Second Regular Session Seventy-first General Assembly STATE OF COLORADO

REREVISED

This Version Includes All Amendments Adopted in the Second House

LLS NO. 18-0256.01 Kristen Forrestal x4217

SENATE BILL 18-022

SENATE SPONSORSHIP

Tate and Aguilar, Lambert

HOUSE SPONSORSHIP

Pettersen and Kennedy, Singer

Senate Committees

Health & Human Services

House Committees

Health, Insurance, & Environment

A BILL FOR AN ACT

101 CONCERNING CLINICAL PRACTICE MEASURES FOR SAFER OPIOID PRESCRIBING.

Bill Summary

(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at http://leg.colorado.gov/.)

Opioid and Other Substance Use Disorders Interim Study Committee. The bill restricts the number of opioid pills that a health care practitioner, including physicians, physician assistants, advanced practice nurses, dentists, optometrists, podiatrists, and veterinarians, may prescribe for an initial prescription to a 7-day supply and one refill for a 7-day supply, with certain exceptions. The bill clarifies that a health care

HOUSE 3rd Reading Unamended May 7, 2018

HOUSE Amended 2nd Reading

SENATE 3rd Reading Unamended February 22, 2018

SENATE Amended 2nd Reading February 21, 2018

Shading denotes HOUSE amendment.

Capital letters or bold & italic numbers indicate new material to be added to existing statute.

Dashes through the words indicate deletions from existing statute.

practitioner may electronically prescribe opioids.

Current law allows health care practitioners and other individuals to query the prescription drug monitoring program (program). The bill requires health care practitioners to query the program before prescribing the first refill prescription for an opioid except under specified circumstances, and requires the practitioner to indicate his or her specialty or practice area upon the initial query.

The bill requires the department of public health and environment to report to the general assembly its results from studies regarding the prescription drug monitoring program integration methods and health care provider report cards.

1 Be it enacted by the General Assembly of the State of Colorado: 2 **SECTION 1.** In Colorado Revised Statutes, 12-32-107.5, add (3) 3 as follows: 4 12-32-107.5. Prescriptions - requirement to advise patients -5 limits on opioid prescriptions - repeal. (3) (a) A PODIATRIST SHALL NOT 6 PRESCRIBE MORE THAN A SEVEN-DAY SUPPLY OF AN OPIOID TO A PATIENT 7 WHO HAS NOT HAD AN OPIOID PRESCRIPTION IN THE LAST TWELVE MONTHS 8 BY THAT PODIATRIST, AND MAY EXERCISE DISCRETION TO INCLUDE A 9 SECOND FILL FOR A SEVEN-DAY SUPPLY. THE LIMITS ON INITIAL 10 PRESCRIBING DO NOT APPLY IF, IN THE JUDGMENT OF THE PODIATRIST, THE 11 PATIENT: 12 (I) HAS CHRONIC PAIN THAT TYPICALLY LASTS LONGER THAN 13 NINETY DAYS OR PAST THE TIME OF NORMAL HEALING, AS DETERMINED BY 14 THE PODIATRIST, OR FOLLOWING TRANSFER OF CARE FROM ANOTHER 15 PODIATRIST WHO PRESCRIBED AN OPIOID TO THE PATIENT; 16 (II) HAS BEEN DIAGNOSED WITH CANCER AND IS EXPERIENCING 17 CANCER-RELATED PAIN; OR 18 (III) IS EXPERIENCING POST-SURGICAL PAIN THAT, BECAUSE OF THE 19 NATURE OF THE PROCEDURE, IS EXPECTED TO LAST MORE THAN FOURTEEN

