Amend CSHB 2561 (senate committee report) as follows:

(1) In the recital to SECTION 3 of the bill (page 1, line58), strike "(i), and (j)" and substitute "(i), (j), and (k)".

(2) In SECTION 3 of the bill, following added Subsection481.0761(j), Health and Safety Code (page 2, between lines 20 and21), insert the following:

(k) The board by rule may develop guidelines identifying patterns that may indicate that a particular patient to whom a controlled substance is prescribed or dispensed is engaging in drug abuse or drug diversion. These guidelines may be based on the frequency of prescriptions issued to and filled by the patient, the types of controlled substances prescribed, and the number of prescribers who prescribe controlled substances to the patient. The board may, based on the guidelines developed under this subsection, send a prescriber or dispenser an electronic notification if there is reason to believe that a particular patient is engaging in drug abuse or drug diversion.

(3) In the recital to SECTION 4 of the bill (page 2, line
22), strike "481.0763 and 481.0764" and substitute "481.0762,
481.0763, 481.0764, 481.0765, and 481.0766".

(4) In SECTION 4 of the bill, strike added Section 481.0763,Health and Safety Code (page 2, lines 24 through 27), and substitute the following:

Sec. 481.0762. MONITORING BY REGULATORY AGENCY. (a) Each regulatory agency that issues a license, certification, or registration to a prescriber shall promulgate specific guidelines for prescribers regulated by that agency for the responsible prescribing of opioids, benzodiazepines, barbiturates, or carisoprodol.

(b) A regulatory agency that issues a license, certification, or registration to a prescriber shall periodically access the information submitted to the board under Sections 481.074(q) and 481.075 to determine whether a prescriber is engaging in potentially harmful prescribing patterns or practices.

(c) If the board sends a prescriber an electronic notification authorized under Section 481.0761(i), the board shall immediately send an electronic notification to the appropriate

regulatory agency.

(d) In determining whether a potentially harmful prescribing pattern or practice is occurring, the appropriate regulatory agency, at a minimum, shall consider:

(1) the number of times a prescriber prescribes opioids, benzodiazepines, barbiturates, or carisoprodol; and

(2) for prescriptions described by Subdivision (1), patterns of prescribing combinations of those drugs and other dangerous combinations of drugs identified by the board.

(e) If, during a periodic check under this section, the regulatory agency finds evidence that a prescriber may be engaging in potentially harmful prescribing patterns or practices, the regulatory agency may notify that prescriber.

(f) A regulatory agency may open a complaint against a prescriber if the agency finds evidence during a periodic check under this section that the prescriber is engaging in conduct that violates this subchapter or any other statute or rule.

Sec. 481.0763. REGISTRATION BY REGULATORY AGENCY. A regulatory agency that issues a license, certification, or registration to a prescriber or dispenser shall provide the board with any necessary information for each prescriber or dispenser, including contact information for the notifications described by Sections 481.0761(i) and (k), to register the prescriber or dispenser with the system by which the prescriber or dispenser receives information as authorized under Section 481.076(a)(5).

Sec. 481.0764. DUTIES OF PRESCRIBERS, PHARMACISTS, AND RELATED HEALTH CARE PRACTITIONERS. (a) A person authorized to receive information under Section 481.076(a)(5), other than a veterinarian, shall access that information with respect to the patient before prescribing or dispensing opioids, benzodiazepines, barbiturates, or carisoprodol.

(b) A person authorized to receive information under Section 481.076(a)(5) may access that information with respect to the patient before prescribing or dispensing any controlled substance.

(c) A veterinarian authorized to access information under Subsection (b) regarding a controlled substance may access the

information for prescriptions dispensed only for the animals of an owner and may not consider the personal prescription history of the owner.

(d) A violation of Subsection (a) is grounds for disciplinary action by the regulatory agency that issued a license, certification, or registration to the person who committed the violation.

(e) This section does not grant a person the authority to issue prescriptions for or dispense controlled substances.

