

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Page 5



State of Misconsin 2015 - 2016 LEGISLATURE



LRB-0433/P3

DOA:.....Potts, BB0148 - Move prescription drug monitoring program to controlled substances board.

FOR 2015-2017 BUDGET -- NOT READY FOR INTRODUCTION

/P4)

(Non't Gen)

AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau SAFETY AND PROFESSIONAL SERVICES

PROFESSIONAL LICENSURE

Current law requires the Pharmacy Examining Board (PEB) to establish by rule and administer a prescription drug monitoring program (PDMP). The PDMP requires pharmacies and physicians or other practitioners to generate a record documenting each dispensing of a prescription drug by the pharmacy or practitioner that is covered by the PDMP, generally a controlled substance or other drug the PEB identifies as having a substantial potential for abuse. Among other requirements, the pharmacy or practitioner must deliver records generated under the PDMP to the PEB.

This bill transfers the PDMP to the Controlled Substances Board (CSB), which, like the PEB, is attached to DSPS.

Also, under current law, the membership of the CSB consists of all of the following six members:

- 1. The attorney general or his or her designee.
- 2. The secretary of health services or his or her designee.
- 3. The secretary of agriculture, trade and consumer protection or his or her designee.

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- 4. The chairperson of the PEB.
- 5. One psychiatrist for a three-year term.
- 6. One pharmacologist for a three-year term.

The bill adds all of the following to the membership of the CSB, for a total of nine members:

- 1. The chairperson of the Medical Examining Board or his or her designee.
- 2. The chairperson of the Dentistry Examining Board or his or her designee.
- 3. The chairperson of the Board of Nursing or his or her designee.

Also under current law, the rules promulgated under the PDMP must permit the PEB to disclose a record generated under the PDMP to relevant state and local agencies. The bill specifies that those agencies include law enforcement and that the circumstances under which the CSB, under the bill, may disclose a record generated under the PDMP include circumstances indicating suspicious or critically dangerous conduct or practices of a pharmacy, pharmacist, practitioner, or patient. The bill requires the CSB to define "suspicious or critically dangerous conduct or practices" for purposes of the PDMP.

Current law further requires the PEB to specify by rule the discipline for failure to comply with the PDMP. Under the bill, the rules promulgated by the CSB must permit the board to refer to the appropriate board for discipline, or the appropriate law enforcement agency for investigation and possible prosecution, a pharmacist, pharmacy, or practitioner that fails to comply with the PDMP, including by failure to generate a record that is required by the PDMP.

For further information see the **state** fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 15.405 (5g) of the statutes is amended to read:

15.405 (**5g**) Controlled substances board consisting of the attorney general, the secretary of health services, and the secretary of agriculture, trade and consumer protection, or their designees; the chairperson of the pharmacy examining board, the chairperson of the medical examining board, the chairperson of the dentistry examining board, and the chairperson of the board of nursing, or a designee; and one psychiatrist and one pharmacologist appointed for 3–year terms.

SECTION 2. 20.165 (1) (hg) of the statutes is amended to read:

20.165 (1) (hg) General program operations; medical examining board; prescription drug monitoring program. Biennially, the amounts in the schedule for the licensing, rule-making, and regulatory functions of the medical examining board and the affiliated credentialing boards attached to the medical examining board, except for preparing, administering, and grading examinations; and for the pharmacy-examining controlled substances board's operation of the prescription drug monitoring program under s. 450.19 961.385. Ninety percent of all moneys received for issuing and renewing credentials under ch. 448 shall be credited to this appropriation.

SECTION 3. 146.82 (1) of the statutes is amended to read:

146.82 (1) Confidential. All patient health care records shall remain confidential. Patient health care records may be released only to the persons designated in this section or to other persons with the informed consent of the patient or of a person authorized by the patient. This subsection does not prohibit reports made in compliance with s. 253.12 (2), 255.40, or 979.01; records generated or disclosed pursuant to rules promulgated under s. 450.19 961.385; testimony authorized under s. 905.04 (4) (h); or releases made for purposes of health care operations, as defined in 45 CFR 164.501, and as authorized under 45 CFR 164, subpart E.

