

Legislative Analysis



REVISE WHO CAN ACCESS ELECTRONIC DATA SYSTEM FOR CONTROLLED SUBSTANCES

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House Bill 5735

Sponsor: Rep. Lesia Liss

Committee: Health Policy

Complete to 6-21-10

A SUMMARY OF HOUSE BILL 5735 AS INTRODUCED 1-13-10

The bill would require the Department of Community Health to give direct access to data relating to the dispensing and prescribing of certain controlled substances to health insurance carriers and similar entities.

The Department of Community Health (DCH) maintains an electronic system for monitoring Schedule 2, 3, 4, and 5 controlled substances that are dispensed by veterinarians and licensed pharmacists and dispensing prescribers. The data collected includes patient identifiers, the name and quantity of the controlled substance dispensed, the date dispensed, and the name of the prescriber and dispenser. The director of the DCH is authorized by statute to provide data obtained by the electronic monitoring system to the licensing boards of those authorized to prescribe, administer, or dispense controlled substances; departmental employees; law enforcement officials who enforce drug laws; a state-operated Medicaid program; governmental employees who hold a search warrant or subpoena for the records; a practitioner or pharmacist who requests information for the purpose of providing medical or pharmaceutical treatment to a current patient; or an individual under contract to administer the electronic monitoring system.

House Bill 5735 would amend the Public Health Code (MCL 333.7333a) to require, on or before January 1, 2010, and notwithstanding any practitioner-patient privilege, the director of the DCH to provide direct access to the electronic monitoring system to health care payment or benefit providers for the purposes of ensuring patient safety and investigating fraud and abuse.

"Health care payment or benefit providers" would mean a person providing health benefits, coverage, or insurance in the state. The term would include a health insurance company, a nonprofit health care corporation (BCBSM), an HMO, a multiple employer welfare arrangement, a Medicaid contracted health plan, or any other person providing a plan of health benefits, coverage, or insurance subject to state insurance regulation.

The bill would also delete an obsolete provision requiring a report by October 1, 2002 on the need for a paper prescription form that would minimize the potential for forgery.

FISCAL IMPACT:

Costs related to House Bill 5735 as introduced include modifications needed to the electronic MAPS database system to meet the access requirements of the bill, and costs related to maintaining access and user support.

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