

2015 DRAFTING REQUEST

Assembly Amendment (AA-AB364)

Received: **10/12/2015** Received By: **mgallagh**
For: **John Nygren (608) 266-2343** Same as LRB:
May Contact: By/Representing: **Jenny**
Subject: **Occupational Reg. - misc** Drafter: **mgallagh**
Addl. Drafters: **mduchek**
Extra Copies:

Submit via email: **YES**
Requester's email: **Rep.Nygren@legis.wisconsin.gov**
Carbon copy (CC) to: **michael.gallagher@legis.wisconsin.gov**
michael.duchek@legis.wisconsin.gov

Pre Topic:

No specific pre topic given

Topic:

Exceptions to requirement that prescriber check PDMP and other changes.

Instructions:

See attached

Drafting History:

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/?	mgallagh 10/13/2015	aernstr 10/13/2015	_____			
/P1	mgallagh 10/19/2015	aernstr 10/19/2015	_____	srose 10/13/2015		
/P2	mduchek	wjackson	_____	lparisi		

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
	10/20/2015	10/20/2015	_____	10/19/2015		
/1			_____	srose	srose	
			_____	10/20/2015	10/20/2015	

FE Sent For:

<END>

Gallagher, Michael

From: Malcore, Jennifer
Sent: Friday, October 09, 2015 12:23 PM
To: Duchek, Michael; Gallagher, Michael
Subject: AB 364/SB268

Mikes,

I have made small changes to the amendments, please don't add (b) and change seven day to three day in (c).

Thanks,

Here is a list of what we are amending. Mike, please let me know if I forgot anything.

These are exceptions to the mandate:

- (a) The controlled substance is prescribed or dispensed to a patient currently receiving hospice care.
- ~~(b) The controlled substance is prescribed or dispensed to a patient as part of a treatment for a surgical procedure that has or will occur in a licensed health care facility and such prescription is non-refillable.~~
- (c) The quantity of the controlled substance prescribed or dispensed does not exceed an amount which is adequate for a single three-day treatment period and does not allow a refill and no subsequent prescriptions are written or dispensed within a fifteen (15) day time period.
- (d) The controlled substance is directly administered to the patient by the prescriber or other person authorized to administer a controlled substance.
- (e) If it is not possible to query the prescription monitoring program in a timely manner due to an emergency situation.
- (f) The program is not operational due to temporary technological or electrical failure or natural disaster.

We are delaying the effective date to April 1, 2017 and placing a sunset on the mandatory check to 3 years after effective date. We were also asked to add language regarding the profession that performs the same functions as substance abuse counselors: "person authorized by the marriage and family therapy, professional counseling, and social work examining board to treat alcohol or substance dependence or abuse as a specialty pursuant to s. 457.02(5m)." The language could be added to the list of people to whom the board may disclose data in Section 10 (and to those who supervise this group in Section 11) of AB 364.

The last part we are amending is putting into the bill that CSB has emergency rule authority to begin at the time the bill is signed, before the effective date.

Jenny

Jennifer Malcore

Office of State Representative John Nygren
Co-Chair, Joint Committee on Finance
89th Assembly District
309 East, State Capitol
608.267.2371

Gallagher, Michael

From: Malcore, Jennifer
Sent: Friday, October 09, 2015 11:06 AM
To: Duchek, Michael; Gallagher, Michael
Subject: AB364/SB268

Mikes,

Here is a list of what we are amending. Mike, please let me know if I forgot anything.

These are exceptions to the mandate:

- (a) The controlled substance is prescribed or dispensed to a patient currently receiving hospice care.
- (b) The controlled substance is prescribed or dispensed to a patient as part of a treatment for a surgical procedure that has or will occur in a licensed health care facility and such prescription is non-refillable.
- (c) The quantity of the controlled substance prescribed or dispensed does not exceed an amount which is adequate for a single seven-day treatment period and does not allow a refill and no subsequent prescriptions are written or dispensed within a fifteen (15) day time period.
- (d) The controlled substance is directly administered to the patient by the prescriber or other person authorized to administer a controlled substance.
- (e) If it is not possible to query the prescription monitoring program in a timely manner due to an emergency situation.
- (f) The program is not operational due to temporary technological or electrical failure or natural disaster.

