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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2014

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A N A C T

RELATING TO FOOD AND DRUGS -- UNIFORM CONTROLLED SUBSTANCES ACT

Introduced By: Representatives Shekarchi, McNamara, Ackerman, Blazejewski, and Phillips

Date Introduced: February 12, 2014

Referred To: House Health, Education & Welfare

It is enacted by the General Assembly as follows:

1 SECTION 1. Section 21-28-3.18 of the General Laws in Chapter 21-28 entitled "Uniform
2 Controlled Substances Act" is hereby amended to read as follows:

3 **21-28-3.18. Prescriptions.** -- (a) An apothecary in good faith may sell and dispense
4 controlled substances in schedule II, III, IV and V to any person upon a valid prescription by a
5 practitioner licensed by law to prescribe or administer those substances, dated and signed by the
6 person prescribing on the day when issued and bearing the full name and address of the patient to
7 whom, or of the owner of the animal for which the substance is dispensed and the full name,
8 address and registration number under the federal law of the person prescribing, if he or she is
9 required by that law to be registered. If the prescription is for an animal, it shall state the species
10 of the animal for which the substance is prescribed.

11 (b) When filling a hard-copy prescription for a schedule II controlled substance, the
12 apothecary filling the prescription shall sign his or her full name and shall write the date of filling
13 on the face of the prescription.

14 (c) The prescription shall be retained on file by the proprietor of the pharmacy in which
15 it was filled for a period of two (2) years so as to be readily accessible for inspection by any
16 public officer or employee engaged in the enforcement of this chapter.

17 (d) (1) Hard copy prescriptions for controlled substances in schedule II shall be filed
18 separately and shall not be refilled.

19 (2) The director of health may, after appropriate notice and hearing pursuant to section

1 42-35-3, promulgate rules and regulations for the purpose of adopting a system for electronic data
2 transmission of prescriptions for controlled substances in schedule II, III and IV.

3 (3) A practitioner may sign and transmit electronic prescriptions for controlled
4 substances and a pharmacy may dispense an electronically transmitted prescription in accordance
5 with the code of federal regulations, title 21 part 1300, et seq.

6 (4) If the practitioner requests prescription fill status notification as part of the electronic
7 prescription, the pharmacy shall provide such notification to the practitioner and indicate whether
8 the electronic prescription is dispensed, partially dispensed or not dispensed and returned to the
9 pharmacy's stock.

10 (e) A prescription for a schedule II narcotic substance to be compounded for the direct
11 administration to a patient by parenteral, intravenous, intramuscular, subcutaneous, or intraspinal
12 infusion may be transmitted by the practitioner or practitioner's agent to the pharmacy by
13 facsimile. The facsimile will serve as the original prescription.

14 (f) A prescription for a schedule II substance for a resident of a long term care facility
15 may be transmitted by the practitioner or the practitioner's agent to the dispensing pharmacy by
16 facsimile. The facsimile serves as the original prescription.

17 (g) A prescription for a schedule II narcotic substance for a patient residing in a hospice
18 certified by Medicare under title XVIII of the Social Security Act, 42 U.S.C. section 1395 et seq.,
19 or licensed by the state, may be transmitted by the practitioner or practitioner's agent to the
20 dispensing pharmacy by facsimile. The practitioner or the practitioner's agent will note on the
21 prescription that the patient is a hospice patient. The facsimile serves as the original written
22 prescription.

23 (h) An apothecary, in lieu of a written prescription, may sell and dispense controlled
24 substances in schedules III, IV, and V to any person upon an oral prescription of a practitioner. In
25 issuing an oral prescription the prescriber shall furnish the apothecary with the same information
26 as is required by subsection (a) of this section and the apothecary who fills the prescription, shall
27 immediately reduce the oral prescription to writing and shall inscribe the information on the
28 written record of the prescription made. This record shall be filed and preserved by the proprietor
29 of the pharmacy in which it is filled in accordance with the provisions of subsection (c) of this
30 section. In no case may a prescription for a controlled substance listed in schedules III, IV, or V
31 be filled or refilled more than six (6) months after the date on which the prescription was issued
32 and no prescription shall be authorized to be refilled more than five (5) times. Each refilling shall
33 be entered on the face or back of the prescription and note the date and amount of controlled
34 substance dispensed, and the initials or identity of the dispensing apothecary.

