

NAMSDL



National Alliance for Model State Drug Laws

STATES THAT MANDATE THE USE OF AN ADVISORY COMMITTEE, COUNCIL, TASK FORCE OR WORKING GROUP – STATUTES AND REGULATIONS

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ALABAMA

Code of Alabama (2011)
Title 20. Food, Drugs, and Cosmetics.
Chapter 2. Controlled Substances.
Article 10. . Controlled Substances Prescription Database.

§ 20-2-212. Controlled substances prescription database program; powers and duties of department; trust fund; committee membership and meetings.

The department is hereby authorized to establish, create, and maintain a controlled substances prescription database program. In order to carry out its responsibilities under this article, the department is hereby granted the following powers and authority:

...

(4) To create a Controlled Substances Prescription Database Advisory Committee. The mission of the advisory committee is to consult with and advise the State Health Officer on matters related to the establishment, maintenance, and operation of the database, access to the database information, how access is to be regulated, and security of information contained in the database. The committee shall consist of one representative designated by each of the following organizations:

- a. The Medical Association of the State of Alabama.
- b. The Alabama Dental Association.
- c. The Alabama Pharmacy Association.
- d. The Alabama Veterinary Medicine Association.
- e. The State Health Officer, or his or her designee.
- f. The Alabama Hospital Association.
- g. The Executive Director of the Alabama State Board of Pharmacy.
- h. The Executive Director of the Board of Medical Examiners.
- i. The Alabama Optometric Association.
- j. One representative from each of the certifying boards established under the Alabama Uniform Controlled Substances Act.

k. The Alabama Independent Drug Store Association.

l. The Alabama Podiatry Association.

(5) If a member of the Controlled Substances Prescription Database Advisory Committee is unable to attend a meeting, the organization which appointed that member may designate one of its employees or agents as a proxy. A proxy may participate in all deliberations of the committee and vote on all questions considered by the advisory committee. Designations of a proxy must be in writing, must specify by name the individual who will serve as proxy, and must specify the date of the meeting at which the proxy is authorized to serve. There must be a separate written proxy designation for each meeting at which a proxy will serve.

(6) The membership of the committee shall be inclusive and reflect the racial, gender, geographic, urban/rural and economic diversity of the state. The committee shall annually report to the Legislature by the second legislative day of each regular session the extent to which the committee has complied with the diversity provisions provided for in this subdivision.

ARIZONA

Arizona Revised Statutes Annotated (2011)
Title 36. Public Health and Safety
Chapter 28. Controlled Substances Prescription Monitoring Program
Article 1. General Provisions

§ 36-2603. Computerized central database tracking system task force; membership

A. The board shall appoint a task force to help it administer the computerized central database tracking system. The chairperson of the board shall chair the task force. The task force shall include the following members:

1. Pharmacists, medical practitioners and other licensed health care providers.
2. Representatives of professional societies and associations for pharmacists, medical practitioners and other licensed health care providers.
3. Representatives of professional licensing boards.
4. Representatives of the Arizona health care cost containment system administration.
5. Representatives of state and federal agencies that have an interest in the control of controlled substances.
6. Criminal prosecutors.

B. The task force shall meet to establish the procedures and conditions relating to the release of prescription information pursuant to § 36-2604. The task force shall meet at least once each year and at the call of the chairperson.

C. Task force members serve at the pleasure of the board and are not eligible to receive compensation or reimbursement of expenses.

Arizona Administrative Code (2010)
Title 4. Professions and Occupations
Chapter 23. Board of Pharmacy
Article 5. Controlled Substances Prescription Monitoring Program (Refs & Annos)

R4-23-504. Computerized Central Database Tracking System Task Force

A. The Board shall appoint a task force to help it administer the computerized central database tracking system as specified in A.R.S. § 36-2603.

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B. The Task Force shall meet at least once each year and at the call of the chairperson to establish the procedures and conditions relating to the release of prescription information specified in A.R.S. § 36-2604 and R4-23-503.

C. The Task Force shall determine:

1. The information to be screened;
2. The frequency and thresholds for screening; and
3. The parameters for using the information to notify medical practitioners, patients, and pharmacies to educate and provide for patient management and treatment options.

D. The Board shall review and approve the procedures and conditions established by the Task Force as needed but at least once every calendar year.