We are delaying the effective date to April 1, 2017 and placing a sunset on the mandatory check to 3 years after effective date. We were also asked to add language regarding the profession that performs the same functions as substance abuse counselors: "person authorized by the marriage and family therapy, professional counseling, and social work examining board to treat alcohol or substance dependence or abuse as a specialty pursuant to s. 457.02(5m)." The language could be added to the list of people to whom the board may disclose data in Section 10 (and to those who supervise this group in Section 11) of AB 364.

The last part we are amending is putting into the bill that CSB has emergency rule authority to begin at the time the bill is signed, before the effective date.

Jenny

Jennifer Malcore

Office of State Representative John Nygren
Co-Chair, Joint Committee on Finance
89th Assembly District
309 East, State Capitol
608.267.2371

Gallagher, Michael

From: Duchek, Michael
Sent: Thursday, October 08, 2015 2:25 PM
To: Gallagher, Michael
Subject: PDMP amendment

Mike,

Here's the amendment (all of these would be in one amendment) Jenny would like for the PDMP bill (AB 364), which I think I will let you do when you get back since I probably wouldn't get to it till next week anyway:

1. Language to add some professions who can have access to the PDMP (marriage and family, etc., I have suggested language)
2. Some exceptions to the requirement to check before prescribing (she gave me a list from a model act)
3. Sunset the requirement to check the PDMP before prescribing 3 years after it goes into effect
4. Change delayed effective date from Jan. 1, 2017 to April 1, 2017
5. Language that would make the emergency rule authority (which is in a nonstat) go into effect immediately. I told them that we have language (227.11(2)(d)) that arguably makes that unnecessary, but that we might as well add it just to be safe since the nonstat also provides the exemption from having to make a finding of an emergency

We also discussed a couple other things, which could result in other requested additions to the amendment, but not at this point. We can talk more next week. Thanks,

Mike Duchek
Legislative Attorney
Wisconsin Legislative Reference Bureau
(608) 266-0130

Malcore, Jennifer

From: Zadrazil, Chad J - DSPS <Chad.Zadrazil@wisconsin.gov>
Sent: Thursday, October 08, 2015 8:44 AM
To: Malcore, Jennifer
Cc: Esser, Eric - DSPS; Gasper, Greg - DSPS
Subject: RE: Wednesday update

Hi Jenny:

Here is the information that you have requested over the past few days:

- 1) Suggested language regarding the profession that performs the same functions as substance abuse counselors: "person authorized by the marriage and family therapy, professional counseling, and social work examining board to treat alcohol or substance dependence or abuse as a specialty pursuant to s. 457.02(5m)." The language could be added to the list of people to whom the board may disclose data in Section 10 (and to those who supervise this group in Section 11) of AB 364. The Board actually met yesterday, and made a motion requesting this access.
- 2) ~~Here is a link to the~~ National Association of Model State Drug Laws (NAMSDL) Model PDMP Legislation: <http://www.namsdl.org/library/A72D4573-0D93-65C4-281BD9DB01418276/>. The section regarding mandatory use, and the exclusions from mandatory use, begin on the bottom of page 13. I think it may be very helpful to your questions.
- 3) I think your question about drugs implicated in overdoses may be better answered by DHS. However, we do track the most (in terms of # of scripts) dispensed controlled substances on our quarterly statistics. The listed drugs have not changed much since we began collecting data in 2013. Here is a link to our most recent sheet from Q1 2015 that includes the data: http://dsps.wi.gov/Documents/PDMP/Stats/Stats_1501.pdf. In identifying drugs, there is a risk of missing something or something changing so quickly that the legislation could not capture it. A possible solution is to reuse some of the language from the existing PDMP statute (<https://docs.legis.wisconsin.gov/statutes/statutes/961/III/385/1/ag?view=section>) to enable the CSB to identify other drugs for the list via rule.
- 4) I wanted to follow up on the non-stat language granting emergency rulemaking authority to CSB prior to the effective date of the act. This would become more important with changes to the effective date.