1 (i) In the case of an emergency situation as defined in federal law, an apothecary may
2 dispense a controlled substance listed in schedule II upon receiving an oral authorization of a
3 prescribing practitioner provided that:

4 (1) The quantity prescribed and dispensed is limited to the amount adequate to treat the
5 patient during the emergency period and dispensing beyond the emergency period must be
6 pursuant to a written prescription signed by the prescribing practitioner.

7 (2) The prescription shall be immediately reduced to writing and shall contain all the
8 information required in subsection (a) of this section.

9 (3) The prescription must be dispensed in good faith in the normal course of professional
10 practice.

11 (4) Within seven (7) days after authorizing an emergency oral prescription, the
12 prescribing practitioner shall cause a prescription for the emergency quantity prescribed to be
13 delivered to the dispensing apothecary. The prescription shall have written on its face
14 "Authorization for emergency dispensing" and the date of the oral order. The prescription upon
15 receipt by the apothecary shall be attached to the oral emergency prescription which had earlier
16 been reduced to writing.

17 (j) (1) The partial filling of a prescription for a controlled substance listed in schedule II
18 is permissible, if the apothecary is unable to supply the full quantity called for in a prescription or
19 emergency oral prescription and he or she makes a notation of the quantity supplied on the face of
20 the prescription or oral emergency prescription which has been reduced to writing. The remaining
21 portion of the prescription may be filled within seventy-two (72) hours of the first partial filling,
22 however, if the remaining portion is not, or cannot be filled within seventy-two (72) hours, the
23 apothecary shall notify the prescribing practitioner. No further quantity may be supplied beyond
24 seventy-two (72) hours without a new prescription.

25 (2) (i) A prescription for a schedule II controlled substance written for a patient in a long
26 term care facility (LTCF), or for a patient with a medical diagnosis documenting a terminal
27 illness, may be filled in partial quantities to include individual dosage units. If there is a question
28 whether a patient may be classified as having a terminal illness, the pharmacist must contact the
29 practitioner prior to partially filling the prescription. Both the pharmacist and the prescribing
30 practitioner have a corresponding responsibility to assure that the controlled substance is for a
31 terminally ill patient.

32 (ii) The pharmacist must record on the prescription whether the patient is "terminally ill"
33 or an "LTCF patient." A prescription that is partially filled, and does not contain the notation
34 "terminally ill" or "LTCF patient", shall be deemed to have been filled in violation of this chapter.

1 (iii) For each partial filling, the dispensing pharmacist shall record on the back of the
2 prescription (or on another appropriate record, uniformly maintained, and readily retrievable),
3 the:

- 4 (A) Date of the partial filling;
- 5 (B) Quantity dispensed;
- 6 (C) Remaining quantity authorized to be dispensed; and
- 7 (D) Identification of the dispensing pharmacist.

8 (iv) The total quantity of schedule II controlled substances dispensed in all partial fillings
9 must not exceed the total quantity prescribed.

10 (v) Schedule II prescriptions for patients in a LTCF, or patients with a medical diagnosis
11 documenting a terminal illness, are valid for a period not to exceed sixty (60) days from the issue
12 date, unless sooner terminated by the discontinuance of medication.

13 (k) Automated data processing systems. - As an alternative to the prescription record
14 keeping provision of subsection (h) of this section, an automated data processing system may be
15 employed for the record keeping system, if the following conditions have been met:

16 (1) The system shall have the capability of producing sight-readable documents of all
17 original and refilled prescription information. The term "sight-readable" means that an authorized
18 agent shall be able to examine the record and read the information. During the course of an on-
19 site inspection, the record may be read from the CRT, microfiche, microfilm, printout, or other
20 method acceptable to the director. In the case of administrative proceedings, records must be
21 provided in a paper printout form.

