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State of Minnesota
HOUSE OF REPRESENTATIVES

EIGHTY-NINTH SESSION

H. F. No. 1476

03/05/2015 Authored by Persell, Loeffler, Baker, Liebling, Schoen and others
The bill was read for the first time and referred to the Committee on Health and Human Services Reform

1.1 A bill for an act
1.2 relating to health; requiring reports on medications used for the treatment
1.3 of opioid addiction; amending Minnesota Statutes 2014, sections 152.126,
1.4 subdivisions 1, 4; 245A.192, subdivision 9.

1.5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.6 Section 1. Minnesota Statutes 2014, section 152.126, subdivision 1, is amended to read:

1.7 Subdivision 1. **Definitions.** (a) For purposes of this section, the terms defined in
1.8 this subdivision have the meanings given.

1.9 (b) "Board" means the Minnesota State Board of Pharmacy established under
1.10 chapter 151.

1.11 (c) "Controlled substances" means those substances listed in section 152.02,
1.12 subdivisions 3 to 6, and those substances defined by the board pursuant to section 152.02,
1.13 subdivisions 7, 8, and 12. For the purposes of this section, controlled substances includes
1.14 tramadol and butalbital.

1.15 (d) "Dispense" or "dispensing" has the meaning given in section 151.01, subdivision
1.16 30. Dispensing does not include the direct administering of a controlled substance to a
1.17 patient by a licensed health care professional, but does include the direct administering of
1.18 any medication used for treatment of opioid addiction to a patient at an opioid treatment
1.19 center.

1.20 (e) "Dispenser" means a person authorized by law to dispense a controlled substance,
1.21 pursuant to a valid prescription. For the purposes of this section, a dispenser does not
1.22 include a licensed hospital pharmacy that distributes controlled substances for inpatient
1.23 hospital care or a veterinarian who is dispensing prescriptions under section 156.18.

2.1 (f) "Prescriber" means a licensed health care professional who is authorized to
2.2 prescribe a controlled substance under section 152.12, subdivision 1 or 2.

2.3 (g) "Prescription" has the meaning given in section 151.01, subdivision 16.

2.4 Sec. 2. Minnesota Statutes 2014, section 152.126, subdivision 4, is amended to read:

2.5 Subd. 4. **Reporting requirements; notice.** (a) Each dispenser must submit the
2.6 following data to the board or its designated vendor:

2.7 (1) name of the prescriber;

2.8 (2) national provider identifier of the prescriber;

2.9 (3) name of the dispenser;

2.10 (4) national provider identifier of the dispenser;

2.11 (5) prescription number;

2.12 (6) name of the patient for whom the prescription was written;

2.13 (7) address of the patient for whom the prescription was written;

2.14 (8) date of birth of the patient for whom the prescription was written;

2.15 (9) date the prescription was written;

2.16 (10) date the prescription was filled;

2.17 (11) name and strength of the controlled substance;

2.18 (12) quantity of controlled substance prescribed;

2.19 (13) quantity of controlled substance dispensed; and

2.20 (14) number of days supply.

2.21 (b) The dispenser must submit the required information by a procedure and in a
2.22 format established by the board. The board may allow dispensers to omit data listed in this
2.23 subdivision or may require the submission of data not listed in this subdivision provided
2.24 the omission or submission is necessary for the purpose of complying with the electronic
2.25 reporting or data transmission standards of the American Society for Automation in
2.26 Pharmacy, the National Council on Prescription Drug Programs, or other relevant national
2.27 standard-setting body.

2.28 (c) A dispenser is not required to submit this data for those controlled substance
2.29 prescriptions dispensed for:

2.30 (1) individuals residing in a health care facility as defined in section 151.58,
2.31 subdivision 2, paragraph (b), when a drug is distributed through the use of an automated
2.32 drug distribution system according to section 151.58; and

2.33 (2) individuals receiving a drug sample that was packaged by a manufacturer and
2.34 provided to the dispenser for dispensing as a professional sample pursuant to Code of
2.35 Federal Regulations, title 21, part 203, subpart D.

3.1 (d) A dispenser must provide to the patient for whom the prescription was written
3.2 a conspicuous notice of the reporting requirements of this section and notice that the
3.3 information may be used for program administration purposes.

3.4 (e) A dispenser of any medication used for treatment of opioid addiction must
3.5 submit all data required by paragraph (a).

3.6 Sec. 3. Minnesota Statutes 2014, section 245A.192, subdivision 9, is amended to read:

3.7 Subd. 9. **Data and reporting.** (a) The license holder must submit data concerning
3.8 medication used for the treatment of opioid addiction to a central registry. The data must
3.9 include the name of each prescriber, the name and strength of the medication prescribed,
3.10 the quantity of the medication prescribed, and the quantity of the medication dispensed.
3.11 The data must be submitted in a method determined by the commissioner and must be
3.12 submitted for each client at the time of admission and discharge. The program must
3.13 document the date the information was submitted. This requirement is effective upon
3.14 implementation of changes to the Drug and Alcohol Abuse Normative Evaluation System
3.15 (DAANES) or development of an electronic system by which to submit the data.

3.16 (b) The license holder must ensure that data is submitted to the Prescription
3.17 Monitoring Program as required in section 152.126, subdivision 4.