I hope this helps, and I will let you know what else I find out in the coming days.

Best,
Chad

Chad Zadrazil

Wisconsin Prescription Drug Monitoring Drug Program (PDMP) Director | Wisconsin Department of Safety and Professional Services
| (608) 266-0011 | PDMP@wisconsin.gov

The DSPS is committed to service excellence. Visit our survey at https://www.surveymonkey.com/s/DPD_PDMP to evaluate your experience with the DSPS.

From: Malcore, Jennifer [mailto:Jennifer.Malcore@legis.wisconsin.gov]
Sent: 07 Oct 2015 10:19 AM
To: Zadrazil, Chad J - DSPS
Subject: FW: Wednesday update

Chad,

*Analysis
227-11 (2)(d)*

- (ii) assist the state or regional chapter of the American Society of Addiction Medicine, or comparable state association, the state medical society, and the single state authority on drugs and alcohol to develop a continuing education course for health care professionals on prescribing practices, pharmacology, and identification, referral, and treatment of patients addicted to or abusing controlled substances or drugs of concern monitored by the PMP; and
- (iii) implement, or assist other appropriate agencies to implement, an educational program to inform the public about the use, diversion, and abuse of, addiction to, and treatment for the addiction to the controlled substances or drugs of concern monitored by the PMP.

(b) The [designated state agency or entity], based on criteria established in consultation with the Advisory Committee, shall refer prescribers and dispensers it has reason to believe may be impaired to the appropriate professional licensing or certification agency, and to the appropriate impaired professionals associations, to provide intervention, assessment, and referral to alcohol and other drug addiction treatment programs, and ongoing monitoring and follow-up.

(c) The [designated state agency or entity] shall, in consultation with the Advisory Committee and the single state authority on drugs and alcohol, work with the appropriate alcohol and other drug addiction treatment professionals to provide that patients identified through the PMP as potentially addicted to a controlled substance or drug of concern are assessed and referred to alcohol and other drug addiction treatment programs.

SECTION 10. REGISTRATION WITH THE PRESCRIPTION MONITORING PROGRAM.

All prescribers with US Drug Enforcement Administration or state controlled substance registration numbers to prescribe controlled substances or drugs of concern shall be registered with the prescription monitoring program either upon the initial registration or renewal of the prescribers' professional license or certification.

SECTION 11. REQUIREMENT TO QUERY THE PRESCRIPTION MONITORING PROGRAM.

A prescriber or prescriber's designee shall query the prescription monitoring program prior to initially prescribing or personally dispensing a controlled substance to a patient. If the patient's course of treatment continues for more than ninety (90) days after the date of the initial prescription, the prescriber or prescriber's designee shall make periodic requests for prescription monitoring program information, no less frequently than [once every 3/6/9 months or annually] until the course of treatment has ended.

This requirement shall not apply if one of the following conditions is met:

- (a) The controlled substance is prescribed or dispensed to a patient currently receiving hospice care.

© 2015. Please contact Sarah Kelsey at (703) 836-6100, ext. 119 or skelsey@namsdl.org or Heather Gray at (703) 836-6100, ext. 114 or hgray@namsdl.org with any questions regarding or information that may be relevant to this document. This document is intended for educational purposes only and does not constitute legal advice or opinion. Headquarters Office: THE NATIONAL ALLIANCE FOR MODEL STATE DRUG LAWS, 420 Park Street, Charlottesville, VA 22902.