22 (2) The information shall include, but not be limited to, the prescription requirements
23 and records of dispensing as indicated in subsection (h) of this section.

24 (3) The individual pharmacist responsible for completeness and accuracy of the entries
25 to the system must provide documentation of the fact that prescription information entered into
26 the computer is correct. In documenting this information, the pharmacy shall have the option to
27 either:

28 (i) Maintain a bound log book, or separate file, in which each individual pharmacist
29 involved in the dispensing shall sign a statement each day, attesting to the fact that the
30 prescription information entered into the computer that day has been reviewed and is correct as
31 shown. The book or file must be maintained at the pharmacy employing that system for a period
32 of at least two (2) years after the date of last dispensing; or

33 (ii) Provide a printout of each day's prescription information. That printout shall be
34 verified, dated, and signed by the individual pharmacist verifying that the information indicated is

1 correct. The printout must be maintained at least two (2) years from the date of last dispensing.

2 (4) An auxiliary record keeping system shall be established for the documentation of
3 refills, if the automated data processing system is inoperative for any reason. The auxiliary
4 system shall ensure that all refills are authorized by the original prescription, and that the
5 maximum number of refills is not exceeded. When this automated data processing system is
6 restored to operation, the information regarding prescriptions filled and refilled during the
7 inoperative period, shall be entered into the automated data processing system within ninety-six
8 (96) hours.

9 (5) Any pharmacy using an automated data processing system must comply with all
10 applicable state and federal laws and regulations.

11 (6) A pharmacy shall make arrangements with the supplier of data processing services or
12 materials to ensure that the pharmacy continues to have adequate and complete prescription and
13 dispensing records if the relationship with the supplier terminates for any reason. A pharmacy
14 shall ensure continuity in the maintenance of records.

15 (7) The automated data processing system shall contain adequate safeguards for security
16 of the records, to maintain the confidentiality and accuracy of the prescription information.
17 Safeguards against unauthorized changes in data after the information has been entered and
18 verified by the registered pharmacist shall be provided by the system.

19 (l) Prescriptions for controlled substances as found in schedules II, will become void
20 unless dispensed within ninety (90) days of the original date of the prescription, and in no event
21 shall more than a thirty (30) day supply be dispensed at any one time.

22 (1) In prescribing controlled substances in schedule II, practitioners may write up to
23 three (3) separate prescriptions, each for up to a one-month supply, each signed and dated on the
24 date written. For those prescriptions for the second and/or third month, the practitioner must write
25 the earliest date each of those subsequent prescription may be filled, with directions to the
26 pharmacist to fill no earlier than the date specified on the face of the prescription.

27 (m) The prescriptions in schedules III, IV, and V will become void unless dispensed
28 within one hundred eighty (180) days of the original date of the prescription. For purposes of this
29 section, a "dosage unit" shall be defined as a single capsule, tablet or suppository, or not more
30 than one five (5) ml. of an oral liquid.

31 (1) Prescriptions in Schedule III cannot be written for more than one hundred (100)
32 dosage units and not more than one hundred (100) dosage units may be dispensed at one time.

33 (2) Prescriptions in Schedule IV and V may be written for up to a ninety (90) day supply
34 based on directions. No more than three hundred and sixty (360) dosage units may be dispensed

1 at one time.

2 SECTION 2. This act shall take effect upon passage.

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EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF

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RELATING TO FOOD AND DRUGS -- UNIFORM CONTROLLED SUBSTANCES ACT

- 1 This act would require pharmacies, pursuant to the request of the prescribing practitioner
- 2 to provide a fill status notification to the practitioner for electronic prescriptions.
- 3 This act would take effect upon passage.

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