Sec. 481.0765. EXCEPTIONS. (a) A prescriber is not subject to the requirements of Section 481.0764(a) if:

(1) the patient has been diagnosed with cancer or the patient is receiving hospice care; and

(2) the prescriber clearly notes in the prescription record that the patient was diagnosed with cancer or is receiving hospice care, as applicable.

(b) A dispenser is not subject to the requirements of Section 481.0764(a) if it is clearly noted in the prescription record that the patient has been diagnosed with cancer or is receiving hospice care.

(c) A prescriber or dispenser is not subject to the requirements of Section 481.0764(a) and a dispenser is not subject to a rule adopted under Section 481.0761(j) if the prescriber or dispenser makes a good faith attempt to comply but is unable to access the information under Section 481.076(a)(5) because of circumstances outside the control of the prescriber or dispenser.

(5) In SECTION 4 of the bill, in the heading to added Section 481.0764, Health and Safety Code (page 2, line 28), strike "<u>481.0764</u>" and substitute "<u>481.0766</u>".

(6) Strike SECTION 17 of the bill (page 5, lines 30 through32) and substitute the following appropriately numbered SECTION:

SECTION ____. Section 481.0764(a), Health and Safety Code, as added by this Act, applies only to:

(1) a prescriber other than a veterinarian who issuesa prescription for a controlled substance on or after September 1,2019; or

(2) a person authorized by law to dispense a

controlled substance other than a veterinarian who dispenses a controlled substance on or after September 1, 2019.

(7) Add the following appropriately numbered SECTIONS to the bill and renumber subsequent sections of the bill accordingly:

SECTION ____. Section 481.003(a), Health and Safety Code, is amended to read as follows:

(a) The director may adopt rules to administer and enforce this chapter, other than Sections 481.073, 481.074, 481.075, 481.076, [and] 481.0761, 481.0762, 481.0763, 481.0764, 481.0765, and 481.0766. The board may adopt rules to administer Sections 481.073, 481.074, 481.075, 481.076, [and] 481.0761, 481.0762, 481.0763, 481.0764, 481.0765, and 481.0766.

SECTION ____. Sections 481.076(a) and (d), Health and Safety Code, are amended to read as follows:

(a) The board may not permit any person to have access to information submitted to the board under Section 481.074(q) or 481.075 except:

(1) [an investigator for] the board, the Texas Medical Board, the Texas State Board of Podiatric Medical Examiners, the State Board of Dental Examiners, the State Board of Veterinary Medical Examiners, the Texas Board of Nursing, or the Texas Optometry Board <u>for the purpose of:</u>

(A) investigating a specific license holder; or (B) monitoring for potentially harmful prescribing or dispensing patterns or practices under Section 481.0762;

(2) an authorized officer or member of the department or authorized employee of the board engaged in the administration, investigation, or enforcement of this chapter or another law governing illicit drugs in this state or another state;

(3) the department on behalf of a law enforcement or prosecutorial official engaged in the administration, investigation, or enforcement of this chapter or another law governing illicit drugs in this state or another state;

(4) a medical examiner conducting an investigation;

(5) provided that accessing the information is authorized under the Health Insurance Portability and

Accountability Act of 1996 (Pub. L. No. 104-191) and regulations adopted under that Act:

(A) a pharmacist or a pharmacy technician, as defined by Section 551.003, Occupations Code, acting at the direction of a pharmacist; or

(B) a practitioner who:

(i) is a physician, dentist, veterinarian, podiatrist, optometrist, or advanced practice nurse or is a physician assistant described by Section 481.002(39)(D) or an employee or other agent of a practitioner acting at the direction of a practitioner; and

(ii) is inquiring about a recent Schedule II, III, IV, or V prescription history of a particular patient of the practitioner[, provided that the person accessing the information is authorized to do so under the Health Insurance Portability and Accountability Act of 1996 (Pub. L. No. 104-191) and rules adopted under that Act];

(6) a pharmacist or practitioner who is inquiring about the person's own dispensing or prescribing activity; or

(7) one or more states or an association of states with which the board has an interoperability agreement, as provided by Subsection (j).