SECTION 4. 450.11 (1b) (bm) of the statutes is amended to read:

450.11 (1b) (bm) A pharmacist or other person dispensing or delivering a drug shall legibly record the name on each identification card presented under par. (b) to the pharmacist or other person, and the name of each person to whom a drug is dispensed or delivered subject to par. (e) 2., and shall maintain that record for a time established by the board by rule or, for a record that is subject to s. 450.19 961.385,

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required by the program.

1	until the name is delivered to the controlled substances board under s. 450.19
2	961.385, whichever is sooner.
3	SECTION 5. 450.19 of the statutes is renumbered 961.385, and 961.385 (2) (a)
4	3., (c) and (f) and (2m) (b), as renumbered, are amended to read:
5	961.385 (2) (a) 3. The prescription order is for a monitored prescription drug
6	that is a substance listed in the schedule in s. 961.22 and is not a narcotic drug, as
7	defined in s. 961.01 (15), and the prescription order is for a number of doses that is
8	intended to last the patient 7 days or less.
9	(c) Specify the persons to whom a record may be disclosed and the
10	circumstances under which the disclosure may occur. The rule promulgated under
11	this paragraph shall permit the board to share disclose a record generated by the
12	program with to relevant state and local boards and agencies, including law
13	enforcement, and relevant agencies of other states, including under circumstances
14	indicating suspicious or critically dangerous conduct or practices of a pharmacy
15	pharmacist, practitioner, or patient. The board shall define what constitutes
16	suspicious or critically dangerous conduct or practices for purposes of the rule
17	promulgated under this paragraph.
18	(f) Specify Permit the board to refer to the appropriate board for discipline for
19	failure, or the appropriate law enforcement agency for investigation and possible
20	prosecution, a pharmacist, pharmacy, or practitioner that fails to comply with rules
21	promulgated under this subsection, including by failure to generate a record that is

(2m) (b) After consultation with representatives of licensed pharmacists and pharmacies, and subject to the approval of the secretary of safety and professional services, the board may delay the requirement that a record delivered to the board

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1 contain the name recorded under s. 450.11 (1b) (bm) for an additional period beyond
2 the date specified in par. (a).

Section 9138. Nonstatutory provisions; Safety and Professional Services.

- (1) Transfer of prescription drug monitoring program.
- (a) Assets and liabilities. The assets and liabilities of the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program become the assets and liabilities of the controlled substances board on the effective date of this paragraph.
- (b) Tangible personal property. On the effective date of this paragraph, all tangible personal property, including records, of the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program is transferred to the controlled substances board.
- (c) Contracts. All contracts that were entered into by the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program, and that are in effect on the effective date of this paragraph, remain in effect and are transferred to the controlled substances board. The controlled substances board shall carry out any obligations under such a contract until the contract is modified or rescinded by the controlled substances board to the extent allowed under the contract.
- (d) Rules and orders. All rules promulgated, and all orders issued, by the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program, and

or by the department of safety and professional Services on behalf of the pharmacy examining board.

that are in effect on the effective date of this paragraph, remain in effect until their
specified expiration date or until modified, amended, rescinded, or repealed by the
controlled substances board.

(e) *Pending matters*. Any matter pending with the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program is transferred to the controlled substances board, and all materials submitted to or actions taken by the pharmacy examining board with respect to the pending matter are considered as having been submitted to or taken by the controlled substances board.

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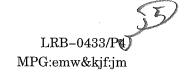
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State of Misconsin 2015 - 2016 LEGISLATURE



DOA:.....Potts, BB0148 – Move prescription drug monitoring program to controlled substances board.