ARKANSAS

West's Arkansas Code Annotated (2011)
Title 20. Public Health and Welfare
Subtitle 2. Health and Safety (Chapters 6 to 44)
Chapter 7. State Board of Health--Department of Health
Subchapter 6. Prescription Drug Monitoring Program Act

§ 20-7-605. Prescription Drug Monitoring Program Advisory Committee--Creation--Members

(a) The Prescription Drug Monitoring Program Advisory Committee shall be created by the State Board of Health upon the Department of Health procuring adequate funding to establish the program.

(b) The mission of the advisory committee is to consult with and advise the Department of Health on matters related to the establishment, maintenance, operation, and evaluation of the prescription drug monitoring program.

(c) The committee shall consist of:

(1) One (1) representative designated by each of the following organizations:

(A) The Arkansas Academy of Physician Assistants;

(B) The Arkansas Association of Chiefs of Police;

(C) The Arkansas Drug Director;

(D) The Arkansas Medical Society;

(E) The Arkansas Nurses Association;

(F) The Arkansas Optometric Association;

(G) The Arkansas Osteopathic Medical Association;

(H) The Arkansas Pharmacists Association;

(I) The Arkansas Podiatric Medical Association;

(J) The Arkansas Prosecuting Attorneys Association;

(K) The Arkansas Sheriffs Association;

- (L) The Arkansas State Dental Association;
- (M) The Arkansas Veterinary Medical Association;
- (N) The State Board of Health;
- (O) The Arkansas Public Defender's Commission; and
- (P) A mental health provider or certified drug and alcohol counselor; and
- (2) One (1) consumer appointed by the Governor.

CONNECTICUT

Connecticut General Statutes Annotated (2011)
Title 21A. Consumer Protection
Chapter 420B. Dependency-Producing Drugs
Part I. General Provisions

§ 21a-254a. Appointment of prescription drug monitoring working group. Membership

The Commissioner of Consumer Protection shall appoint a prescription drug monitoring working group for the purpose of advising the commissioner on the implementation of the electronic prescription drug monitoring program established pursuant to section 21a-254, including the adoption of regulations by the commissioner. Such advice shall include, but not be limited to, recommendations on how to effectively use the data collected pursuant to such program to detect fraud while protecting the legitimate use of controlled substances. The working group shall include, but not be limited to: (1) A physician, licensed pursuant to chapter 370, specializing in internal medicine; (2) a board certified oncologist; (3) a person licensed to perform advanced level nursing practice activities pursuant to subsection (b) of section 20-87a; (4) a representative from an acute care hospital licensed pursuant to chapter 368v; (5) a state police officer appointed in accordance with section 29-4; (6) a municipal police chief; (7) a representative from the Division of Criminal Justice; (8) a representative from a hospice licensed by the Department of Public Health or certified pursuant to 42 USC 1395x; (9) a pain management specialist, as defined in section 38a-492i; (10) a pharmacist licensed pursuant to section 20-590, 20-591 or 20-592; and (11) a representative from the Department of Mental Health and Addiction Services.

GEORGIA

West's Code of Georgia Annotated (2011)

Title 16. Crimes and Offenses

Chapter 13. Controlled Substances

Article 2. Regulation of Controlled Substances

Part 2. Controlled Substances Prescription Monitoring

§ 16-13-61. Electronic Database Review Advisory Committee; establishment; membership

(a) There is established an Electronic Database Review Advisory Committee for the purposes of consulting with and advising the agency on matters related to the establishment, maintenance, and operation of how prescriptions are electronically reviewed pursuant to this part. This shall include, but shall not be limited to, data collection, regulation of access to data, evaluation of data to identify benefits and outcomes of the reviews, communication to prescribers and dispensers as to the intent of the reviews and how to use the data base, and security of data collected.

(b) The advisory committee shall consist of ten members as follows:

(1) A representative from the agency;

(2) A representative from the Georgia Composite Medical Board;

(3) A representative from the Georgia Board of Dentistry;

(4) A representative with expertise in personal privacy matters, appointed by the president of the State Bar of Georgia;

(5) A representative from a specialty profession that deals in addictive medicine, appointed by the Georgia Composite Medical Board;

(6) A pain management specialist, appointed by the Georgia Composite Medical Board;

(7) An oncologist, appointed by the Georgia Composite Medical Board;

(8) A representative from a hospice or hospice organization, appointed by the Georgia Composite Medical Board;

(9) A representative from the State Board of Optometry; and

(10) The consumer member appointed by the Governor to the State Board of Pharmacy pursuant to subsection (b) of Code Section 26-4-21.

