

# Alaska State Legislature

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## **REPRESENTATIVE PAUL SEATON** Rep.Paul.Seaton@akleg.gov

### **House Bill 344**

#### **Sectional- Version N**

*Sections 1-12 will repeat the same language for the Board of Dental Examiners, the State Medical Board, the Board of Nursing, the Board of Optometry, and the Veterinary Board.*

#### **Section 1**

AS 08.36.315 is amended to state that dispensing an opiate in excess of the maximum dosage is grounds for disciplinary actions under the Board of Dental Examiners. Procuring, selling, prescribing, or dispensing drugs in violation of a law is also grounds for disciplinary action regardless of criminal action.

#### **Section 2**

This creates a new section 08.36.355 that limits initial prescriptions for an opiate to 7 days for an adult; any prescription of an opiate to a minor is limited to 7 days. Licensee may write prescription exceeding the 7 day limit if the patient's medical condition calls for a larger prescription, or for patients who is unable to access a practitioner within the time necessary for a refill of the 7 day supply.

#### **Section 3**

Defines opiate in AS 11.71.900.

#### **Section 4**

AS 08.64.326(a) is amended to state that dispensing an opiate in excess of the maximum dosage is grounds for disciplinary actions under the State Medical Board.

#### **Section 5**

This creates a new section 08.64.363 that limits initial prescriptions for an opiate to 7 days for an adult; any prescription of an opiate to a minor is limited to 7 days. Licensee may write prescription exceeding the 7 day limit if the patient's medical condition calls for a larger prescription, or for patients who is unable to access a practitioner within the time necessary for a refill of the 7 day supply.

#### **Section 6**

Defines opiate in AS 11.71.900.

#### **Section 7**

AS 08.68.270 is amended to state that dispensing an opiate in excess of the maximum dosage is grounds for disciplinary actions under the Board of Nursing. Procuring, selling, prescribing, or dispensing drugs in violation of a law is also grounds for disciplinary action regardless of criminal action.

## **Section 8**

This creates a new section 08.68.705 that limits initial prescriptions for an opiate to 7 days for an adult; any prescription of an opiate to a minor is limited to 7 days. Licensee may write prescription exceeding the 7 day limit if the patient's medical condition calls for a larger prescription, or for patients who is unable to access a practitioner within the time necessary for a refill of the 7 day supply.

## **Section 9**

Defines opiate in AS 11.71.900.

## **Section 10**

AS 08.72.240 is amended to state that dispensing an opiate in excess of the maximum dosage is grounds for disciplinary actions under the Board of Examiners in Optometry. Procuring, selling, prescribing, or dispensing drugs in violation of a law is also grounds for disciplinary action regardless of criminal action.

## **Section 11**

This creates a new section 08.72.277 that limits initial prescriptions for an opiate to 7 days for an adult; any prescription of an opiate to a minor is limited to 7 days. Licensee may write prescription exceeding the 7 day limit if the patient's medical condition calls for a larger prescription, or for patients who is unable to access a practitioner within the time necessary for a refill of the 7 day supply.

## **Section 12**

Defines opiate in AS 11.71.900.

## **Section 13**

Procuring, selling, prescribing, or dispensing drugs in violation of a law is also grounds for disciplinary action regardless of criminal action.

## **Section 14**

The purpose of the controlled substance prescription database is amended to only contain prescription information for schedule II, II, or IV controlled substances under federal law.

## **Section 15**

This section allows pharmacists or providers to delegate the task of submitting schedule II, III, or IV controlled substance prescription information to the database to an authorized employee or agent; according to AS 17.30.200(r) of this bill this may only be delegated to an employee who is licensed or registered with the state. This section also requires that pharmacists submit data at least weekly. Language directing the department to assist the board of pharmacy has been moved to another section of statute.

## **Section 16**

This section requires that the information in the database remain confidential and describes who is permitted to access the database. Under this bill, a licensed or registered practitioner or pharmacist may

delegate access to an authorized agent or employee; according to AS 17.30.200(r) of this bill this may only be delegated to an employee who is licensed or registered with the state.

Access is also granted to the lead Medicaid pharmacist and the Medicaid Utilization review committee to review drug utilization in the Medicaid program. It is also granted to the State Medical Examiner for investigation into cause of death. Finally, this section allows that authorized employees of Health and Social Services may receive de-identified information from the database for public health.

## **Section 17**

AS 17.30.200 (e) is amended to state that the failure of the pharmacists or providers to *register* or submit information to the database is grounds for the board to take disciplinary action.

## **Section 18**

Deletes language stating that dispensers or practitioners are not obligated to check the database prior to dispensing, to conform to the requirement on dispensers in section 19.

## **Section 19**

This section requires that a pharmacist or practitioner shall *review* the information from the database prior to prescribing, dispensing, or administering a controlled substance to a patient. Subsection 4 creates exemptions to this requirement for inpatient settings, in an emergency situation, or immediately before, during, or after a surgery or a medical procedure. Subsection 5 directs the board of pharmacy to create an alternative procedure to allow practitioners with a technological or infrastructure barrier to comply with these requirements.

## **Section 20**

This section adds new subsections that include in subsection (o) an automatic electronic alert system when someone has prescriptions inconsistent with general standards. Subsection (p) requires all healthcare providers who prescribe, dispense, or administer a controlled substance to register with the prescription drug database.

Subsection (q) states that a pharmacist or practitioner may only delegate access to the database to licensed or registered employee or agent.

Subsection (r) directs the Department of Commerce, Community, and Economic Development to assist the board in implementing this section and to promptly notify all appropriate boards when a licensee registers with the database. The department is further directed to establish fees for registration with the database to cover the operational costs of the database minus all available federal funds.

## **Section 21**

This section allows the Department of Commerce and all boards with practitioners who will register with the database to adopt the regulations necessary to implement this act.

## **Section 22**

This section creates transition language directing the board of pharmacy to provide information and training to other boards on how to register and comply with database.

## **Section 23**

This section creates an effective date of September 1, 2016 for AS 17.30.200(r), establishing fees for registration.

**Section 24**

The regulatory authority under sections 21 and 22 takes effect immediately.

**Section 25**

Except in sections 23 and 24, the changes created by this act take effect July 1, 2017.