FOR 2015-2017 BUDGET -- NOT READY FOR INTRODUCTION

Pon't Gen

AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau SAFETY AND PROFESSIONAL SERVICES

PROFESSIONAL LICENSURE

Current law requires the Pharmacy Examining Board (PEB) to establish by rule and administer a prescription drug monitoring program (PDMP). The PDMP requires pharmacies and physicians or other practitioners to generate a record documenting each dispensing of a prescription drug by the pharmacy or practitioner that is covered by the PDMP, generally a controlled substance or other drug the PEB identifies as having a substantial potential for abuse. Among other requirements, the pharmacy or practitioner must deliver records generated under the PDMP to the PEB.

This bill transfers the PDMP to the Controlled Substances Board (CSB), which, like the PEB, is attached to DSPS.

Also, under current law, the membership of the CSB consists of all of the following six members:

- 1. The attorney general or his or her designee.
- 2. The secretary of health services or his or her designee.
- 3. The secretary of agriculture, trade and consumer protection or his or her designee.

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- 4. The chairperson of the PEB.
- 5. One psychiatrist for a three-year term.
- 6. One pharmacologist for a three-year term.

The bill adds all of the following to the membership of the CSB, for a total of nine members:

- 1. The chairperson of the Medical Examining Board or his or her designee.
- 2. The chairperson of the Dentistry Examining Board or his or her designee.
- 3. The chairperson of the Board of Nursing or his or her designee.

Also under current law, the rules promulgated under the PDMP must permit the PEB to disclose a record generated under the PDMP to relevant state and local agencies. The bill specifies that those agencies include law enforcement and that the circumstances under which the CSB, under the bill, may disclose a record generated under the PDMP include circumstances indicating suspicious or critically dangerous conduct or practices of a pharmacy, pharmacist, practitioner, or patient. The bill requires the CSB to define "suspicious or critically dangerous conduct or practices" for purposes of the PDMP.

Current law further requires the PEB to specify by rule the discipline for failure to comply with the PDMP. Under the bill, the rules promulgated by the CSB must permit the board to refer to the appropriate board for discipline, or the appropriate law enforcement agency for investigation and possible prosecution, a pharmacist, pharmacy, or practitioner that fails to comply with the PDMP, including by failure to generate a record that is required by the PDMP.

For further information see the *state* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

Section 1. 15.405 (5g) of the statutes is amended to read:

15.405 (5g) Controlled substances board consisting of the attorney general, the secretary of health services, and the secretary of agriculture, trade and consumer protection, or their designees; the chairperson of the pharmacy examining board, the chairperson of the medical examining board, the chairperson of the dentistry examining board, and the chairperson of the board of nursing, or a designee; and one psychiatrist and one pharmacologist appointed for 3-year terms.

SECTION 2. 20.165 (1) (hg) of the statutes is amended to read:

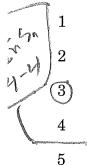
20.165 (1) (hg) General program operations; medical examining board; prescription drug monitoring program. Biennially, the amounts in the schedule for the licensing, rule—making, and regulatory functions of the medical examining board and the affiliated credentialing boards attached to the medical examining board, except for preparing, administering, and grading examinations; and for the pharmacy examining controlled substances board's operation of the prescription drug monitoring program under s. 450.19 961.385. Ninety percent of all moneys received for issuing and renewing credentials under ch. 448 shall be credited to this appropriation.

Section 3. 146.82 (1) of the statutes is amended to read:

146.82 (1) Confidential. All patient health care records shall remain confidential. Patient health care records may be released only to the persons designated in this section or to other persons with the informed consent of the patient or of a person authorized by the patient. This subsection does not prohibit reports made in compliance with s. 253.12 (2), 255.40, or 979.01; records generated or disclosed pursuant to rules promulgated under s. 450.19 961.385; testimony authorized under s. 905.04 (4) (h); or releases made for purposes of health care operations, as defined in 45 CFR 164.501, and as authorized under 45 CFR 164, subpart E.

SECTION 4. 450.11 (1b) (bm) of the statutes is amended to read:

450.11 (1b) (bm) A pharmacist or other person dispensing or delivering a drug shall legibly record the name on each identification card presented under par. (b) to the pharmacist or other person, and the name of each person to whom a drug is dispensed or delivered subject to par. (e) 2., and shall maintain that record for a time established by the board by rule or, for a record that is subject to s. 450.19 961.385,



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until the name is delivered to the controlled substances board under s. 450.19 961.385, whichever is sooner.