- (c) Each member of the advisory committee shall serve a three-year term or until the appointment and qualification of such member's successor.
- (d) The advisory committee shall elect a chairperson and vice chairperson from among its membership to serve a term of one year. The vice chairperson shall serve as the chairperson at times when the chairperson is absent.
- (e) The advisory committee shall meet at the call of the chairperson or upon request by at least three of the members and shall meet at least one time per year. Five members of the committee shall constitute a quorum.
- (f) The members shall receive no compensation or reimbursement of expenses from the state for their services as members of the advisory committee.

ILLINOIS

West's Smith-Hurd Illinois Compiled Statutes (2011)
Chapter 720. Criminal Offenses
Offenses Against the Public
Act 570. Illinois Controlled Substances Act
Article III. Registration and Control of Manufacture, Distribution and Dispensing
570/320. Advisory committee

§ 320. Advisory committee.

[Text of section effective until January 1, 2012]

- (a) The Secretary of Human Services must appoint an advisory committee to assist the Department in implementing the controlled substance prescription monitoring program created by Section 316 and 321 of this Act. The Advisory Committee consists of prescribers and dispensers.
- (b) The Secretary of Human Services must determine the number of members to serve on the advisory committee. The Secretary must choose one of the members of the advisory committee to serve as chair of the committee.
- (c) The advisory committee may appoint its other officers as it deems appropriate.
- (d) The members of the advisory committee shall receive no compensation for their services as members of the advisory committee but may be reimbursed for their actual expenses incurred in serving on the advisory committee.

West's Smith-Hurd Illinois Compiled Statutes (2011)
Chapter 720. Criminal Offenses
Offenses Against the Public
Act 570. Illinois Controlled Substances Act
Article III. Registration and Control of Manufacture, Distribution and Dispensing
570/320. Advisory committee

§ 320. Advisory committee.

[Text of section effective January 1, 2012]

- (a) The Secretary of the Department of Human Services must appoint an advisory committee to assist the Department in implementing the controlled substance prescription monitoring program created by Section 316 and former Section 321 of this Act. The Advisory Committee consists of prescribers and dispensers.

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(b) The Secretary of the Department of Human Services or his or her designee must determine the number of members to serve on the advisory committee. The Secretary must choose one of the members of the advisory committee to serve as chair of the committee.

(c) The advisory committee may appoint its other officers as it deems appropriate.

(d) The members of the advisory committee shall receive no compensation for their services as members of the advisory committee but may be reimbursed for their actual expenses incurred in serving on the advisory committee.

(e) The advisory committee shall:

(1) provide a uniform approach to reviewing this Act in order to determine whether changes should be recommended to the General Assembly.

(2) review current drug schedules in order to manage changes to the administrative rules pertaining to the utilization of this Act.

IOWA

Iowa Code Annotated (2011)

Title IV. Public Health

Subtitle 1. Alcoholic Beverages and Controlled Substances

Chapter 124. Controlled Substances

Division VI. Drug Prescribing and Dispensing--Information Program

§ 124.555. Advisory council established

An advisory council shall be established to provide oversight to the board and the program and to manage program activities. The board and advisory council shall jointly adopt rules specifying the duties and activities of the advisory council and related matters.

1. The council shall consist of eight members appointed by the governor. The members shall include three licensed pharmacists, four physicians licensed under chapter 148, and one licensed prescribing practitioner who is not a physician. The governor shall solicit recommendations for council members from Iowa health professional licensing boards, associations, and societies. The license of each member appointed to and serving on the advisory council shall be current and in good standing with the professional's licensing board.
2. The council shall advance the goals of the program, which include identification of misuse and diversion of controlled substances identified pursuant to section 124.554, subsection 1, paragraph "g", and enhancement of the quality of health care delivery in this state.
3. Duties of the council shall include but not be limited to the following:
 - a. Ensuring the confidentiality of the patient, prescribing practitioner, and dispensing pharmacist and pharmacy.
 - b. Respecting and preserving the integrity of the patient's treatment relationship with the patient's health care providers.
 - c. Encouraging and facilitating cooperative efforts among health care practitioners and other interested and knowledgeable persons in developing best practices for prescribing and dispensing controlled substances and in educating health care practitioners and patients regarding controlled substance use and abuse.
 - d. Making recommendations regarding the continued benefits of maintaining the program in relationship to cost and other burdens to the patient, prescribing practitioner, pharmacist, and the board. The council's recommendations shall be included in reports required by section 124.554, subsection 2.

e. One physician and one pharmacist member of the council shall include in their duties the responsibility for monitoring and ensuring that patient confidentiality, best interests, and civil liberties are at all times protected and preserved during the existence of the program.

