2019 LEGISLATIVE UPDATE

LARRY MARX

DOPL
HB 16 FRAUDULENT DRUG TESTING AMENDMENTS
REP. ELIASON

• MAKES IT A CRIMINAL OFFENSE TO DISTRIBUTE, POSSESS, OR SELL AN ADULTERANT OR SYNTHETIC URINE
HB 169 SUBSTANCE USE DISORDER TREATMENT
REP. DAILY-PROVOST

• EXEMPTS A PRESCRIBER FROM THE REQUIREMENT TO CHECK THE CONTROLLED SUBSTANCE DATABASE WHEN PRESCRIBING BUPRENORPHINE TO A PATIENT.

• (2) (A) A PRESCRIBER SHALL CHECK THE DATABASE FOR INFORMATION ABOUT A PATIENT BEFORE THE FIRST TIME THE PRESCRIBER GIVES A PRESCRIPTION TO A PATIENT FOR A SCHEDULE II OPIOID OR A SCHEDULE III OPIOID.

• (B) IF A PRESCRIBER IS REPEATEDLY PRESCRIBING A SCHEDULE II OPIOID OR SCHEDULE III OPIOID TO A PATIENT, THE PRESCRIBER SHALL PERIODICALLY REVIEW INFORMATION ABOUT THE PATIENT IN:
  (I) THE DATABASE; OR
  (II) OTHER SIMILAR RECORDS OF CONTROLLED SUBSTANCES THE PATIENT HAS FILLED.

• (C) A PRESCRIBER IS NOT SUBJECT TO THE REQUIREMENTS IN SUBSECTION (2)(A) OR (B) WHEN PRESCRIBING BUPRENORPHINE TO A PATIENT.
6) The Division may consult with a prescriber or health care system to assist the prescriber or health care system in following evidence-based guidelines regarding the prescribing of controlled substances, including the recommendations listed in subsection (5)(A).

(2) (A) When the Division receives a report from the Medical Examiner under section 26-4-10.5 regarding a death caused by poisoning or overdose involving a prescribed controlled substance, for each practitioner identified by the Medical Examiner under subsection 26-4-10.5(1)(C), the Division:

(I) shall, within five business days after the day on which the Division receives the report, provide the practitioner with a copy of the report; and

(II) may offer the practitioner an educational visit to review the report.

(B) A practitioner may decline an educational visit described in subsection (2)(A)(II).

(C) The Division may not use, in a licensing investigation or action by the Division:

(I) information from an educational visit described in subsection (2)(A)(II); or

(II) a practitioner’s decision to decline an educational visit described in subsection(2)(A)(II).
HB 191 CONTROLLED SUBSTANCE ABUSE
REP. ELIASON


(2) EXCEPT AS PROVIDED IN SUBSECTION (3), A PRESCRIBER MAY NOT ISSUE AN INITIAL OPIATE PRESCRIPTION WITHOUT DISCUSSING WITH THE PATIENT, OR THE PATIENT'S PARENT OR GUARDIAN IF THE PATIENT IS UNDER 18 YEARS OF AGE AND IS NOT AN EMANCIPATED MINOR:

(A) THE RISKS OF ADDICTION AND OVERDOSE ASSOCIATED WITH OPIATE DRUGS;
(B) THE DANGERS OF TAKING OPIATES WITH ALCOHOL, BENZODIAZEPINES, AND OTHER CENTRAL NERVOUS SYSTEM DEPRESSANTS;
(C) THE REASONS WHY THE PRESCRIPTION IS NECESSARY;
(D) ALTERNATIVE TREATMENTS THAT MAY BE AVAILABLE; AND
(E) OTHER RISKS ASSOCIATED WITH THE USE OF THE DRUGS BEING PRESCRIBED.
HB 251 DRUG DIVERSION REPORTING
REP. ELIASON

• 76-10-2203. DUTY TO REPORT DRUG DIVERSION.

• (2) AN INDIVIDUAL IS GUILTY OF A CLASS B MISDEMEANOR IF THE INDIVIDUAL:
  (A) KNOWS THAT A PRACTITIONER IS INVOLVED IN DIVERSION; AND
  (B) KNOWINGLY FAILS TO REPORT THE DIVERSION TO A PEACE OFFICER OR LAW
  ENFORCEMENT AGENCY.

(3) SUBSECTION (2) DOES NOT APPLY TO THE EXTENT THAT AN INDIVIDUAL IS PROHIBITED
FROM REPORTING BY 42 C.F.R. PART 2 OR HIPAA.
HB 393 SUICIDE PREVENTION
REP. ELIASON

• REQUIRES THE DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSING, IN CONJUNCTION WITH THE DIVISION OF SUBSTANCE ABUSE AND MENTAL HEALTH, TO CREATE A SUICIDE PREVENTION WEB-ACCESSIBLE VIDEO

• 58-1-601. SUICIDE PREVENTION VIDEO -- PRIMARY CARE PROVIDERS.
  (1) AS USED IN THIS SECTION:
  (A) "NURSE PRACTITIONER" MEANS AN INDIVIDUAL WHO IS LICENSED TO PRACTICE AS AN ADVANCED PRACTICE REGISTERED NURSE UNDER CHAPTER 31B, NURSE PRACTICE ACT.
  (B) "PHYSICIAN" MEANS AN INDIVIDUAL LICENSED TO PRACTICE AS A PHYSICIAN OR OSTEOPATH UNDER CHAPTER 67, UTAH MEDICAL PRACTICE ACT, OR CHAPTER 68, UTAH OSTEOPATHIC MEDICAL PRACTICE ACT.
  (C) "PHYSICIAN ASSISTANT" MEANS AN INDIVIDUAL WHO IS LICENSED TO PRACTICE AS A PHYSICIAN ASSISTANT UNDER CHAPTER 70A, PHYSICIAN ASSISTANT ACT.

• SERIES OF VIDEOS NO LONGER THAN 20 MINUTES ON DOPL WEBSITE
SB 188 CONSENT FOR MEDICAL PROCEDURE

• 58-1-509. PATIENT CONSENT FOR CERTAIN MEDICAL EXAMINATIONS.

• EXAMINATION OF A PATIENT’S SEXUAL ORGANS WHILE ANESTHETIZED REQUIRES INFORMED CONSENT

• HEADING AT THE TOP OF THE DOCUMENT IN NOT SMALLER THAN 18-POINT BOLD FACE TYPE (LARRY, DID YOU MEAN TO INCLUDE THIS SENTENCE ABOUT THE HEADING?): "CONSENT FOR EXAMINATION OF PELVIC REGION"