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1	<u>DAYS.</u>
2	(b) PRIOR TO PRESCRIBING THE SECOND FILL OF ANY OPIOID
3	PRESCRIPTION PURSUANT TO THIS SECTION, A PODIATRIST MUST COMPLY
4	WITH THE REQUIREMENTS OF SECTION 12-42.5-404 (3.6). FAILURE TO
5	COMPLY WITH SECTION 12-42.5-404 (3.6) CONSTITUTES UNPROFESSIONAL
6	CONDUCT UNDER SECTION 12-32-107 ONLY IF THE PODIATRIST
7	REPEATEDLY FAILS TO COMPLY.
8	(c) A PODIATRIST LICENSED PURSUANT TO THIS ARTICLE 32 MAY
9	PRESCRIBE OPIOIDS ELECTRONICALLY.
10	(d) A VIOLATION OF THIS SUBSECTION (3) DOES NOT CREATE A
11	PRIVATE RIGHT OF ACTION OR SERVE AS THE BASIS OF A CAUSE OF ACTION.
12	A VIOLATION OF THIS SECTION DOES NOT CONSTITUTE NEGLIGENCE PER SE
13	OR CONTRIBUTORY NEGLIGENCE PER SE AND DOES NOT ALONE ESTABLISH
14	A STANDARD OF CARE. COMPLIANCE WITH THIS SECTION DOES NOT ALONE
15	ESTABLISH AN ABSOLUTE DEFENSE TO ANY ALLEGED BREACH OF THE
16	STANDARD OF CARE.
17	(e) This subsection (3) is repealed, effective September 1,
18	<u>2021.</u>
19	SECTION 2. In Colorado Revised Statutes, amend 12-35-114 as
20	<u>follows:</u>
21	12-35-114. Dentists may prescribe drugs - surgical operations
22	- anesthesia - limits on opioid prescriptions - repeal. (1) A licensed
23	dentist is authorized to prescribe drugs or medicine; perform surgical
24	operations; administer, pursuant to board rules, local anesthesia, analgesia
25	including nitrous oxide/oxygen inhalation, medication prescribed or
26	administered for the relief of anxiety or apprehension, minimal sedation,
2.7	moderate sedation deen sedation or general anesthesia; and use

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1	appliances as necessary to the proper practice of dentistry. A dentist shall
2	not prescribe, distribute, or give to any person, including himself or
3	herself, any habit-forming drug or any controlled substance, as defined in
4	section 18-18-102 (5) C.R.S., or as contained in schedule II of 21 U.S.C.
5	sec. 812, other than in the course of legitimate dental practice and
6	pursuant to the rules promulgated by the board regarding controlled
7	substance record keeping.
8	(2) (a) A DENTIST SHALL NOT PRESCRIBE MORE THAN A SEVEN-DAY
9	SUPPLY OF AN OPIOID TO A PATIENT WHO HAS NOT HAD AN OPIOID
10	PRESCRIPTION IN THE LAST TWELVE MONTHS BY THAT DENTIST, AND MAY
11	EXERCISE DISCRETION TO INCLUDE A SECOND FILL FOR A SEVEN-DAY
12	SUPPLY. THE LIMITS ON INITIAL PRESCRIBING DO NOT APPLY IF, IN THE
13	JUDGMENT OF THE DENTIST, THE PATIENT:
14	(I) HAS CHRONIC PAIN THAT TYPICALLY LASTS LONGER THAN
15	NINETY DAYS OR PAST THE TIME OF NORMAL HEALING, AS DETERMINED BY
16	THE DENTIST, OR FOLLOWING TRANSFER OF CARE FROM ANOTHER DENTIST
17	WHO PRESCRIBED AN OPIOID TO THE PATIENT;
18	(II) HAS BEEN DIAGNOSED WITH CANCER AND IS EXPERIENCING
19	CANCER-RELATED PAIN; OR
20	(III) IS EXPERIENCING POST-SURGICAL PAIN THAT, BECAUSE OF THE
21	NATURE OF THE PROCEDURE, IS EXPECTED TO LAST MORE THAN FOURTEEN
22	<u>DAYS.</u>
23	(b) PRIOR TO PRESCRIBING THE SECOND FILL OF ANY OPIOID
24	PRESCRIPTION PURSUANT TO THIS SECTION, A DENTIST MUST COMPLY WITH
25	THE REQUIREMENTS OF SECTION 12-42.5-404 (3.6). FAILURE TO COMPLY
26	WITH SECTION 12-42.5-404 (3.6) CONSTITUTES GROUNDS FOR DISCIPLINE
27	UNDER SECTION 12-35-129 ONLY IF THE DENTIST REPEATEDLY FAILS TO

