HOUSE AMENDMENTS TO HOUSE BILL 2518

By COMMITTEE ON HEALTH CARE

April 21

On page 2 of the printed bill, line 11, delete "in this state" and insert "licensed by the State Board of Pharmacy".

In line 13, delete "State Board of Pharmacy" and insert "board".

On page 3, line 4, restore "and" and delete the fourth comma and delete "and last four digits of the".

In line 5, delete "Social Security number".

In line 20, delete "complete".

On page 4, delete lines 32 through 37 and insert:

"(C) In accordance with subparagraphs (A) and (B) of this paragraph, to an individual described in subparagraphs (A) and (B) of this paragraph through a health information technology system that is used by the individual to access information about patients if:

"(i) The individual is authorized to access the information in the health information technology system;".

On page 5, line 15, delete "8" and insert "12".

In line 33, after the period insert "If a request to correct information cannot be granted because the error occurred at the pharmacy where the information was inputted, the authority shall inform the patient that the information cannot be corrected because the error occurred at the pharmacy.".

On page 6, line 15, after "program" insert "of the disclosure".

On page 7, delete lines 8 through 11.

In line 12, delete "(c)" and insert "(b)".

In line 24, delete "Section 8 of this 2017 Act is" and insert "Sections 8 to 12 of this 2017 Act are".

Delete lines 26 through 41 and insert:

"**SECTION 8. (1) The Oregon Health Authority may require a person requesting prescription monitoring program information under ORS 431A.865 (2)(b) to enter into a data use agreement under which the person:**

"(a) Describes the proposed use for the information;

"(b) Agrees to any terms and conditions imposed on transferring the information;

"(c) Agrees to any limitations imposed on using the information;

"(d) Agrees to any terms and conditions imposed on keeping the information; and

"(e) Agrees to destroy the information after completing the proposed use for the information.

"(2) In determining whether to enter into an agreement under this section, the authority shall:

"(a) Evaluate the merits of the request for information;

"(b) Determine whether the person making the request has the technical competence needed to meet any terms, conditions or limitations imposed under subsection (1) of this section and the ability to complete the proposed use for the information;

"(c) If the proposed use for the information involves research, ensure that the proposed use has been approved by any involved institutional review board; and

"(d) Consider any other factor that the authority determines is relevant.

"(3) Using the factors described in subsection (2) of this section, the authority shall evaluate any agreement entered into under this section at least once per year for the purpose of determining whether to renew the agreement.

"**SECTION 9.** **(1) Not less than once per year, the Oregon Health Authority, in consultation with the Prescription Monitoring Program Advisory Commission created under ORS 431A.890 and the Prescription Monitoring Program Prescribing Practices Review Subcommittee established under section 10 of this 2017 Act, shall develop, through the use of prescription monitoring information, criteria by which a practitioner may be required to receive education or training on the prescribing of opioids or opiates.**

"(2) Criteria developed under subsection (1) of this section must include:

"(a) Prescribing a high volume of opioids or opiates classified in schedules II and III;

"(b) Prescribing an above-average amount of doses of opioids or opiates classified in schedules II and III to a high number of patients; and

"(c) Simultaneously prescribing opioids or opiates classified in schedules II and III with other drugs classified in schedules II and III.

"(3) In developing the criteria developed under subsection (1) of this section, the authority must take into consideration the total quantity and volume of opioids and opiates classified in schedules II and III prescribed by each practitioner.

"(4) The subcommittee may review, through the use of prescription monitoring information that does not identify a patient, a practitioner's prescribing history for the three years immediately preceding the date of the review to determine whether a practitioner meets the criteria developed under subsection (1) of this section.

"(5) After performing the review described in subsection (4) of this section, the subcommittee may direct the authority to provide to a practitioner who meets the criteria developed under subsection (1) of this section educational information about prescribing opioids and opiates, as determined appropriate by the authority.

"(6) Prescription monitoring information used for purposes of this section and the data created through the use of prescription monitoring information pursuant to this section:

"(a) Are confidential and not subject to public disclosure under ORS 192.410 to 192.505; and

"(b) Are not admissible as evidence in a civil or criminal proceeding.

"**SECTION 10.** **(1) The Prescription Monitoring Program Prescribing Practices Review Subcommittee is established as a subcommittee of the Prescription Monitoring Program Advisory Commission created under ORS 431A.890, for the purpose of advising the Oregon Health Authority and the commission on interpreting prescription information, understanding the clinical aspects of prescribing practices and evaluating prescribing practices.**

"(2)(a) The authority shall appoint the number of members to the subcommittee that the authority determines is necessary to fulfill the functions of the subcommittee.

"(b) Members of the subcommittee must be practitioners who:

"(A) Hold a valid license issued in this state or a valid emeritus license issued in this state;

"(B) Are registered with the federal Drug Enforcement Administration to prescribe drugs classified in schedules II through IV; and

"(C) Have at least five years of experience prescribing drugs classified in schedules II through IV.

"(c) To the extent feasible, the authority shall appoint one member to the subcommittee for each type of practitioner in this state that prescribes drugs classified in schedules II through IV.

"**SECTION 11. The Oregon Health Authority shall coordinate with health professional regulatory boards to make resources available to practitioners regarding the best methods to change prescribing practices with respect to opioids and opiates and to incorporate alternative pain management options into prescribing practices.**

"**SECTION 12. The Oregon Health Authority may enter into agreements governing the sharing and use of information described in ORS 431A.860 (1) with the authorities of other states that administer prescription monitoring programs. An agreement entered into under this section must adhere to the disclosure limitations listed under ORS 431A.865 (2). An agreement entered into under this section may:**

"(1) Provide for the transmission of information between electronic systems, provided that any electronic system to which the Oregon Health Authority transmits information meets the confidentiality, security and privacy standards adopted by the authority under ORS 431A.855; or

"(2) Provide for the transmission of information to practitioners or pharmacists licensed to practice in another state.".

In line 42, delete "9" and insert "13".

In line 44, delete "10" and insert "15".

After line 44, insert:

"**SECTION 14. Notwithstanding the operative date specified in section 15 of this 2017 Act, a pharmacy is not required to electronically report the phone number of the patient for whom a prescription drug was prescribed or the payment method used to pay for a prescription drug, as described in ORS 431A.860 (1), for prescription drugs dispensed before July 1, 2018.**".

In line 45, delete "10" and insert "15" and delete "Section 8" and insert "Sections 8 to 12".

On page 8, line 7, delete "section 8" and insert "sections 8 to 12".

In line 9, delete "11" and insert "16".
