L.D. 1619

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HEALTH AND HUMAN SERVICES

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STATE OF MAINE

HOUSE OF REPRESENTATIVES

128TH LEGISLATURE

FIRST REGULAR SESSION

COMMITTEE AMENDMENT " " to H.P. 1118, L.D. 1619, Bill, "An Act To Report Limited Information to the Controlled Substances Prescription Monitoring Program Concerning Methadone"

Amend the bill in section 2 in §7249-A by striking out all of subsections 1 and 2 (page 1, lines 13 to 26 in L.D.) and inserting the following:

'**1. Consent form; methadone treatment.** The department shall develop a consent form to be presented to every patient receiving treatment at any facility that provides methadone for the treatment of opioid dependency. The form records the patient's identifying information along with consent to enter the name of the patient's methadone treatment facility and dosage information into the program. The form must be available to the facility for use in paper or electronic form. The contents of the form may be disclosed only in a medical emergency as described in section 7250, subsection 7. The patient may decline consent.

2. Treatment facility to enter information into the program. For a patient who has provided consent pursuant to subsection 1, a prescriber or the prescriber's designee at a facility that provides methadone for the treatment of opioid dependency shall enter the patient's identifying information along with the name of the methadone treatment facility and the dosage information into the program. Dosage information must be entered at the beginning of treatment, after the first 90 days of treatment and every 180 days after that. If a patient ceases treatment or moves to a different facility, the patient's methadone treatment facility must notify the program within 30 days of that change in status.'

Amend the bill in section 3 in subsection 7 in the first paragraph in the 2nd to last line (page 2, line 1 in L.D.) by inserting after the following: "subject to" the following: '42 Code of Federal Regulations, Section 2.32 and'

Amend the bill by striking out all of section 4 and inserting the following:

'**Sec. 4. Enhancement of the Controlled Substances Prescription Monitoring Program.** The Department of Health and Human Services shall submit a contract amendment to provide for an enhancement of the Controlled Substances

Prescription Monitoring Program under Title 22, chapter 1603. This enhancement must allow a facility that provides methadone for the treatment of opioid dependency to enter the name of the methadone treatment facility treating a patient and the dosage information for a patient who has given consent. The information may not be accessible except to health care professionals during an emergency to the extent necessary to meet a bona fide emergency in which the patient's prior informed consent cannot be obtained. Any disclosure in an emergency setting must be entered into the program, including the date and time of the disclosure, the nature of the patient's emergency, the name of the facility or hospital where the disclosure occurred and the names of the health care professionals who accessed the records in the program. The department shall convene stakeholders to advise the department on the criteria for the enhancement of the program. Stakeholders must include representatives from methadone treatment clinics and providers of emergency services. The enhancement of the program must meet the requirements of the Maine Revised Statutes, Title 22, section 7250, subsection 7. The department shall, no later than January 30, 2018, provide a report to the Joint Standing Committee on Health and Human Services describing progress on implementing the enhancement required pursuant to this section.'

SUMMARY

This amendment makes the following changes to the bill:

1. It clarifies that the consent form in the bill is presented to every patient at a methadone treatment facility rather than only to new patients.

2. It requires the Department of Health and Human Services to develop the consent form in both paper or electronic form.

3. It changes the frequency of a patient's dosage information entered into the Controlled Substances Prescription Monitoring Program from every 90 days to the day treatment begins, 90 days later and every 180 days after that.

4. It allows a prescriber or the prescriber's designee to enter a patient's identifying information into the Controlled Substances Prescription Monitoring Program.

5. It provides that disclosure of a patient's identifying information is subject to 42 Code of Federal Regulations, Section 2.32.

6. It requires an enhancement to the Controlled Substances Prescription Monitoring Program to be in a contract amendment rather than a request for proposals process.

7. It requires the department to convene a stakeholder group to advise on the criteria for the enhancement to the Controlled Substances Prescription Monitoring Program. The stakeholders must include methadone providers and providers of emergency services.

8. It removes the date by which the enhancement to the Controlled Substances Prescription Monitoring Program must be completed and requires a progress report on implementation of the enhancement to the Joint Standing Committee on Health and Human Services by January 30, 2018.

FISCAL NOTE REQUIRED

(See attached)