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1	COMPLY.
2	(c) A DENTIST LICENSED PURSUANT TO THIS ARTICLE 35 MAY
3	PRESCRIBE OPIOIDS ELECTRONICALLY.
4	(d) A VIOLATION OF THIS SUBSECTION (2) DOES NOT CREATE A
5	PRIVATE RIGHT OF ACTION OR SERVE AS THE BASIS OF A CAUSE OF ACTION.
6	A VIOLATION OF THIS SECTION DOES NOT CONSTITUTE NEGLIGENCE PER SE
7	OR CONTRIBUTORY NEGLIGENCE PER SE AND DOES NOT ALONE ESTABLISH
8	<u>A STANDARD OF CARE.</u> COMPLIANCE WITH THIS SECTION DOES NOT ALONE
9	ESTABLISH AN ABSOLUTE DEFENSE TO ANY ALLEGED BREACH OF THE
10	STANDARD OF CARE.
11	(e) This subsection (2) is repealed, effective September 1,
12	<u>2021.</u>
13	SECTION 3. In Colorado Revised Statutes, add 12-36-117.6 as
14	<u>follows:</u>
15	12-36-117.6. Prescribing opiates - limitations - repeal.
16	(1) (a) A PHYSICIAN OR PHYSICIAN ASSISTANT SHALL NOT PRESCRIBE
17	MORE THAN A SEVEN-DAY SUPPLY OF AN OPIOID TO A PATIENT WHO HAS
18	NOT HAD AN OPIOID PRESCRIPTION IN THE LAST TWELVE MONTHS BY THAT
19	PHYSICIAN OR PHYSICIAN ASSISTANT, AND MAY EXERCISE DISCRETION TO
20	<u>INCLUDE A</u> SECOND FILL FOR A SEVEN-DAY SUPPLY. THE LIMITS ON INITIAL
21	PRESCRIBING DO NOT APPLY IF, IN THE JUDGMENT OF THE PHYSICIAN OR
22	PHYSICIAN ASSISTANT, THE PATIENT:
23	(I) HAS CHRONIC PAIN THAT TYPICALLY LASTS LONGER THAN
24	NINETY DAYS OR PAST THE TIME OF NORMAL HEALING, AS DETERMINED BY
25	THE PHYSICIAN OR PHYSICIAN ASSISTANT, OR FOLLOWING TRANSFER OF
26	CARE FROM ANOTHER PHYSICIAN OR PHYSICIAN ASSISTANT WHO
27	PRESCRIBED AN OPIOID TO THE PATIENT;

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1	(II) HAS BEEN DIAGNOSED WITH CANCER AND IS EXPERIENCING
2	<u>CANCER-RELATED PAIN;</u>
3	(III) IS EXPERIENCING POST-SURGICAL PAIN THAT, BECAUSE OF THE
4	NATURE OF THE PROCEDURE, IS EXPECTED TO LAST MORE THAN FOURTEEN
5	<u>DAYS; OR</u>
6	(IV) IS UNDERGOING PALLIATIVE CARE OR HOSPICE CARE FOCUSED
7	ON PROVIDING THE PATIENT WITH RELIEF FROM SYMPTOMS, PAIN, AND
8	STRESS RESULTING FROM A SERIOUS ILLNESS IN ORDER TO IMPROVE
9	QUALITY OF LIFE.
10	(b) PRIOR TO PRESCRIBING THE SECOND FILL OF ANY OPIOID
11	PRESCRIPTION PURSUANT TO THIS SECTION, A PHYSICIAN OR PHYSICIAN
12	ASSISTANT MUST COMPLY WITH THE REQUIREMENTS OF SECTION
13	12-42.5-404 (3.6). FAILURE TO COMPLY WITH SECTION 12-42.5-404 (3.6)
14	CONSTITUTES UNPROFESSIONAL CONDUCT UNDER SECTION 12-36-117
15	ONLY IF THE PHYSICIAN OR PHYSICIAN ASSISTANT REPEATEDLY FAILS TO
16	COMPLY.
17	(2) A PHYSICIAN OR PHYSICIAN ASSISTANT LICENSED PURSUANT TO
18	THIS ARTICLE 36 MAY PRESCRIBE OPIOIDS ELECTRONICALLY.
19	(3) A VIOLATION OF THIS <u>SECTION DOES NOT CREATE A PRIVATE</u>
20	RIGHT OF ACTION OR SERVE AS THE BASIS OF A CAUSE OF ACTION. A
21	VIOLATION OF THIS SECTION DOES NOT CONSTITUTE NEGLIGENCE PER SE OF
22	CONTRIBUTORY NEGLIGENCE PER SE AND DOES NOT ALONE ESTABLISH A
23	STANDARD OF CARE. COMPLIANCE WITH THIS SECTION DOES NOT ALONE
24	ESTABLISH AN ABSOLUTE DEFENSE TO ANY ALLEGED BREACH OF THE
25	STANDARD OF CARE.
26	(4) This section is repealed, effective September 1, 2021.
27	SECTION 4. In Colorado Revised Statutes, 12-38-111.6, add