- (b) The controlled substance is prescribed or dispensed to a patient as part of a treatment for a surgical procedure that has or will occur in a licensed health care facility and such prescription is non-refillable.
- (c) The quantity of the controlled substance prescribed or dispensed does not exceed an amount which is adequate for a single seven-day treatment period and does not allow a refill and no subsequent prescriptions are written or dispensed within a fifteen (15) day time period.
- (d) The controlled substance is directly administered to the patient by the prescriber or other person authorized to administer a controlled substance.
- (e) If it is not possible to query the prescription monitoring program in a timely manner due to an emergency situation.
- (f) The program is not operational due to temporary technological or electrical failure or natural disaster.

SECTION 12. IMMUNITY.

(a) Except as indicated in (b), and unless there is a finding of [insert appropriate state standard, e.g., lack of good faith, gross negligence, malice, or criminal intent], the [designated state agency or entity], a prescriber, dispenser, or other person, agency, or entity in proper possession of information pursuant to this Act is not subject to civil liability, administrative action, or other legal or equitable relief for any of the following acts or omissions:

- (i) reporting information to the PMP pursuant to this Act;
- (ii) accessing, using, or relying on information pursuant to this Act;
- (iii) not possessing information that was not furnished to the [designated state agency or entity];
- (iv) releasing information that was factually incorrect;
- (v) releasing information to the wrong person or entity;
- (vi) not referring prescription monitoring information or prescribers or dispensers pursuant to this Act; or
- (vii) failing to purge information from the PMP pursuant to this Act.

(b) If there is a finding of reckless disregard of the requirement in Section 8(b), the [designated state agency or entity] may be subject to civil liability, administrative action, or other legal or equitable relief for the acts or omissions listed in (a).

SECTION 13. UNLAWFUL ACTS AND PENALTIES.

(a) Administrative Sanctions.

- (i) A dispenser who knowingly fails to submit prescription monitoring information to the [designated state agency or entity] as required by this Act, or who knowingly submits false information, shall be referred to the appropriate professional licensing or certification agency or board for administrative sanctions as deemed appropriate by that agency or board.



State of Wisconsin
2015 - 2016 LEGISLATURE

LRBa0864

MPG: *abe*

PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION
ASSEMBLY AMENDMENT ,
TO ASSEMBLY BILL 364

1/91

1 At the locations indicated, amend the bill as follows:

2 **1.** Page 5, line 2: delete "or".

3 **2.** Page 5, line 2: delete "(b)" and substitute "(b), or individual authorized
4 under s. 457.02 (5m) to treat alcohol or substance dependency or abuse as a
5 specialty".

6 **3.** Page 5, lines 4, 6 and 14: delete "or substance abuse counselor" and
7 substitute "substance abuse counselor, or individual".

8 **4.** Page 5, line 12: delete "or substance abuse counselor" and substitute
9 "substance abuse counselor, or individual authorized under s. 457.02 (5m) to treat
10 alcohol or substance dependency or abuse as a specialty".

11 **5.** Page 5, line 17: delete "or".

1 6. Page 5, lines 18: delete “counselor” and substitute “counselor, or individual”.

2 7. Page 6, line 8: after “(cs)” insert “1.”.

3 8. Page 6, line 9: after “patient.” insert “This subdivision does not apply after
4 3 years after the effective date of this subdivision ... [LRB inserts date].”.

5 9. Page 6, line 9: after that line insert:

6 2. The requirement under subd. 1. that a practitioner review a patient’s records
7 under the program before the practitioner issues a prescription order for the patient
8 does not apply if any of the following is true:

9 a. The patient is receiving hospice care, as defined in s. 50.49(1) (a).

10 b. The prescription order is for a number of doses that is intended to last the
11 patient 3 days or less and is not subject to refill. The exception under this
12 subparagraph does not apply if the practitioner issues another prescription order for
13 the same monitored prescription drug for the patient within 15 days after the date
14 the monitored prescription drug is dispensed under the initial prescription order.

15 c. The monitored prescription drug is lawfully administered to the patient.