(d) Information submitted to the board under this section may be used only for:

(1) the administration, investigation, or enforcement of this chapter or another law governing illicit drugs in this state or another state;

(2) investigatory, [or] evidentiary, or monitoring
purposes in connection with the functions of an agency listed in
Subsection (a)(1);

(3) the prescribing and dispensing of controlled substances by a person listed in Subsection (a)(5); or

(4) [(3)] dissemination by the board to the public in the form of a statistical tabulation or report if all information reasonably likely to reveal the identity of each patient, practitioner, or other person who is a subject of the information has been removed.

SECTION ____. Section 554.051(a-1), Occupations Code, is amended to read as follows:

(a-1) The board may adopt rules to administer Sections
481.073, 481.074, 481.075, 481.076, [and] 481.0761, 481.0762,
481.0763, 481.0764, 481.0765, and 481.0766, Health and Safety Code.

SECTION ____. (a) A joint interim committee is created to conduct an interim study on the monitoring of the prescribing and dispensing of controlled substances in this state.

(b) The joint interim committee shall be composed of three senators appointed by the lieutenant governor and three members of the house of representatives appointed by the speaker of the house of representatives.

(c) The lieutenant governor and speaker of the house of representatives shall each designate a co-chair from among the joint interim committee members.

(d) The joint interim committee shall convene at the joint call of the co-chairs.

(e) The joint interim committee has all other powers and duties provided to a special or select committee by the rules of the senate and house of representatives, by Subchapter B, Chapter 301, Government Code, and by policies of the senate and house committees on administration.

(f) The interim study conducted by the joint interim committee must:

(1) include the number of prescribers and dispensersregistered to receive information electronically under Section481.076, Health and Safety Code, as amended by this Act;

(2) evaluate the accessing of information under Section 481.076, Health and Safety Code, as amended by this Act, by regulatory agencies to monitor persons issued a license, certification, or registration by those agencies;

(3) address any complaints, technical difficulties, or other issues with electronically accessing and receiving information under Section 481.076, Health and Safety Code, as amended by this Act;

(4) examine controlled substance prescribing and dispensing trends that may be affected by the passage and

implementation of this Act;

(5) evaluate the use and effectiveness of electronicnotifications sent to prescribers and dispensers under Sections481.0761(i) and (k), Health and Safety Code, as added by this Act;

(6) evaluate the use and effectiveness of identifyinggeographic anomalies in comparing delivery and dispensing data;

(7) evaluate the integration of any new data elementsrequired to be reported under this Act;

(8) evaluate the existence and scope of diversion of controlled substances by animal owners to whom the substances are dispensed by veterinarians;

(9) explore the best methods for preventing the diversion of controlled substances by animal owners; and

(10) determine how any future reporting by dispensing veterinarians might best be tailored to fit the practice of veterinary medicine.

(g) The committee shall solicit feedback from regulatory agencies, prescribers, dispensers, and patients affected by the passage of this Act.

(h) The committee shall submit a report to the legislature on the results of the interim study, including any legislative recommendations for improvements to information access and controlled substance prescription monitoring, not later than January 1, 2019.

(i) Subject to available resources, the Texas Legislative Council shall provide legal and policy research, drafts of proposed legislation, and statistical analysis services to the joint interim committee for the purpose of the study required under this section.

(j) Notwithstanding Section 481.076, Health and Safety Code, as amended by this Act, or any other law relating to access to or disclosure of prescription drug information maintained by the Texas State Board of Pharmacy, the Texas State Board of Pharmacy shall disclose any information maintained by the board under Section 481.076, Health and Safety Code, to the Texas Legislative Council on request of the council for the purpose of assisting with the study required under this section.

(k) Not later than November 1, 2017, the lieutenant governor

and speaker of the house of representatives shall appoint the members of the joint interim committee in accordance with this section.

(1) The joint interim committee created under this section is abolished and this section expires January 2, 2019.