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1	(7.5) as follows:
2	12-38-111.6. Prescriptive authority - advanced practice nurses
3	- limits on opioid prescriptions - repeal. (7.5) (a) AN ADVANCED
4	PRACTICE NURSE WITH PRESCRIPTIVE AUTHORITY PURSUANT TO THIS
5	SECTION SHALL NOT PRESCRIBE MORE THAN A SEVEN-DAY SUPPLY OF AN
6	OPIOID TO A PATIENT WHO HAS NOT HAD AN OPIOID PRESCRIPTION IN THE
7	LAST TWELVE MONTHS BY THAT ADVANCE PRACTICE NURSE, AND MAY
8	EXERCISE DISCRETION TO INCLUDE A SECOND FILL FOR A SEVEN-DAY
9	SUPPLY. THE LIMITS ON INITIAL PRESCRIBING DO NOT APPLY IF, IN THE
10	JUDGMENT OF THE ADVANCED PRACTICE NURSE, THE PATIENT:
11	(I) HAS CHRONIC PAIN THAT TYPICALLY LASTS LONGER THAN
12	NINETY DAYS OR PAST THE TIME OF NORMAL HEALING, AS DETERMINED BY
13	THE ADVANCE PRACTICE NURSE, OR FOLLOWING TRANSFER OF CARE FROM
14	ANOTHER ADVANCE PRACTICE NURSE WHO PRESCRIBED AN OPIOID TO THE
15	PATIENT;
16	(II) HAS BEEN DIAGNOSED WITH CANCER AND IS EXPERIENCING
17	CANCER-RELATED PAIN;
18	(III) IS EXPERIENCING POST-SURGICAL PAIN THAT, BECAUSE OF THE
19	NATURE OF THE PROCEDURE, IS EXPECTED TO LAST MORE THAN FOURTEEN
20	DAYS; OR
21	(IV) IS UNDERGOING PALLIATIVE CARE OR HOSPICE CARE FOCUSED
22	ON PROVIDING THE PATIENT WITH RELIEF FROM SYMPTOMS, PAIN, AND
23	STRESS RESULTING FROM A SERIOUS ILLNESS IN ORDER TO IMPROVE
24	QUALITY OF LIFE.
25	(b) PRIOR TO PRESCRIBING THE SECOND FILL OF ANY OPIOID
26	PRESCRIPTION PURSUANT TO THIS SECTION, AN ADVANCED PRACTICE
27	NURSE MUST COMPLY WITH THE REQUIREMENTS OF SECTION 12-42.5-404

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1	(3.6). FAILURE TO COMPLY WITH SECTION 12-42.5-404 (3.6) CONSTITUTES
2	GROUNDS FOR DISCIPLINE UNDER SECTION 12-38-117 ONLY IF THE
3	ADVANCED PRACTICE NURSE REPEATEDLY FAILS TO COMPLY.
4	(c) An advanced practice nurse with prescriptive
5	AUTHORITY PURSUANT TO THIS SECTION MAY PRESCRIBE OPIOIDS
6	ELECTRONICALLY.
7	(d) A VIOLATION OF THIS SUBSECTION (7.5) DOES NOT CREATE A
8	PRIVATE RIGHT OF ACTION OR SERVE AS THE BASIS OF A CAUSE OF ACTION.
9	A VIOLATION OF THIS SECTION DOES NOT CONSTITUTE NEGLIGENCE PER SE
10	OR CONTRIBUTORY NEGLIGENCE PER SE AND DOES NOT ALONE ESTABLISH
11	A STANDARD OF CARE. COMPLIANCE WITH THIS SECTION DOES NOT ALONE
12	ESTABLISH AN ABSOLUTE DEFENSE TO ANY ALLEGED BREACH OF THE
13	STANDARD OF CARE.
14	(e) This subsection (7.5) is repealed, effective September 1,
15	<u>2021.</u>
16	SECTION 5. In Colorado Revised Statutes, 12-40-109.5, add (4)
17	as follows:
18	12-40-109.5. Use of prescription and nonprescription drugs -
19	limits on opioid prescriptions - repeal. (4) (a) AN OPTOMETRIST SHALL
20	NOT PRESCRIBE MORE THAN A SEVEN-DAY SUPPLY OF AN OPIOID TO A
21	PATIENT WHO HAS NOT HAD AN OPIOID PRESCRIPTION IN THE LAST TWELVE
22	MONTHS BY THAT OPTOMETRIST, AND MAY EXERCISE DISCRETION TO
23	INCLUDE A SECOND FILL FOR A SEVEN-DAY SUPPLY. THE LIMITS ON INITIAL
24	PRESCRIBING DO NOT APPLY IF, IN THE JUDGMENT OF THE OPTOMETRIST,
25	THE PATIENT:
26	(I) HAS CHRONIC PAIN THAT TYPICALLY LASTS LONGER THAN
27	NINETY DAYS OR PAST THE TIME OF NORMAL HEALING, AS DETERMINED BY