16 d. Due to emergency, it is not possible for the practitioner to review the patient’s
17 records under the program before the practitioner issues a prescription order for the
18 patient.

19 e. The practitioner is unable to review the patient’s records under the program
20 because the board’s digital platform for the program is not operational.”.

21 10. Page 7, line 7: delete that line and substitute:

22 “SECTION 18s. Effective dates. This act takes effect on April 1, 2017, except
23 as follows:



PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION
ASSEMBLY AMENDMENT ,
TO ASSEMBLY BILL 364

Inseft

1/22

Inseft (-)

1 At the locations indicated, amend the bill as follows:

2 1. Page 5, line 2: delete "or".

3 2. Page 5, line 2: delete "(b)" and substitute "(b), or individual authorized
4 under s. 457.02 (5m) to treat alcohol or substance dependency or abuse as a
5 specialty".

6 3. Page 5, lines 4, 6 and 14, delete "or substance abuse counselor" and
7 substitute "substance abuse counselor, or individual".

8 4. Page 5, line 12: delete "or substance abuse counselor" and substitute
9 "substance abuse counselor, or individual authorized under s. 457.02 (5m) to treat
10 alcohol or substance dependency or abuse as a specialty".

11 5. Page 5, line 17: delete "or".

1 **6.** Page 5, line 18: delete "counselor" and substitute "counselor, or individual".

2 **7.** Page 6, line 8: after "(cs)" insert "1."

3 **8.** Page 6, line 9: after "patient." insert "This subdivision does not apply after
4 3 years after the effective date of this subdivision [LRB inserts date]."

5 **9.** Page 6, line 9: after that line insert:

6 "2. The requirement under subd. 1. that a practitioner review a patient's
7 records under the program before the practitioner issues a prescription order for the
8 patient does not apply if any of the following is true:

9 a. The patient is receiving hospice care, as defined in s. 50.94 (1) (a).

10 b. The prescription order is for a number of doses that is intended to last the
11 patient 3 days or less and is not subject to refill. The exception under this subd. 2.

12 b. does not apply if the practitioner issues another prescription order for the same
13 monitored prescription drug for the patient within 15 days after the date the
14 monitored prescription drug is dispensed under the initial prescription order.

15 c. The monitored prescription drug is lawfully administered to the patient.

16 d. Due to emergency, it is not possible for the practitioner to review the patient's
17 records under the program before the practitioner issues a prescription order for the
18 patient.

19 e. The practitioner is unable to review the patient's records under the program
20 because the board's digital platform for the program is not operational⁵."

21 **10.** Page 7, line ⁵ delete ⁶ that line and substitute:

22 **SECTION 18s. Effective dates.** This act takes effect on April 1, 2017, except

23 as follows:

Insert 2-23

Insert 2-23

or due to other technological failure if the practitioner reports that failure to the board

①

③

(1) EMERGENCY RULES. SECTION 17 of this act takes effect on the day after
publication.”

(1)

2

3

(END)

2015-2016 DRAFTING INSERT
FROM THE
LEGISLATIVE REFERENCE BUREAU

LRBa0864/P2ins
MPG:ahc

INSERT 1-1

1 1. Page 3, line 22: after that line insert:

2 "SECTION 7m. 961.385 (1) (b) of the statutes, as ^{created} affected by 2015 Wisconsin Act
3 55, is amended to read:

4 961.385 (1) (b) "Prescription order" means an order transmitted orally,
5 electronically, or in writing by a practitioner or a veterinarian licensed under ch. 89
6 for a monitored prescription drug for a particular patient."

END INSERT 1-1

INSERT 2-21

7 "SECTION 18g. Nonstatutory provisions."

