

PLEASE NOTE: Legislative Information **cannot** perform research, provide legal advice, or interpret Maine law. For legal assistance, please contact a qualified attorney.

An Act To Establish Uniform Protocols for the Use of Controlled Substances

Be it enacted by the People of the State of Maine as follows:

Sec. 1. 5 MRSA §12004-G, sub-§17-A is enacted to read:

17-A.

Drug Prescriptions

Expenses Only

32 MRSA §3300-B

Joint Practice Council
on Controlled
Substances

Sec. 2. 32 MRSA §3300-B is enacted to read:

§ 3300-B. Joint Practice Council on Controlled Substances

1. Establishment; membership. The Joint Practice Council on Controlled Substances is established pursuant to Title 5, section 12004-G, subsection 17-A. The council consists of 5 members as follows: 2 allopathic physicians appointed by the board; an osteopathic physician appointed by the Board of Osteopathic Licensure; a pharmacist appointed by the Maine Board of Pharmacy; and the Director of the Office of Substance Abuse within the Department of Health and Human Services or a person designated by the director. The council shall select one of its members to serve as chair.

2. Definitions. As used in this section, unless the context otherwise indicates, the following terms have the following meanings.

A. "Controlled substance" has the same meaning as in Title 22, section 7246, subsection 1.

B. "Council" means the Joint Practice Council on Controlled Substances under subsection 1.

C. "Prescriber" means a health care practitioner whose license includes the authority to prescribe a controlled substance.

3. Support. The board shall staff, support and fund the council.

4. Duties. The council shall develop, adopt and publish a protocol for the use and administration of controlled substances.

5. Licensing boards. A licensing board that licenses health care practitioners shall adopt a protocol published by the council as a standard of practice for all prescribers licensed by that board. Failure by a prescriber to adhere to a protocol published by the council pursuant to this subsection is grounds for discipline by the board with jurisdiction over the prescriber's license.

6. Minimum standards. Protocols adopted by the council under subsection 4 must include at a minimum the following constraints:

- A. That an opioid or a narcotic drug may not be prescribed beyond 30 days for the treatment of chronic pain arising from a noncancerous or nonterminal condition except by a prescriber with specialized training and expertise in managing a patient suffering from chronic pain;
- B. That a patient being treated for chronic pain may be prescribed an opioid or narcotic drug from only one prescriber at any given time;
- C. That a controlled substance may not be dispensed by mail; and
- D. That a patient may obtain a controlled substance through only one dispensing pharmacy at any given time and may change pharmacies for such a purpose only with advance permission of the prescriber managing the condition for which the controlled substance is being administered.

7. Rules. The council shall adopt rules to implement this section. Rules adopted under this subsection are routine technical rules pursuant to Title 5, chapter 375, subchapter 2-A.

SUMMARY

This bill creates the Joint Practice Council on Controlled Substances under the Board of Licensure in Medicine to develop and administer protocols for the use and administration of controlled substances, including requiring an opioid or narcotic drug to be prescribed in certain circumstances by a health care practitioner with specialized expertise and training, requiring that a patient's opioid or narcotic drug be prescribed by only one prescriber at a time, prohibiting a controlled substance from being dispensed by mail and allowing a patient to obtain a controlled substance at only one pharmacy.