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1	THE OPTOMETRIST, OR FOLLOWING TRANSFER OF CARE FROM ANOTHER
2	OPTOMETRIST WHO PRESCRIBED AN OPIOID TO THE PATIENT;
3	(II) HAS BEEN DIAGNOSED WITH CANCER AND IS EXPERIENCING
4	CANCER-RELATED PAIN; OR
5	(III) IS EXPERIENCING POST-SURGICAL PAIN THAT, BECAUSE OF THE
6	NATURE OF THE PROCEDURE, IS EXPECTED TO LAST MORE THAN FOURTEEN
7	<u>DAYS.</u>
8	(b) Prior to prescribing the second fill of any opioid
9	PRESCRIPTION PURSUANT TO THIS SECTION, AN OPTOMETRIST MUST
0	COMPLY WITH THE REQUIREMENTS OF SECTION 12-42.5-404 (3.6). FAILURE
1	TO COMPLY WITH SECTION 12-42.5-404 (3.6) CONSTITUTES
12	UNPROFESSIONAL CONDUCT UNDER SECTION 12-40-118 ONLY IF THE
13	OPTOMETRIST REPEATEDLY FAILS TO COMPLY.
14	(c) AN OPTOMETRIST LICENSED PURSUANT TO THIS ARTICLE 40
15	MAY PRESCRIBE OPIOIDS ELECTRONICALLY.
16	(d) A VIOLATION OF THIS SUBSECTION (4) DOES NOT CREATE A
17	PRIVATE RIGHT OF ACTION OR SERVE AS THE BASIS OF A CAUSE OF ACTION.
18	A VIOLATION OF THIS SECTION DOES NOT CONSTITUTE NEGLIGENCE PER SE
19	OR CONTRIBUTORY NEGLIGENCE PER SE AND DOES NOT ALONE ESTABLISH
20	<u>A STANDARD OF CARE.</u> COMPLIANCE WITH THIS SECTION DOES NOT ALONE
21	ESTABLISH AN ABSOLUTE DEFENSE TO ANY ALLEGED BREACH OF THE
22	STANDARD OF CARE.
23	(e) This subsection (4) is repealed, effective September 1,
24	<u>2021.</u>
25	SECTION 6. In Colorado Revised Statutes, 12-42.5-404, amend
26	(3)(b); and add (3.6) and (8) as follows:
27	12-42.5-404. Program operation - access - rules - definitions -