4. Members of the advisory council shall be eligible to request and receive actual expenses for their duties as members of the advisory council, subject to reimbursement limits imposed by the department of administrative services, and shall also be eligible to receive a per diem compensation as provided in section 7E.6, subsection 1.

KANSAS

West's Kansas Statutes Annotated (2010)

Chapter 65. Public Health

Article 16. Regulation of Pharmacists

§ 65-1689. Same; advisory committee created; members; terms

(a) There is hereby created the prescription monitoring program advisory committee which, subject to the oversight of the board, shall be responsible for the operation of the prescription monitoring program. The advisory committee shall consist of at least nine members appointed by the board as follows:

(1) Two licensed physicians, one nominated by the Kansas medical society and one nominated by the Kansas association of osteopathic medicine;

(2) two licensed pharmacists nominated by the Kansas pharmacists association;

(3) one person representing the Kansas bureau of investigation nominated by the attorney general;

(4) one person representing the university of Kansas school of medicine nominated by the dean of such school;

(5) one person representing the university of Kansas school of pharmacy nominated by the dean of such school;

(6) one licensed dentist nominated by the Kansas dental association; and

(7) one person representing the Kansas hospital association nominated by such association. The board may also appoint other persons authorized to prescribe or dispense scheduled substances and drugs of concern, recognized experts and representatives from law enforcement.

(b) The appointments to the advisory committee shall be for terms of three years.

(c) The advisory committee shall elect a chairperson from among its members who shall serve a one-year term. The chairperson may serve consecutive terms.

(d) The advisory committee, in accordance with K.S.A. 75-4319, and amendments thereto, may recess for a closed or executive meeting when it is considering matters relating to identifiable patients or providers.

(e) Upon the expiration of the term of office of any member of the advisory committee on or after the effective date of this act, and in any case of a vacancy existing on or after the effective date of this act, a successor shall be appointed by the board pursuant to this section.

(f) All members of the advisory committee shall serve without compensation.

West's Kansas Statutes Annotated (2010)
Chapter 65. Public Health
Article 16. Regulation of Pharmacists

§ 65-1690. Same; advisory committee in cooperation with other entities

(a) The prescription monitoring program advisory committee shall work with each entity charged with administrative oversight of those persons engaged in the prescribing or dispensing of scheduled substances and drugs of concern to develop a continuing education program for such persons about the purposes and uses of the prescription monitoring program.

(b) The advisory committee shall work with the Kansas bar association to develop a continuing education program for attorneys about the purposes and uses of the prescription monitoring program.

(c) The advisory committee shall work with the Kansas bureau of investigation to develop a continuing education program for law enforcement officers about the purposes and uses of the prescription monitoring program.

West's Kansas Statutes Annotated (2010)
Chapter 65. Public Health
Article 16. Regulation of Pharmacists

§ 65-1691. Same; board consultation with advisory committee; annual report

In consultation with and upon recommendation of the prescription monitoring program advisory committee, the board shall review the effectiveness of the prescription monitoring program and submit an annual report to the senate standing committee on public health and welfare and the house standing committee on health and human services.

KENTUCKY

Executive Order of the Governor to create an Advisory Council for the Kentucky All Schedule Prescription Electronic Reporting System dated 10/14/2011

WHEREAS, abuse, misuse, diversion and illegal sale of prescription drugs are some of the largest threats facing the safety and welfare of the citizens of Kentucky; and

WHEREAS, the Kentucky All Schedule Prescription Electronic Reporting System (KASPER) tracks reported controlled substance prescriptions dispensed within the state; and

WHEREAS, KASPER is a reporting system designed to be a source of information for practitioners and pharmacists, as well as an investigative tool for law enforcement; and

WHEREAS, the reporting component of KASPER was originally designed as a paper and fax based system, but in 2005 was converted to a Web-based version of KASPER to provide real time access to the data; and

WHEREAS, Kentucky was at the forefront in the development of prescription drug tracking system, creating a model that has been followed by other states; and