SECTION 5. 450.19 of the statutes is renumbered 961.385, and 961.385 (2) (a)

and (f) and (2m) (b), as renumbered are are all and (2m) (b). 3., (c) and (f) and (2m) (b), as renumbered, are amended to read:

- 961.385 (2) (a) 3. The prescription order is for a monitored prescription drug that is a substance listed in the schedule in s. 961.22 and is not a narcotic drug, as defined in s. 961.01 (15), and the prescription order is for a number of doses that is intended to last the patient 7 days or less.
- (c) Specify the persons to whom a record may be disclosed and the circumstances under which the disclosure may occur. The rule promulgated under this paragraph shall permit the board to share disclose a record generated by the program with to relevant state and local boards and agencies, including law enforcement, and relevant agencies of other states, including under circumstances indicating suspicious or critically dangerous conduct or practices of a pharmacy, pharmacist, practitioner, or patient. The board shall define what constitutes suspicious or critically dangerous conduct or practices for purposes of the rule promulgated under this paragraph.
- (f) Specify Permit the board to refer to the appropriate board for discipline for failure, or the appropriate law enforcement agency for investigation and possible prosecution, a pharmacist, pharmacy, or practitioner that fails to comply with rules promulgated under this subsection, including by failure to generate a record that is required by the program.
- (2m) (b) After consultation with representatives of licensed pharmacists and pharmacies, and subject to the approval of the secretary of safety and professional services, the board may delay the requirement that a record delivered to the board

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1 contain the name recorded under s. 450.11 (1b) (bm) for an additional period beyond the date specified in par. (a).

Section 9138. Nonstatutory provisions; Safety and Professional Services.

- (1) Transfer of Prescription drug monitoring program.
- (a) Assets and liabilities. The assets and liabilities of the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program become the assets and liabilities of the controlled substances board on the effective date of this paragraph.
- (b) Tangible personal property. On the effective date of this paragraph, all tangible personal property, including records, of the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program is transferred to the controlled substances board.
- (c) Contracts. All contracts that were entered into by the pharmacy examining board, or by the department of safety and professional services on behalf of the pharmacy examining board, that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program, and that are in effect on the effective date of this paragraph, remain in effect and are transferred to the controlled substances board. The controlled substances board shall carry out any obligations under such a contract until the contract is modified or rescinded by the controlled substances board to the extent allowed under the contract.

- (d) Rules and orders. All rules promulgated, and all orders issued, by the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program, and that are in effect on the effective date of this paragraph, remain in effect until their specified expiration date or until modified, amended, rescinded, or repealed by the controlled substances board.
- (e) *Pending matters*. Any matter pending with the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program is transferred to the controlled substances board, and all materials submitted to or actions taken by the pharmacy examining board with respect to the pending matter are considered as having been submitted to or taken by the controlled substances board.

(END)

D-Note

2015–2016 DRAFTING INSERT FROM THE LEGISLATIVE REFERENCE BUREAU

 $\begin{array}{c} LRB-0433/P5ins\\ MPG:...:..\end{array}$

1	INSERT 4–4
2	961.385 (1) (ar) "Practitioner" has the meaning given in s. 450.01 (17) but doe
3	not include a veterinarian licensed under ch. 453 89.
	****NOTE: This is reconciled s. $450.19(1)(ar)$. This Section has been affected by drafts with the following LRB numbers: $-0433/P5$ and $-1053/P3$.
4	END INSERT 4-4
	4 2

DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

15-0433/P5dn MPG:...

Opti

This draft reconciles LRB-0433 and LRB-1053. Both of these drafts should continue to appear in the compiled bill.

Michael Gallagher Legislative Attorney (608) 267–7511 michael.gallagher@legis.wisconsin.gov

DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

15-0433/P5dn MPG:kjf:jm

January 30, 2015

This draft reconciles LRB-0433 and LRB-1053. Both of these drafts should continue to appear in the compiled bill.

