RELATING TO PRESCRIPTIONS.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAI'I:

SECTION 1. Section 329-38, Hawaii Revised Statutes, is amended by amending subsections (b) and (c) to read as follows:

"(b) A schedule II controlled substance prescription shall:

(1) Be filled within seven days following the date the prescription was issued to the patient; and

(2) Be supplied to a patient only if the prescription has been filled and held by the pharmacy for not more than seven days; provided that a prescription issued to a qualified patient pursuant to chapter 327L shall be supplied to the patient if the prescription has been filled and held by the pharmacy for not more than thirty days.

(c) Initial concurrent prescriptions for opioids and benzodiazepines shall not be for longer than seven consecutive days unless the prescription is issued for a qualified patient pursuant to chapter 327L or a supply of longer than seven days is determined to be medically necessary for the treatment of:
(1) Pain experienced while the patient is in post-operative care;
(2) Chronic pain and pain management;
(3) Substance abuse or opioid or opiate dependence;
(4) Cancer;
(5) Pain experienced while the patient is in palliative care; or
(6) Pain experienced while the patient is in hospice care;

provided that if a prescribing practitioner issues a concurrent prescription for more than a seven-day supply of an opioid and benzodiazepine, the practitioner shall document in the patient's medical record the condition for which the practitioner issued the prescription and that an alternative to the opioid and benzodiazepine was not appropriate treatment for the condition.

SECTION 2. Section 329-38.2, Hawaii Revised Statutes, is amended by amending subsection (b) to read as follows:
"(b) No prescriber shall prescribe a schedule II, III, or IV controlled substance without first requesting, receiving, and considering records of the ultimate user from the state electronic prescription accountability system as needed to reduce the risk of abuse of or addiction to a controlled
substance, as needed to avoid harmful drug interactions, or as otherwise medically necessary; provided that this subsection shall not apply to:

1. Any prescription for a supply of three days or less that is made in an emergency situation, by an emergency medical provider, or in an emergency room;
2. Any prescription written while the state electronic prescription accountability system is nonfunctional; and
3. Any prescription written pursuant to chapter 327L."

SECTION 3. Section 329-38.5, Hawaii Revised Statutes, is amended by amending subsection (c) to read as follows:

"(c) For the purposes of this section, "qualifying opioid therapy patient" means:

1. A patient requiring opioid treatment for more than three months;
2. A patient who is prescribed benzodiazepines and opioids together; or
3. A patient who is prescribed a dose of opioids that exceeds ninety morphine equivalent doses."
provided that the term "qualifying opioid therapy patient" shall not apply to any qualifying patient who is issued or receives a prescription pursuant to chapter 327L."

SECTION 4. Statutory material to be repealed is bracketed and stricken. New statutory material is underscored.

SECTION 5. This Act shall take effect upon its approval; provided that the amendments made to section 329-38, Hawaii Revised Statutes, by section 1 of this Act shall not be repealed when that section is repealed and reenacted pursuant to Act 66, Session Laws of Hawaii 2017.
Report Title:
Our Care, Our Choice; Opioids; Prescriptions

Description:
Clarifies that existing law intended to curb over-access to and abuse of opioids, including the time frame for filling prescriptions, supply limitations, and requirements to check the state electronic prescription accountability system and execute an informed consent process, do not apply to qualified patients who are prescribed or issued prescriptions pursuant to the State's Our Care, Our Choice Act. (CD1)

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.