8 (2) (1) NOTICE TO LEGISLATIVE REFERENCE BUREAU. The secretary of safety and
9 professional services, in consultation with the controlled substances board, shall
10 determine the date the prescription drug monitoring program under section 961.385
11 of the statutes, as affected by this act, becomes operational for purposes of the
12 requirement to review patient records under section 961.385 (2) (cs) of the statutes,
13 as created by this act. Upon making that determination, the secretary of safety and
14 professional services shall provide a notice to the legislative reference bureau stating
15 that determination, and the legislative reference bureau shall promptly publish the
16 notice in the Wisconsin Administrative Register.

END INSERT 2-21

INSERT 2-23

change text: ns: eff date
17 component: (1) REQUIREMENT TO REVIEW PATIENT RECORDS. The creation of section 961.385
18 (2) (cs) of the statutes takes effect on the 30th day after the date of publication in the

1 Wisconsin Administrative Register of the notice under SECTION 18g (1) of this act, or
2 on April 1, 2017, whichever is later.

3 →(2) NOTICE TO LEGISLATIVE REFERENCE BUREAU. SECTION 18g (1) of this act takes
4 effect on the day after publication.

17 (dg)
6

17 (dg)

END INSERT 2-23

change component to
text + NS: eff date

Duchek, Michael

From: Malcore, Jennifer
Sent: Tuesday, October 20, 2015 12:58 PM
To: Gallagher, Michael
Cc: Duchek, Michael
Subject: FW: PDMP Amendment
Attachments: c_PDMP language.docx

Suggested clearer language to Jenny. Jenny says looks OK. -MED

Mike or Mike,

Can you add the language below to page 3, starting at line 8?

After that, I think we can be done with this amendment and you can send it to us and the Health Committee.

Thank you both for your hard work.

Jenny

From: O'Brien, Kyle [mailto:kobrien@wha.org]
Sent: Tuesday, October 20, 2015 11:57 AM
To: Malcore, Jennifer <Jennifer.Malcore@legis.wisconsin.gov>
Subject: RE: PDMP Amendment

Jenny – thanks for giving us the opportunity to review this. Here is the only recommendation that we have. I've attached in a Word Document, as well, with changes tracked.

“(2g) Notice to Legislative Reference Bureau. The secretary of safety and professional services, in consultation with the controlled substances board, shall determine the date the prescription drug monitoring program under section 961.385 of the statutes, as affected by this act, becomes operational and can transmit to prescriber electronic health records that meet standards determined by the secretary the for the purposes of the requirement to review patient records required to be reviewed under section 961.385 (2) (cs) of the statutes, as created by this act. Upon making that determination, the secretary of safety and professional services shall provide a notice to the legislative reference bureau stating that determination, and the legislative reference bureau shall promptly publish the notice in the Wisconsin Administrative Register.

From: Malcore, Jennifer [mailto:Jennifer.Malcore@legis.wisconsin.gov]
Sent: Tuesday, October 20, 2015 9:40 AM
To: Grapentine, Mark <mark.grapentine@wismed.org>; O'Brien, Kyle <kobrien@wha.org>
Subject: PDMP Amendment

Gentlemen,

Please look this over to let me know if this ok?

Jennifer Malcore

Office of State Representative John Nygren
Co-Chair, Joint Committee on Finance
89th Assembly District
309 East, State Capitol

608.267.2371



State of Wisconsin
2015 - 2016 LEGISLATURE

In 10-20
TONIGHT

LRBa0864(P2)

MPG:ahc

twj

PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION
ASSEMBLY AMENDMENT ,
TO ASSEMBLY BILL 364

Insert

11

- 1 At the locations indicated, amend the bill as follows:
- 2 **1.** Page 3, line 22: after that line insert:
- 3 **"SECTION 7m.** 961.385 (1) (b) of the statutes, as created by 2015 Wisconsin Act
- 4 55, is amended to read:
- 5 961.385 (1) (b) "Prescription order" means an order transmitted orally,
- 6 electronically, or in writing by a practitioner or a veterinarian licensed under ch. 89
- 7 for a monitored prescription drug for a particular patient."
- 8 **2.** Page 5, line 2: delete "or".
- 9 **3.** Page 5, line 2: delete "(b)" and substitute "(b), or individual authorized
- 10 under s. 457.02 (5m) to treat alcohol or substance dependency or abuse as a
- 11 specialty".

