1   SB86

2   197387-3

3   By Senator Jones

4   RFD: Healthcare

5   First Read: 04-FEB-20

6   PFD: 02/03/2020

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8   SYNOPSIS: This bill would require each controlled

9   substances certifying board to adopt strategies for

10   mitigating abuse and diversion of controlled

11   substances that include opiate risk education of

12   the patient by the practitioner.

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14   A BILL

15   TO BE ENTITLED

16   AN ACT

17

18   To require each controlled substances certifying

19   board to adopt strategies for mitigating abuse and diversion

20   of controlled substances that include opiate risk education of

21   the patient by the practitioner.

22   BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:

23   Section 1. This act shall be known and may be cited

24   as the Patient Opiate Risk Education Act.

25   Section 2. (a) For the purposes of this act, the

26   following words have the following meanings:

1   (1) CONTROLLED SUBSTANCE. As defined in Section

2   20-2-2, Code of Alabama 1975.

3   (2) CONTROLLED SUBSTANCES CERTIFYING BOARD. Any

4   board of this state that certifies a practitioner to prescribe

5   controlled substances.

6   (3) PRACTITIONER. A health care professional

7   certified to prescribe controlled substances in the course of

8   his or her professional practice. The term practitioner does

9   not include a veterinarian licensed by the Board of Veterinary

10   Medical Examiners.

11   Section 3. (a) Each controlled substances certifying

12   board shall adopt rules regarding practitioner strategies for

13   mitigating abuse and diversion of controlled substances. The

14   rules shall include opiate risk education of the patient by

15   the practitioner. Opiate risk education includes, but is not

16   limited to all of the following:

17   (1) Information on the risks of addiction and

18   overdose associated with opioid drugs and the dangers of

19   taking opioid drugs and alcohol, benzodiazepines, and other

20   central nervous system depressants.

21   (2) The reasons why the prescription given is

22   necessary.

23   (3) Alternative treatment that may be available.

24   (4) Information on the risks associated with the use

25   of the drugs being prescribed, specifically that opioids are

26   highly addictive, even when taken as prescribed, that there is

27   a risk of developing a physical or psychological dependence on

1   the controlled substance, and that the risks of taking more

2   opioids than prescribed, or mixing sedatives, benzodiazepines,

3   or alcohol with opioids may result in fatal respiratory

4   depression.

5   (b) The practitioner may require a written

6   acknowledgement or agreement from the patient, or the parent

7   or guardian of the patient if the patient is under 18 years of

8   age and is not an emancipated minor, that the patient

9   understands the risks of developing a physical or

10   psychological dependence on the controlled substance

11   prescribed.

12   (c) Each controlled substances certifying board

13   shall develop and make available to practitioners on its

14   website a sample patient acknowledgement form.

15   (d) Nothing in this act shall require a practitioner

16   to maintain any written record of any opiate risk education.

17   (e) A controlled substances certifying board may

18   develop opiate risk education protocols for the purposes of

19   this act.

20   Section 4. These rules shall not constitute

21   standards of, nor be construed as evidence for, the practice

22   of medicine. Nothing in this act shall modify, amend, repeal,

23   or supersede any provision of Section 6-5-333, Code of Alabama

24   1975, or the "Alabama Medical Liability Act of 1987"

25   commencing with Section 6-5-540, Code of Alabama 1975, or the

26   Alabama Medical Liability Act of 1996, commencing with Section

27   6-5-548, Code of Alabama 1975, or any amendment to any of the

1   foregoing, or any judicial interpretation of any of the

2   foregoing. Evidence of compliance or noncompliance with this

3   act shall not be admissible to prove the negligence of any

4   party in any civil action.

5   Section 5. This act shall become effective on the

6   first day of the third month following its passage, or its

7   otherwise becoming law.