WHEREAS, it is of paramount importance to the safety and welfare of the citizens of Kentucky that the KASPER program continues to be a leading edge tool to assist health care practitioners, licensure agencies and law enforcement in the fight against prescription drug abuse and diversion:

NOW THEREFORE, I, Steven L. Beshear, Governor of the Commonwealth of Kentucky, by virtue of the authority vested in me by KRS 12.029, do hereby Order and Direct the following:

1. There is hereby created and established the KASPER Advisory Council, (hereinafter referred to as "the Council"), which shall provide advice, guidance and recommendations to the agencies charged with responsibility under KRS Chapter 218A to monitor the prescribing and dispensing of controlled substances.
2. The Council shall consist of eleven (11) members appointed by the Governor as follows:
 - a. Four (4) physicians – one general practitioner, one specialist in pain medicine, one oncologist, and one psychiatrist – to be appointed from lists provided by the Kentucky Board of Medical Licensure containing the names of three retired or active physicians for each of the four areas of practice;

- b. One (1) advanced practice registered nurse to be appointed from a list provided by the Kentucky Board of Nursing containing the names of three retired or active Advanced Practice Registered Nurses;
- c. One (1) substance abuse and mental health professional to be appointed from a list of three (3) retired or active practitioners provided by the Cabinet for Health and Family Services;
- d. One (1) community mental health center representative to be appointed from a list of three (3) provided by the Cabinet for Health and Family Services;
- e. Three (3) pharmacists to be appointed from a list provided by the Kentucky Board of Pharmacy containing the names of three active or retired pharmacists from each of the following general geographic areas in Kentucky: 1) the area west of Interstate 65; 2) the area east of Interstate 75; and 3) the area between Interstates 65 and 75.
- f. One (1) dentist to be appointed from a list of three (3) retired or active dentists provided by the Kentucky Board of Dentistry.

The lists of recommendations for appointment to the council shall be delivered to the Governor no later than October 24, 2011.

- 3. Members of the Council shall be appointed initially to staggered terms and thereafter to four (4) year terms. The Governor also shall appoint one (1) member to serve as Chair and one (1) member to serve as Vice Chair.
- 4. The duties of the Council shall include, but not be limited to, developing recommendations for guidelines that will enable the KASPER program to focus on potential problem areas and proactively generate information useful to the particular prescriber and dispenser licensing boards to assist the boards in expanding their enforcement activities of identifying and eliminating drug abuse, misuse, diversion and illegal prescription and sale of prescription drugs by their respective licensees.
- 5. The Council shall work in cooperation with the affected professional licensing boards of practitioners and pharmacists, law enforcement, substance abuse and mental health treatment professionals and other stakeholders. One (1) representative of the following shall serve as ex officio, non-voting members of the Council: Office of Attorney General, Kentucky Board of Medical Licensure, Kentucky Board of Pharmacists, Kentucky Board of Nursing, Kentucky State Police, Kentucky Office of Drug Control Policy, Kentucky Medical Association, Kentucky Coalition of Nurse Practitioners and Nurse Midwives, Kentucky Osteopathic Association, Kentucky Pharmacy Association, Kentucky Hospital Association, and the Kentucky Poison Control Collaborative.
- 6. The Council shall meet at regular intervals, and no less than quarterly for the first year of its existence, and at the call of the Chair.

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7. Support staff, facilities, and resources for the meetings of the Council shall be provided as directed by the Secretary of the Cabinet for Health and Family Services.
8. Members of the Council shall serve at the pleasure of the Governor, without compensation, but shall be reimbursed for actual expenses incurred in the connection with the discharge of their official duties.
9. All cabinets, departments, commissions, boards, agencies, and officers of the state, or any political subdivision thereof, are hereby authorized and directed to cooperate with the Council in implementing the provisions of this Order.
10. This Executive Order shall be effective immediately upon its signing and shall remain in full force and effect until amended or rescinded by subsequent Executive Order.

Received and filed in the Secretary of State's Office on October 14, 2011.

