Senate Bill 121
By: Senators Walker III of the 20th, Stone of the 23rd, Hufstetler of the 52nd, Burke of the 11th, Unterman of the 45th and others

AS PASSED

A BILL TO BE ENTITLED
AN ACT

To amend Part 2 of Article 2 of Chapter 13 of Title 16 of the Official Code of Georgia Annotated, relating to the prescription drug monitoring program data base, so as to increase the length of time that prescription information is retained in the data base from two years to five years; to authorize the Attorney General's Medicaid Fraud Control Unit to access the data base for enforcement purposes; to provide for related matters; to repeal conflicting laws; and for other purposes.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

SECTION 1.
Part 2 of Article 2 of Chapter 13 of Title 16 of the Official Code of Georgia Annotated, relating to the prescription drug monitoring program data base, is amended by revising subsection (e) of Code Section 16-13-59, relating to information to include for each Schedule II, III, IV, or V controlled substance prescription and compliance, as follows:

“(e) The department shall not access or allow others to access any identifying prescription information from the PDMP after five years from the date such information was originally received by the department. The department may retain prescription information that has been processed to remove personal identifiers from the health information in compliance with the standard and implementation rules of the federal Health Insurance Portability and Accountability Act (HIPAA) of 1996, P.L. 104-191, for more than five years but shall promulgate regulations and procedures that will ensure that any identifying information the department receives from any dispenser or reporting entity that is five years old or older is deleted or destroyed on an ongoing basis in a timely and secure manner.”
SECTION 2.

Said part is further amended by revising subsection (c) of Code Section 16-13-60, relating to privacy and confidentiality, use of data, and security program for the prescription drug monitoring program data base, as follows:

“(c) The department shall be authorized to provide requested prescription information collected pursuant to this part only as follows:

1. To persons authorized to prescribe or dispense controlled substances for the sole purpose of providing medical or pharmaceutical care to a specific patient;
2. Upon the request of a patient, prescriber, or dispenser about whom the prescription information requested concerns or upon the request on his or her behalf of his or her attorney;
3. To local or state law enforcement or prosecutorial officials pursuant to the issuance of a search warrant from an appropriate court or official in the county in which the office of such law enforcement or prosecutorial officials are located; or to federal law enforcement or prosecutorial officials as allowed by federal law by the issuance of a search warrant, a grand jury subpoena, an administrative subpoena, or a civil investigative demand; or to the Attorney General's Medicaid Fraud Control Unit by the issuance of an administrative subpoena;
4. To the agency, the Georgia Composite Medical Board or any other state regulatory board governing prescribers or dispensers in this state, or the Department of Community Health for purposes of the state Medicaid program, for health oversight purposes, or upon the issuance of a subpoena by such agency, board, or Department of Community Health pursuant to their existing subpoena power or to the federal Centers for Medicare and Medicaid Services upon the issuance of a subpoena by the federal government pursuant to its existing subpoena power;
5. (A) To not more than two individuals who are members per shift or rotation of the prescriber's or dispenser's staff;
   (B) Such individuals may retrieve and review such information strictly for the purpose of:
      (i) Providing medical or pharmaceutical care to a specific patient; or
      (ii) Informing the prescriber or dispenser of a patient's potential use, misuse, abuse, or underutilization of prescribed medication;
   (C) All information retrieved and reviewed by such individuals shall be maintained in a secure and confidential manner in accordance with the requirements of subsection (f) of this Code section; and
   (D) The delegating prescriber or dispenser may be held civilly liable and criminally responsible for the misuse of the prescription information obtained by such individuals;
(6) To not more than two individuals, per shift or rotation, who are employed or contracted by the health care facility in which the prescriber is practicing so long as the medical director of such health care facility has authorized the particular individuals for such access;

(7) In any hospital which provides emergency services, each prescriber may designate two individuals, per shift or rotation, who are employed or contracted by such hospital so long as the medical director of such hospital has authorized the particular individuals for such access; and

(8) To a prescription drug monitoring program operated by a government entity in another state or an electronic medical records system operated by a prescriber or health care facility, provided the program or system, as determined by the department, contains legal, administrative, technical, and physical safeguards that meet or exceed the security measures of the department for the operation of the PDMP pursuant to this part.”

SECTION 3.

All laws and parts of laws in conflict with this Act are repealed.