Seventy-Eighth Oregon Legislative Assembly - 2015 Regular Session MEASURE: SB 71 A

STAFF MEASURE SUMMARY CARRIER: Sen. Monnes Anderson

Senate Committee On Health Care

Fiscal: Has minimal fiscal impact Revenue: No Revenue Impact

Action Date: 04/06/15

Action: Do Pass With Amendments. (Printed A-Eng.)

Meeting Dates: 02/16, 04/06

Vote:

Yeas: 4 - Knopp, Monnes Anderson, Shields, Steiner Hayward

Exc: 1 - Kruse

Prepared By: Zena Rockowitz, Committee Administrator

WHAT THE MEASURE DOES:

Eliminates requirement under the Prescription Drug Monitoring Program that pharmacies must report to Oregon Health Authority (OHA) no later than one week after dispensing a prescription drug. Directs pharmacies to report to OHA no later than 72 hours after dispensing drug.

ISSUES DISCUSSED:

- Feasibility of real-time reporting
- Technology and administrative costs
- Patient pick-up date versus dispense date
- Community and independent pharmacies

EFFECT OF COMMITTEE AMENDMENT:

Requires pharmacies to report to the Oregon Health Authority (OHA) no later than 72 hours after dispensing prescription drug. Removes authority of OHA to make rules for adopting time frame. Removes emergency clause.

BACKGROUND:

The Prescription Drug Monitoring Program (PDMP) was established in 2009 by Senate Bill 355 to help better manage prescriptions. The PDMP is a web-based system for Oregon's licensed retail pharmacies to submit data on prescriptions for all Schedule II, III, and IV controlled substances. These are drugs designated by the federal government to have low to high potential for abuse and psychological or physical dependence. This includes drugs such as morphine, oxycodone and methadone. In 2013, 156 Oregonians died due to prescription opioid poisoning and 1,510 were hospitalized due to unintentional or undetermined drug poisoning.

Under the PDMP, prescribers have no later than one week to submit information after dispensing the drug (ORS 431.964). Authorized practitioners and pharmacists can request reports on their patients to determine information on the dispenser, prescriber, name and quantity of drug. Law enforcement and licensing boards may also request information. Senate Bill 470 was passed in 2013, which included authorization for the PDMP to collect additional data on patient sex and refills, allowed access to prescribers in neighboring states who treat Oregonians and allowed public health authorities to use unidentified PDMP data. In 2014, the PDMP reports that there were 350,200 queries by health care providers and 356,598 by pharmacists.

Program Design and Evaluation Services, in 2012, and Acumentra Health and Oregon Health and Science University, in 2013, conducted surveys on registered and non-registered PDMP users. The Oregon Health Authority

reports frequent barriers identified in those surveys, including time constraints in the clinical practice setting, office staff inability to access the system and out-of-date information.						