LOUISIANA

West's Louisiana Statutes Annotated (2011)
Louisiana Revised Statutes
Title 40. Public Health and Safety
Chapter 4. Food and Drugs
Part X-A. Prescription Monitoring Program

§ 1005. Advisory council

A. The advisory council shall consist of the following members, each of whom may appoint a designee:

- (1) The president of the Louisiana State Board of Medical Examiners.
- (2) The president of the Louisiana State Board of Dentistry.
- (3) The president of the Louisiana State Board of Nursing.
- (4) The president of the Louisiana State Board of Optometry Examiners.
- (5) The president of the Louisiana State Board of Veterinary Medicine.
- (6) The president of the Louisiana Academy of Physicians Assistants.
- (7) The president of the Louisiana Board of Pharmacy.
- (8) The superintendent of the Louisiana State Police.
- (9) The administrator of the United States Drug Enforcement Administration.
- (10) The speaker of the Louisiana House of Representatives.
- (11) The president of the Louisiana Senate.
- (12) The chairman of the House Committee on Health and Welfare.
- (13) The chairman of the Senate Committee on Health and Welfare.
- (14) The secretary of the Department of Health and Hospitals.
- (15) The president of the Louisiana State Medical Society.
- (16) The president of the Louisiana Dental Association.

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- (17) The president of the Louisiana Association of Nurse Practitioners.
- (18) The president of the Optometry Association of Louisiana.
- (19) The president of the Louisiana Pharmacists Association.
- (20) The president of the Louisiana Independent Pharmacies Association.
- (21) The president of the National Association of Chain Drug Stores.
- (22) The president of the Louisiana Sheriffs' Association.
- (23) The president of the Louisiana District Attorneys Association.
- (24) The president of the Pharmaceutical Research and Manufacturers of America.
- (25) The president of the Louisiana Academy of Medical Psychologists.
- (26) The president of the Louisiana Veterinary Medical Association.

B. The members of the advisory council shall serve at the pleasure of their respective appointing authorities, eleven of whom shall constitute a quorum for the transaction of all business. The members shall elect a chairman and vice chairman whose duties shall be established by the advisory council. The board shall fix a time and place for regular meetings of the advisory council, which shall meet at least quarterly. The advisory council shall establish policies and procedures necessary to carry out its duties.

C. The board shall seek, and the advisory council shall provide, information and advice regarding the development and operation of the electronic monitoring system, including but not limited to the following:

- (1) Which controlled substances should be monitored.
- (2) Which drugs of concern demonstrate a potential for abuse and should be monitored.
- (3) Design and implementation of educational courses identified in R.S. 40:1008.
- (4) The methodology to be used for analysis and interpretation of prescription monitoring information.
- (5) Design and implementation of a program evaluation component.
- (6) Identification of potential additional members to the advisory council.

Louisiana Administrative Code (2011)
Title 46. Professional and Occupational Standards
Part LIII. Pharmacists
Chapter 29. Prescription Monitoring Program
Subchapter A. General Operations

§ 2909. Advisory Council

A. The advisory council shall consist of the following members, each of whom may appoint a designee:

1. the President of the Louisiana State Board of Medical Examiners;
2. the President of the Louisiana State Board of Dentistry;
3. the President of the Louisiana State Board of Nursing;
4. the President of the Louisiana State Board of Optometry Examiners;
5. the President of the Louisiana State Board of Examiners of Psychologists;
6. the President of the Louisiana Academy of Physician Assistants;
7. the President of the Louisiana Board of Pharmacy;
8. the Superintendent of the Louisiana State Police;
9. the Administrator of the United States Drug Enforcement Administration;
10. the Speaker of the Louisiana House of Representatives;
11. the President of the Louisiana Senate;
12. the Chairman of the House Committee on Health and Welfare;
13. the Chairman of the Senate Committee on Health and Welfare;
14. the Secretary of the Department of Health and Hospitals;
15. the President of the Louisiana State Medical Society;
16. the President of the Louisiana Dental Association;
17. the President of the Louisiana Association of Nurse Practitioners;

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18. the President of the Optometry Association of Louisiana;
19. the President of the Louisiana Pharmacists Association;
20. the President of the Louisiana Independent Pharmacies Association;
21. the President of the National Association of Chain Drug Stores;
22. the President of the Louisiana Sheriffs' Association;
23. the President of the Louisiana District Attorneys Association;
24. the President of the Pharmaceutical Research and Manufacturers of America;
25. the President of the Louisiana Academy of Medical Psychologists.

B. The members of the advisory council shall serve at the pleasure of their respective appointing authorities, 11 of whom shall constitute a quorum for the transaction of business. The members shall elect a chairman and vice chairman whose duties shall be established by the advisory council. The board shall fix a time and place for regular meetings of the advisory council, which shall meet at least quarterly. The advisory council shall establish policies and procedures necessary to carry out its duties.