1 **4.** Page 5, line 4: on lines 4, 6 and 14, delete “or substance abuse counselor”
2 and substitute “substance abuse counselor, or individual”.

3 **5.** Page 5, line 12: delete “or substance abuse counselor” and substitute
4 “substance abuse counselor, or individual authorized under s. 457.02 (5m) to treat
5 alcohol or substance dependency or abuse as a specialty”.

6 **6.** Page 5, line 17: delete “or”.

7 **7.** Page 5, line 18: delete “counselor” and substitute “counselor, or individual”.

8 **8.** Page 6, line 8: after “(cs)” insert “1.”.

9 **9.** Page 6, line 9: after “patient.” insert “This subdivision does not apply after
10 3 years after the effective date of this subdivision ... [LRB inserts date].”.

11 **10.** Page 6, line 9: after that line insert:

12 “2. The requirement under subd. 1. that a practitioner review a patient’s
13 records under the program before the practitioner issues a prescription order for the
14 patient does not apply if any of the following is true:

15 a. The patient is receiving hospice care, as defined in s. 50.94 (1) (a).

16 b. The prescription order is for a number of doses that is intended to last the
17 patient 3 days or less and is not subject to refill. ~~The exception under this subd. 2.~~

18 ~~b. does not apply if the practitioner issues another prescription order for the same~~
19 ~~monitored prescription drug for the patient within 15 days after the date the~~
20 ~~monitored prescription drug is dispensed under the initial prescription order.~~

21 c. The monitored prescription drug is lawfully administered to the patient.

1 d. Due to emergency, it is not possible for the practitioner to review the patient's
2 records under the program before the practitioner issues a prescription order for the
3 patient.

4 e. The practitioner is unable to review the patient's records under the program
5 because the digital platform for the program is not operational or due to other
6 technological failure if the practitioner reports that failure to the board.”

7 **11.** Page 7, line 6: delete lines 6 and 7 and substitute:

8 “(2g) NOTICE TO LEGISLATIVE REFERENCE BUREAU. Ins 3-8 The secretary of safety and
9 professional services, in consultation with the controlled substances board, shall
10 determine the date the prescription drug monitoring program under section 961.385
11 of the statutes, as affected by this act, becomes operational for purposes of the
12 requirement to review patient records under section 961.385 (2) (cs) of the statutes,
13 as created by this act. Upon making that determination, the secretary of safety and
14 professional services shall provide a notice to the legislative reference bureau stating
15 that determination, and the legislative reference bureau shall promptly publish the
16 notice in the Wisconsin Administrative Register.

17 **SECTION 18s. Effective dates.** This act takes effect on April 1, 2017, except
18 as follows:

19 (1) REQUIREMENT TO REVIEW PATIENT RECORDS. The creation of section 961.385
20 (2) (cs) of the statutes takes effect on the 30th day after the date of publication in the
21 Wisconsin Administrative Register of the notice under SECTION 17 (2g) of this act, or
22 on April 1, 2017, whichever is later.

23 (2) NOTICE TO LEGISLATIVE REFERENCE BUREAU. SECTION 17 (2g) of this act takes
24 effect on the day after publication.

2015-2016 DRAFTING INSERT
FROM THE
LEGISLATIVE REFERENCE BUREAU

LRBa0864/lins
MED:...

INSERT 3-8

1 For purposes of the requirement to review patient records under section
2 961.385 (2) (cs) ~~as~~ ^{of the statutes} as created by this act, the secretary of safety and professional
3 services, in consultation with the controlled substances board, shall determine the
4 date the prescription drug monitoring program under section 961.385 of the statutes,
5 as affected by this act, will be operational and capable of electronically transmitting
6 such records to a practitioner in accordance with standards determined by the
7 secretary.