



# 130th MAINE LEGISLATURE

## FIRST REGULAR SESSION-2021

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Legislative Document

No. 330

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H.P. 234

House of Representatives, February 8, 2021

### **An Act To Prevent Accidental Overdoses by Establishing a Protocol for Prescription Drug Recovery**

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Received by the Clerk of the House on February 4, 2021. Referred to the Committee on Health and Human Services pursuant to Joint Rule 308.2 and ordered printed pursuant to Joint Rule 401.

A handwritten signature in black ink that reads "R B. Hunt".

ROBERT B. HUNT  
Clerk

Presented by Representative GRAMLICH of Old Orchard Beach.  
Cosponsored by Senator CARNEY of Cumberland and  
Representatives: CRAVEN of Lewiston, EVANS of Dover-Foxcroft, KESSLER of South  
Portland, McCREA of Fort Fairfield, MEYER of Eliot, O'CONNOR of Berwick, PERRY of  
Calais, ZAGER of Portland.

1 **Be it enacted by the People of the State of Maine as follows:**

2 **Sec. 1. 22 MRSA §7246, sub-§2**, as repealed and replaced by PL 2017, c. 360, §1,  
3 is amended to read:

4 **2. Dispenser.** "Dispenser" means:

5 A. A pharmacist who is licensed or registered under Title 32; or

6 B. A veterinarian licensed under Title 32, chapter 71-A with authority to dispense a  
7 benzodiazepine or an opioid medication; or

8 C. An administering provider as defined in section 7351, subsection 1, paragraph A.

9 **Sec. 2. 22 MRSA §7249, sub-§1**, as amended by PL 2017, c. 360, §3, is further  
10 amended to read:

11 **1. Information required.** Except as provided in subsection 1-A ~~or~~ 1-B or 1-C, each  
12 dispenser shall submit to the department, by electronic means or other format specified in  
13 a waiver granted by the department, specific items of information regarding dispensed  
14 controlled substances determined by the department from the following list:

15 A. The dispenser identification number;

16 B. The date the prescription was filled;

17 C. The prescription number;

18 D. Whether the prescription is new or is a refill;

19 E. The National Drug Code (NDC) for the drug dispensed;

20 F. The quantity dispensed;

21 G. The dosage;

22 H. The patient identification number;

23 I. The patient name;

24 J. The patient address;

25 K. The patient date of birth;

26 L. The prescriber identification number;

27 M. The date the prescription was issued by the prescriber; and

28 N. The department-issued serial number if the department chooses to establish a serial  
29 prescription system.

30 **Sec. 3. 22 MRSA §7249, sub-§1-C** is enacted to read:

31 **1-C. Dispensing by administering providers.** If a controlled substance is dispensed  
32 by an administering provider, as defined in section 7351, subsection 1, paragraph A, that  
33 administering provider is required to provide only the information required by subsection  
34 1, paragraphs B, D and F to K.

35 **Sec. 4. 22 MRSA c. 1627** is enacted to read:

36 **CHAPTER 1627**

1 **MONITORING, CONTAINMENT AND DISPOSAL OF CONTROLLED**  
2 **SUBSTANCES**

3 **§7351. Monitoring, containment and disposal of controlled substances**

4 A provider that administers a controlled substance to an adult with long-term care needs  
5 is subject to the requirements of this section.

6 **1. Definitions.** As used in this section, unless the context otherwise indicates, the  
7 following terms have the following meanings.

8 A. "Administering provider" means a provider that administers a controlled substance,  
9 pursuant to a prescription, to a client-patient. "Administering provider" includes an  
10 employee or contractor of a provider but does not include a family member of the  
11 client-patient.

12 B. "Client-patient" means an adult with long-term care needs to whom an  
13 administering provider administers a controlled substance.

14 C. "Controlled substance" has the same meaning as in section 7246, subsection 1.

15 **2. Monitoring.** An administering provider shall document the quantity and strength  
16 of any controlled substance obtained for a client-patient. The administering provider shall  
17 comply with the requirements of the Controlled Substances Prescription Monitoring  
18 Program established under Title 22, section 7248, including the reporting requirements of  
19 section 7249, subsection 1, as limited by section 7249, subsection 1-C.

20 **3. Containment.** An administering provider shall keep any controlled substances  
21 prescribed and obtained for a client-patient in a locked container to which only the  
22 administering provider, the client-patient and, if there is one, a designated caregiver have  
23 access.

24 **4. Retrieval and disposal of controlled substances; documentation; reporting.**  
25 Upon the death of a client-patient for whom the administering provider was providing in-  
26 home and community support services immediately prior to that client-patient's death, the  
27 administering provider shall collect all unused controlled substances that were prescribed  
28 and obtained for the client-patient. The administering provider shall document the  
29 controlled substances collected, including the National Drug Code, quantity and strength  
30 of each controlled substance, properly dispose of the collected controlled substances and  
31 document the manner of disposal. Following disposal, the administering provider shall  
32 provide all documentation performed pursuant to this subsection to the department in the  
33 same manner as information is provided to the department pursuant to section 7249,  
34 subsection 1.

35 **5. Development of written policy; submission for review.** Each administering  
36 provider shall develop a written policy for how that administering provider will document,  
37 collect and dispose of controlled substances in compliance with the requirements of this  
38 chapter. The administering provider shall submit the policy, including any changes made  
39 to the policy subsequent to initial submission, to the department for review.

40 **6. Rulemaking.** The department shall adopt routine technical rules, pursuant to Title  
41 5, chapter 375, subchapter 2-A, to implement the provisions of this chapter, including  
42 providing guidance for methods of proper disposal of controlled substances collected  
43 pursuant to subsection 4.

1 **SUMMARY**

2 This bill seeks to reduce accidental overdose deaths caused by access to unused  
3 controlled substances by:

4 1. Requiring an entity, agency, facility or individual who offers or plans to offer any  
5 in-home or community support services or institutionally based long-term care services and  
6 who administers a controlled substance to an adult with long-term care needs as part of  
7 those services, referred to in the bill as "an administering provider," to document any  
8 controlled substance prescribed and obtained for the adult with long-term care needs,  
9 referred to in the bill as "the client-patient," and to participate in the Controlled Substances  
10 Prescription Monitoring Program under the Maine Revised Statutes, Title 22, chapter 1603,  
11 with certain exceptions;

12 2. Requiring that all controlled substances be kept in a locked container to which only  
13 the administering provider, the client-patient and, if there is one, a designated caregiver  
14 have access; and

15 3. Requiring the administering provider, upon the death of the client-patient, to collect  
16 any unused controlled substances that were prescribed and obtained for that client-patient  
17 and dispose of them properly after documenting the National Drug Code, quantity and  
18 strength. The administering provider is required to submit this documentation, including  
19 the manner of disposal of the controlled substances collected from the deceased client-  
20 patient, to the Department of Health and Human Services using the reporting system  
21 established in the Controlled Substances Prescription Monitoring Program under the Maine  
22 Revised Statutes, Title 22, chapter 1603.