Michael Gallagher Legislative Attorney (608) 267–7511 michael.gallagher@legis.wisconsin.gov



State of Misconsin 2015 - 2016 LEGISLATURE

LRB-0433/P5 MPG:emw&kjf:jm

DOA:.....Potts, BB0148 – Move prescription drug monitoring program to controlled substances board.

FOR 2015-2017 BUDGET -- NOT READY FOR INTRODUCTION

1 AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau SAFETY AND PROFESSIONAL SERVICES

PROFESSIONAL LICENSURE

Current law requires the Pharmacy Examining Board (PEB) to establish by rule and administer a prescription drug monitoring program (PDMP). The PDMP requires pharmacies and physicians or other practitioners to generate a record documenting each dispensing of a prescription drug by the pharmacy or practitioner that is covered by the PDMP, generally a controlled substance or other drug the PEB identifies as having a substantial potential for abuse. Among other requirements, the pharmacy or practitioner must deliver records generated under the PDMP to the PEB.

This bill transfers the PDMP to the Controlled Substances Board (CSB), which, like the PEB, is attached to DSPS.

Also, under current law, the membership of the CSB consists of all of the following six members:

- 1. The attorney general or his or her designee.
- 2. The secretary of health services or his or her designee.
- 3. The secretary of agriculture, trade and consumer protection or his or her designee.

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- 4. The chairperson of the PEB.
- 5. One psychiatrist for a three-year term.
- 6. One pharmacologist for a three-year term.

The bill adds all of the following to the membership of the CSB, for a total of nine members:

- 1. The chairperson of the Medical Examining Board or his or her designee.
- 2. The chairperson of the Dentistry Examining Board or his or her designee.
- 3. The chairperson of the Board of Nursing or his or her designee.

-2-

Also under current law, the rules promulgated under the PDMP must permit the PEB to disclose a record generated under the PDMP to relevant state and local agencies. The bill specifies that those agencies include law enforcement and that the circumstances under which the CSB, under the bill, may disclose a record generated under the PDMP include circumstances indicating suspicious or critically dangerous conduct or practices of a pharmacy, pharmacist, practitioner, or patient. The bill requires the CSB to define "suspicious or critically dangerous conduct or practices" for purposes of the PDMP.

Current law further requires the PEB to specify by rule the discipline for failure to comply with the PDMP. Under the bill, the rules promulgated by the CSB must permit the board to refer to the appropriate board for discipline, or the appropriate law enforcement agency for investigation and possible prosecution, a pharmacist, pharmacy, or practitioner that fails to comply with the PDMP, including by failure to generate a record that is required by the PDMP.

For further information see the *state* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 15.405 (5g) of the statutes is amended to read:

15.405 (**5g**) Controlled substances board consisting of the attorney general, the secretary of health services, and the secretary of agriculture, trade and consumer protection, or their designees; the chairperson of the pharmacy examining board, the chairperson of the medical examining board, the chairperson of the dentistry examining board, and the chairperson of the board of nursing, or a designee; and one psychiatrist and one pharmacologist appointed for 3–year terms.

SECTION 2. 20.165 (1) (hg) of the statutes is amended to read:

20.165 (1) (hg) General program operations; medical examining board; prescription drug monitoring program. Biennially, the amounts in the schedule for the licensing, rule—making, and regulatory functions of the medical examining board and the affiliated credentialing boards attached to the medical examining board, except for preparing, administering, and grading examinations; and for the pharmacy examining controlled substances board's operation of the prescription drug monitoring program under s. 450.19 961.385. Ninety percent of all moneys received for issuing and renewing credentials under ch. 448 shall be credited to this appropriation.

