REGULAR SESSION 2019

## MISSISSIPPI LEGISLATURE

By: Representative Crawford

To: Public Health and Human Services

## HOUSE BILL NO. 1073

AN ACT TO AMEND SECTION 41-29-137, MISSISSIPPI CODE OF 1972,
TO REQUIRE THE PRESCRIBER OF A SCHEDULE II CONTROLLED SUBSTANCE OR
ANY OTHER OPIOID DRUG, BEFORE ISSUING THE INITIAL PRESCRIPTION IN
A COURSE OF TREATMENT FOR ACUTE OR CHRONIC PAIN AND AGAIN BEFORE
ISSUING THE THIRD PRESCRIPTION OF THE COURSE OF TREATMENT, TO
DISCUSS WITH THE PATIENT THE RISKS ASSOCIATED WITH THE DRUG BEING
PRESCRIBED AND ALTERNATIVE TREATMENTS THAT MAY BE AVAILABLE; AND
FOR RELATED PURPOSES.

- 9 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:
- 10 **SECTION 1.** Section 41-29-137, Mississippi Code of 1972, is
- 11 amended as follows:
- 12 41-29-137. (a) (1) Except when dispensed directly by a
- 13 practitioner, other than a pharmacy, to an ultimate user, no
- 14 controlled substance in Schedule II, as set out in Section
- 15 41-29-115, may be dispensed without the written valid prescription
- 16 of a practitioner. A practitioner shall keep a record of all
- 17 controlled substances in Schedule I, II and III administered,
- 18 dispensed or professionally used by him otherwise than by

- 19 prescription.
- 20 (2) In emergency situations, as defined by rule of the
- 21 State Board of Pharmacy, Schedule II drugs may be dispensed upon

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- 22 the oral valid prescription of a practitioner, reduced promptly to
- 23 writing and filed by the pharmacy. Prescriptions shall be
- 24 retained in conformity with the requirements of Section 41-29-133.
- 25 No prescription for a Schedule II substance may be refilled unless
- 26 renewed by prescription issued by a licensed medical doctor.
- 27 (b) Except when dispensed directly by a practitioner, other
- 28 than a pharmacy, to an ultimate user, a controlled substance
- 29 included in Schedule III or IV, as set out in Sections 41-29-117
- 30 and 41-29-119, shall not be dispensed without a written or oral
- 31 valid prescription of a practitioner. The prescription shall not
- 32 be filled or refilled more than six (6) months after the date
- 33 thereof or be refilled more than five (5) times, unless renewed by
- 34 the practitioner.
- 35 (c) A controlled substance included in Schedule V, as set
- 36 out in Section 41-29-121, shall not be distributed or dispensed
- 37 other than for a medical purpose.
- 38 (d) An optometrist certified to prescribe and use
- 39 therapeutic pharmaceutical agents under Sections 73-19-153 through
- 40 73-19-165 shall be authorized to prescribe oral analgesic
- 41 controlled substances in Schedule IV or V, as pertains to
- 42 treatment and management of eye disease by written prescription
- 43 only.
- 44 (e) Administration by injection of any pharmaceutical
- 45 product authorized in this section is expressly prohibited except
- 46 when dispensed directly by a practitioner other than a pharmacy.

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- 47 (f) (1) For the purposes of this article, Title 73, Chapter
- 48 21, and Title 73, Chapter 25, Mississippi Code of 1972, as it
- 49 pertains to prescriptions for controlled substances, a "valid
- 50 prescription" means a prescription that is issued for a legitimate
- 51 medical purpose in the usual course of professional practice by:
- 52 (A) A practitioner who has conducted at least one
- 53 (1) in-person medical evaluation of the patient; or
- 54 (B) A covering practitioner.
- (2) (A) "In-person medical evaluation" means a medical
- 56 evaluation that is conducted with the patient in the physical
- 57 presence of the practitioner, without regard to whether portions
- of the evaluation are conducted by other health professionals.
- (B) "Covering practitioner" means a practitioner
- 60 who conducts a medical evaluation other than an in-person medical
- 61 evaluation at the request of a practitioner who has conducted at
- 62 least one (1) in-person medical evaluation of the patient or an
- 63 evaluation of the patient through the practice of telemedicine
- 64 within the previous twenty-four (24) months and who is temporarily
- 65 unavailable to conduct the evaluation of the patient.
- 66 (3) A prescription for a controlled substance based
- 67 solely on a consumer's completion of an online medical
- 68 questionnaire is not a valid prescription.
- 69 (4) Nothing in this subsection ( \* \* \*f) shall apply
- 70 to:

71	(A) A prescription issued by a practitioner
72	engaged in the practice of telemedicine as authorized under state
73	or federal law; or
74	(B) The dispensing or selling of a controlled
75	substance pursuant to practices as determined by the United States
76	Attorney General by regulation.
77	(g) Before issuing the initial prescription of a Schedule II
78	controlled substance or any other opioid drug that is a
79	prescription drug in a course of treatment for acute or chronic
80	pain and again before issuing the third prescription of the course
81	of treatment, a practitioner shall discuss with the patient, or
82	the patient's parent or guardian if the patient is under eighteen
83	(18) years of age and is not an emancipated minor, the risks
84	associated with the drugs being prescribed, including but not
85	<pre>limited to:</pre>
86	(1) The risks of addiction and overdose associated with
87	opioid drugs and the dangers of taking opioid drugs with alcohol,
88	benzodiazepines and other central nervous system depressants;
89	(2) The reasons why the prescription is necessary;
90	(3) Alternative treatments that may be available; and
91	(4) Risks associated with the use of the drugs being
92	prescribed, specifically that opioids are highly addictive, even
93	when taken as prescribed, that there is a risk of developing a
94	physical or psychological dependence on the controlled substance,
95	and that the risks of taking more opioids than prescribed, or

96	mixing sedatives, benzodiazepines or alcohol with opioids, can
97	result in fatal respiratory depression.
98	The practitioner shall include a note in the patient's
99	medical record that the patient or the patient's parent or
100	guardian, as applicable, has discussed with the practitioner the
101	risks of developing a physical or psychological dependence on the
102	controlled substance and alternative treatments that may be
103	available.
104	SECTION 2. This act shall take effect and be in force from
105	and after July 1, 2019.