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1	repeal. (3) The program is available for query only to the following
2	persons or groups of persons:
3	(b) Any practitioner with the statutory authority to prescribe
4	controlled substances, or an individual designated by the practitioner to
5	act on his or her behalf in accordance with section 12-42.5-403 (1.5)(b),
6	to the extent the query relates to a current patient of the practitioner. THE
7	PRACTITIONER OR HIS OR HER DESIGNEE SHALL IDENTIFY HIS OR HER AREA
8	OF HEALTH CARE SPECIALTY OR PRACTICE UPON THE INITIAL QUERY OF THE
9	PROGRAM;
10	(3.6) (a) EACH PRACTITIONER OR HIS OR HER DESIGNEE SHALL
11	QUERY THE PROGRAM PRIOR TO PRESCRIBING THE SECOND FILL FOR AN
12	OPIOID UNLESS THE PATIENT RECEIVING THE PRESCRIPTION:
13	(I) IS RECEIVING THE OPIOID IN A HOSPITAL, SKILLED NURSING
14	FACILITY, RESIDENTIAL FACILITY, OR CORRECTIONAL FACILITY;
15	(II) HAS BEEN DIAGNOSED WITH CANCER AND IS EXPERIENCING
16	CANCER-RELATED PAIN;
17	(III) IS UNDERGOING PALLIATIVE CARE OR HOSPICE CARE;
18	(IV) IS EXPERIENCING POST-SURGICAL PAIN THAT, BECAUSE OF THE
19	NATURE OF THE PROCEDURE, IS EXPECTED TO LAST MORE THAN FOURTEEN
20	<u>DAYS;</u>
21	(V) IS RECEIVING TREATMENT DURING A NATURAL DISASTER OR
22	DURING AN INCIDENT WHERE MASS CASUALTIES HAVE TAKEN PLACE; OR
23	(VI) HAS RECEIVED ONLY A SINGLE DOSE TO RELIEVE PAIN FOR A
24	SINGLE TEST OR PROCEDURE.
25	(b) The program must use industry standards to allow
26	PROVIDERS OR THEIR DESIGNEES DIRECT ACCESS TO DATA FROM WITHIN AN
27	ELECTRONIC HEALTH RECORD TO THE EXTENT THAT THE QUERY RELATES

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1	TO A CURRENT PATIENT OF THE PRACTITIONER.
2	(c) A PRACTITIONER OR HIS OR HER DESIGNEE COMPLIES WITH THIS
3	SUBSECTION (3.6) IF HE OR SHE ATTEMPTS TO ACCESS THE PROGRAM PRIOR
4	TO PRESCRIBING THE SECOND FILL FOR AN OPIOID, AND THE PROGRAM IS
5	NOT AVAILABLE OR IS INACCESSIBLE DUE TO TECHNICAL FAILURE.
6	(d) A VIOLATION OF THIS SUBSECTION (3.6) DOES NOT CREATE A
7	PRIVATE RIGHT OF ACTION OR SERVE AS THE BASIS OF A CAUSE OF ACTION
8	A VIOLATION OF THIS SECTION DOES NOT CONSTITUTE NEGLIGENCE PER SE
9	OR CONTRIBUTORY NEGLIGENCE PER SE AND DOES NOT ALONE ESTABLISH
10	A STANDARD OF CARE. COMPLIANCE WITH THIS SECTION DOES NOT ALONE
11	ESTABLISH AN ABSOLUTE DEFENSE TO ANY ALLEGED BREACH OF THE
12	STANDARD OF CARE.
13	(e) This subsection (3.6) is repealed, effective September 1.
14	<u>2021.</u>
15	(8) REPORTS GENERATED BY THE PROGRAM AND PROVIDED TO
16	PRESCRIBING PRACTITIONERS FOR PURPOSES OF INFORMATION
17	EDUCATION, AND INTERVENTION TO PREVENT AND REDUCE OCCURRENCES
18	OF CONTROLLED SUBSTANCE MISUSE, ABUSE, AND DIVERSION ARE:
19	(a) NOT PUBLIC RECORDS UNDER THE "COLORADO OPEN RECORDS
20	ACT," PART 2 OF ARTICLE 72 OF TITLE 24;
21	(b) NOT DISCOVERABLE IN ANY CRIMINAL OR ADMINISTRATIVE
22	PROCEEDING AGAINST A PRESCRIBING PRACTITIONER; AND
23	(c) NOT ADMISSIBLE IN ANY CIVIL, CRIMINAL, OR ADMINISTRATIVE
24	PROCEEDING AGAINST A PRESCRIBING PRACTITIONER.
25	SECTION 7. In Colorado Revised Statutes, add 12-64-127 as
26	<u>follows:</u>
2.7	12-64-127. Prescription of opioids - limitations - repeal

