



Legislative  
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Nonpartisan Services for Colorado's Legislature

SB 18-022

REVISED  
FISCAL NOTE

(replaces fiscal note dated January 25, 2018)

<b>Drafting Number:</b>	LLS 18-0256	<b>Date:</b>	March 20, 2018
<b>Prime Sponsors:</b>	Sen. Tate; Aguilar Rep. Pettersen; Kennedy	<b>Bill Status:</b>	House Health, Insurance, and Environment
		<b>Fiscal Analyst:</b>	Clare Pramuk   303-866-2677 clare.pramuk@state.co.us

**Bill Topic:** CLINICAL PRACTICE FOR OPIOID PRESCRIBING

<b>Summary of Fiscal Impact:</b>	<input type="checkbox"/> State Revenue	<input type="checkbox"/> TABOR Refund
	<input checked="" type="checkbox"/> State Expenditure ( <i>minimal</i> )	<input type="checkbox"/> Local Government
	<input type="checkbox"/> State Transfer	<input type="checkbox"/> Statutory Public Entity

This bill limits, with certain exceptions, the number of opioid pills prescribed to a 7-day supply with one 7-day refill. The bill increases state workload through September 1, 2021.

**Appropriation  
Summary:** No appropriation is required.

**Fiscal Note  
Status:** The revised fiscal note reflects the reengrossed bill. The bill was originally recommended by the Opioid and Other Substance Use Disorders Interim Study Committee.

**Summary of Legislation**

This bill limits to a seven-day supply, the number of opioid pills that a health care provider including physicians, physician assistants, advanced practice nurses, dentists, optometrists, podiatrists, and veterinarians, may prescribe to a patient if the patient has not been prescribed an opioid by the provider in the past 12 months. At the discretion of the provider, the prescription may include one refill for an additional seven-day supply. With certain exceptions, the bill also requires health care providers or their designees, to query the Prescription Drug Monitoring Program (PDMP) prior to prescribing the first refill prescription for an opioid. The bill includes a number of exceptions to the 7-day limitation and allows for a health care provider to electronically prescribe opioids. A violation of the provisions does not constitute negligence or contributory negligence per se and does not create a private right of action or serve as the basis of a cause of action.

When initially querying the PDMP, each health care provider or designee is required to identify his or her area of health care specialty or practice. The provisions of the bill above are repealed September 1, 2021.

By September 1, 2019, the Department of Public Health and Environment is required to report its findings to the General Assembly from studies conducted on PDMP integration methods and health care provider report cards. The department is also required to provide the findings to the Center for Research Into Substance Use Disorder Prevention, Treatment, and Recovery Support Strategies at the University of Colorado Health Sciences Center. The center is required to use the information to provide voluntary training for health care providers in targeted areas. These provisions are repealed July 1, 2020.

## **Background**

The PDMP uses a secure online database to store information about controlled substance prescriptions dispensed to patients in Colorado. Data in the PDMP database include the name of the practitioner and patient, date the prescription was dispensed, drug name and dosage, the quantity supplied, the number of refills, method of payment, and the name of the dispensing pharmacy. The direct and indirect costs of the PDMP are funded with a surcharge on practitioner licenses set by the Department of Regulatory Agencies and limited in statute to \$25. Every practitioner in Colorado who holds a current registration issued by the federal Drug Enforcement Agency and every pharmacist is required to be registered and maintain an account with the PDMP. The database is operated by a vendor with oversight by the State Board of Pharmacy within the Division of Professions and Occupations in the Department of Regulatory Agencies.

## **State Expenditures**

The bill increases workload in the Department of Regulatory Agencies by a minimal amount to update rules and perform outreach with affected health professionals beginning in FY 2017-18 and continuing until September 1, 2021. This work can be accomplished within existing appropriations. No modifications to the PDMP database are required to implement these changes.

The Department of Public Health and Environment is already preparing study findings so it will not have a workload increase as a result of the bill requirements.

The Center for Research into Substance Use Disorder, Prevention, Treatment, and Recovery Support Strategies at the University of Colorado Health Sciences Center will have an increase in workload between receipt of the study findings and July 1, 2020, to provide the training required by the bill.

## **Effective Date**

The bill takes effect upon signature of the Governor, or upon becoming law without his signature.

## **State and Local Government Contacts**

Health Care Policy and Financing  
Information Technology  
Regulatory Agencies

Higher Education  
Public Health and Environment