Section 3. 146.82 (1) of the statutes is amended to read:

146.82 (1) Confidential. All patient health care records shall remain confidential. Patient health care records may be released only to the persons designated in this section or to other persons with the informed consent of the patient or of a person authorized by the patient. This subsection does not prohibit reports made in compliance with s. 253.12 (2), 255.40, or 979.01; records generated or disclosed pursuant to rules promulgated under s. 450.19 961.385; testimony authorized under s. 905.04 (4) (h); or releases made for purposes of health care operations, as defined in 45 CFR 164.501, and as authorized under 45 CFR 164, subpart E.

SECTION 4. 450.11 (1b) (bm) of the statutes is amended to read:

450.11 (1b) (bm) A pharmacist or other person dispensing or delivering a drug shall legibly record the name on each identification card presented under par. (b) to the pharmacist or other person, and the name of each person to whom a drug is dispensed or delivered subject to par. (e) 2., and shall maintain that record for a time established by the board by rule or, for a record that is subject to s. 450.19 961.385,

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- until the name is delivered to the <u>controlled substances</u> board under s. 450.19 961.385, whichever is sooner.
- **SECTION 5.** 450.19 of the statutes is renumbered 961.385, and 961.385 (1) (ar), (2) (a) 3., (c) and (f) and (2m) (b), as renumbered, are amended to read:
 - 961.385 (1) (ar) "Practitioner" has the meaning given in s. 450.01 (17) but does not include a veterinarian licensed under ch. 453 89.

****Note: This is reconciled s. 450.19 (1) (ar). This Section has been affected by drafts with the following LRB numbers: -0433/P4 and -1053/P2.

- 961.385 (2) (a) 3. The prescription order is for a monitored prescription drug that is a substance listed in the schedule in s. 961.22 and is not a narcotic drug, as defined in s. 961.01 (15), and the prescription order is for a number of doses that is intended to last the patient 7 days or less.
- (c) Specify the persons to whom a record may be disclosed and the circumstances under which the disclosure may occur. The rule promulgated under this paragraph shall permit the board to share disclose a record generated by the program with to relevant state and local boards and agencies, including law enforcement, and relevant agencies of other states, including under circumstances indicating suspicious or critically dangerous conduct or practices of a pharmacy, pharmacist, practitioner, or patient. The board shall define what constitutes suspicious or critically dangerous conduct or practices for purposes of the rule promulgated under this paragraph.
- (f) Specify Permit the board to refer to the appropriate board for discipline for failure, or the appropriate law enforcement agency for investigation and possible prosecution, a pharmacist, pharmacy, or practitioner that fails to comply with rules

promulgated under this subsection, including by failure to generate a record that is required by the program.

(2m) (b) After consultation with representatives of licensed pharmacists and pharmacies, and subject to the approval of the secretary of safety and professional services, the board may delay the requirement that a record delivered to the board contain the name recorded under s. 450.11 (1b) (bm) for an additional period beyond the date specified in par. (a).

Section 9138. Nonstatutory provisions; Safety and Professional Services.

- (1) Transfer of prescription drug monitoring program.
- (a) Assets and liabilities. The assets and liabilities of the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program become the assets and liabilities of the controlled substances board on the effective date of this paragraph.
- (b) Tangible personal property. On the effective date of this paragraph, all tangible personal property, including records, of the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program is transferred to the controlled substances board.
- (c) Contracts. All contracts that were entered into by the pharmacy examining board, or by the department of safety and professional services on behalf of the pharmacy examining board, that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program, and that are in effect on the effective date of this paragraph, remain in effect and are

transferred to the controlled substances board. The controlled substances board shall carry out any obligations under such a contract until the contract is modified or rescinded by the controlled substances board to the extent allowed under the contract.

- (d) Rules and orders. All rules promulgated, and all orders issued, by the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program, and that are in effect on the effective date of this paragraph, remain in effect until their specified expiration date or until modified, amended, rescinded, or repealed by the controlled substances board.
- (e) *Pending matters*. Any matter pending with the pharmacy examining board that the secretary of safety and professional services determines to be primarily related to the prescription drug monitoring program is transferred to the controlled substances board, and all materials submitted to or actions taken by the pharmacy examining board with respect to the pending matter are considered as having been submitted to or taken by the controlled substances board.