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1	(1) (a) A VETERINARIAN SHALL NOT PRESCRIBE MORE THAN A SEVEN-DAY
2	SUPPLY OF AN OPIOID TO A PATIENT WHO HAS NOT HAD AN OPIOID
3	PRESCRIPTION IN THE LAST TWELVE MONTHS BY THAT VETERINARIAN, AND
4	MAY EXERCISE DISCRETION TO INCLUDE A SECOND FILL FOR A SEVEN-DAY
5	SUPPLY. THE LIMITS ON INITIAL PRESCRIBING DO NOT APPLY IF, IN THE
6	JUDGMENT OF THE VETERINARIAN, THE PATIENT:
7	(I) HAS CHRONIC PAIN THAT TYPICALLY LASTS LONGER THAN
8	NINETY DAYS OR PAST THE TIME OF NORMAL HEALING, AS DETERMINED BY
)	THE VETERINARIAN, OR FOLLOWING TRANSFER OF CARE FROM ANOTHER
	VETERINARIAN WHO PRESCRIBED AN OPIOID TO THE PATIENT;
	(II) HAS BEEN DIAGNOSED WITH CANCER AND IS EXPERIENCING
	CANCER-RELATED PAIN; OR
	(III) IS EXPERIENCING POST-SURGICAL PAIN THAT, BECAUSE OF THE
	NATURE OF THE PROCEDURE, IS EXPECTED TO LAST MORE THAN FOURTEEN
	<u>DAYS.</u>
	(b) PRIOR TO PRESCRIBING THE SECOND FILL OF ANY OPIOID
	PRESCRIPTION PURSUANT TO THIS SECTION, A VETERINARIAN MUST
	COMPLY WITH THE REQUIREMENTS OF SECTION 12-42.5-404 (3.6). FAILURE
	TO COMPLY WITH SECTION 12-42.5-404 (3.6) CONSTITUTES GROUNDS FOR
	DISCIPLINE UNDER SECTION 12-64-111 ONLY IF THE VETERINARIAN
	REPEATEDLY FAILS TO COMPLY.
	(2) A VETERINARIAN LICENSED PURSUANT TO THIS ARTICLE 64
	MAY PRESCRIBE OPIOIDS ELECTRONICALLY.
	(3) A VIOLATION OF THIS <u>SECTION DOES NOT CREATE A PRIVATE</u>
	RIGHT OF ACTION OR SERVE AS THE BASIS OF A CAUSE OF ACTION. A
	<u>VIOLATION OF THIS SECTION DOES NOT CONSTITUTE NEGLIGENCE PER SE OR</u>
	CONTRIBUTORY NEGLIGENCE PER SE AND DOES NOT ALONE ESTABLISH A

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1	STANDARD OF CARE. COMPLIANCE WITH THIS SECTION DOES NOT ALONE
2	ESTABLISH AN ABSOLUTE DEFENSE TO ANY ALLEGED BREACH OF THE
3	STANDARD OF CARE.
4	(4) This section is repealed, effective September 1, 2021.
5	SECTION 8. In Colorado Revised Statutes, add 25-1-129 as
6	<u>follows:</u>
7	25-1-129. Prescription drug monitoring program integration
8	methods - health care provider report cards - report - repeal. (1) ON
9	OR BEFORE DECEMBER 1, 2019, THE DEPARTMENT SHALL REPORT TO THE
10	GENERAL ASSEMBLY THE FINDINGS FROM STUDIES THE DEPARTMENT
11	CONDUCTED PURSUANT TO THE FEDERAL GRANT TITLED THE
12	"Prescription Drug Overdose Prevention for States Cooperative
13	AGREEMENT" THAT THE DEPARTMENT RECEIVED CONCERNING:
14	(a) The prescription drug monitoring program integration
15	METHODS; AND
16	(b) HEALTH CARE PROVIDER REPORT CARDS.
17	(2) The department shall forward the findings from
18	STUDIES CONDUCTED PURSUANT TO SUBSECTION (1) OF THIS SECTION TO
19	THE CENTER FOR RESEARCH INTO SUBSTANCE USE DISORDER PREVENTION,
20	TREATMENT, AND RECOVERY SUPPORT STRATEGIES AT THE UNIVERSITY OF
21	COLORADO HEALTH SCIENCES CENTER, CREATED IN SECTION 27-80-118
22	(3). THE CENTER SHALL USE THE INFORMATION TO PROVIDE VOLUNTARY
23	TRAINING FOR HEALTH CARE PROVIDERS IN TARGETED AREAS.
24	(3) This section is repealed, effective July 1, 2020.
25	SECTION 9. Safety clause. The general assembly hereby finds,
26	determines, and declares that this act is necessary for the immediate
2.7	preservation of the public peace, health, and safety

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