C. The board shall seek, and the advisory council shall provide, information and advice regarding the development and operation of the electronic monitoring system, including but not limited to the following:

1. which controlled substances should be monitored;
2. which drugs of concern demonstrate a potential for abuse and should be monitored;
3. design and implementation of educational courses identified in R.S. 40:1008;
4. the methodology to be used for analysis and interpretation of prescription monitoring information;
5. design and implementation of a program evaluation component;
6. identification of potential additional members to the advisory council.

MARYLAND

West's Annotated Code of Maryland (2011)

Health--General

Title 21. Food, Drugs, and Cosmetics

Subtitle 2A. Prescription Drug Monitoring Program

§ 21-2A-05. Advisory Board on Prescription Drug Monitoring

In general

(a) There is an Advisory Board on Prescription Drug Monitoring in the Department.

Board members

(b) The Board shall consist of the following members:

(1) The Secretary, or the Secretary's designee;

(2) The President of the Maryland Board of Pharmacy, or the President's designee;

(3) The Chair of the Maryland Board of Physicians, or the Chair's designee;

(4) The President of the Maryland Board of Nursing, or the President's designee;

(5) The Chairman of the Maryland Health Care Commission, or the Chairman's designee;

(6) Four physicians and one nurse practitioner with expertise in clinical treatment using controlled dangerous substances, including pain management, substance abuse, and behavioral disorders, appointed by the Secretary after consultation with:

(i) For the physician appointments, the Medical and Chirurgical Faculty of Maryland, the Maryland Physical Medicine and Rehabilitation Society, the Maryland Society of Anesthesiologists, the Maryland-D.C. Society of Clinical Oncology, the Hospice and Palliative Care Network of Maryland, and the Maryland Chapter of the American Academy of Pediatrics; and

(ii) For the nurse practitioner appointment, the Maryland Nurses Association;

(7) One pediatrician, appointed by the Secretary after consultation with the Maryland Chapter of the American Academy of Pediatrics;

(8) Three pharmacists who represent the perspective of independent and chain pharmacies, appointed by the Secretary after consultation with the Maryland Pharmacists Association, the Maryland Association of Chain Drug Stores, and any other appropriate organization;

(9) A local law enforcement official, appointed by the Secretary after consultation with the Maryland Chiefs of Police Association and the Maryland Sheriff's Association; and

(10) Two Maryland residents who represent the perspective of patients, appointed by the Secretary.

Chair

(c) The Secretary shall designate the chair of the Board.

Term and vacancies

(d)(1) The term of a member appointed by the Secretary is 3 years.

(2) The terms of members appointed by the Secretary are staggered as required by the terms provided for members of the Board on October 1, 2011.

(3) If a vacancy occurs during the term of an appointed member, the Secretary shall appoint a successor who shall serve until the term expires.

Compensation and reimbursement for expenses

(e) A member of the Board:

(1) May not receive compensation as a member of the Board; but

(2) Is entitled to reimbursement for expenses under the Standard State Travel Regulations, as provided in the State budget.

Meetings and recommendations to Secretary

(f) The Board shall:

(1) Meet not fewer than three times annually;

(2) Make recommendations to the Secretary relating to the design and implementation of the Program, including recommendations relating to:

(i) Regulations;

(ii) Legislation; and

(iii) Sources of funding, including grant funds under the Harold Rogers Prescription Drug Monitoring Program and other sources of federal, private, or State funds;

(3)(i) Provide within 180 days after its first meeting, in accordance with § 2-1246 of the State Government Article, an interim report to the General Assembly setting forth the Board's analysis and recommendations under item (2) of this subsection relating to the design, implementation, and funding of the Program; and

(ii) Provide annually to the Governor and, in accordance with § 2-1246 of the State Government Article, the General Assembly an analysis of the impact of the Program on patient access to pharmaceutical care and on curbing prescription drug diversion in the State, including any recommendations related to modification or continuation of the Program; and

(4) Provide ongoing advice and consultation on the implementation and operation of the Program, including recommendations relating to:

(i) Changes in the Program to reflect advances in technology and best practices in the field of electronic health records and electronic prescription monitoring;

(ii) Changes to statutory requirements; and

(iii) The design and implementation of an ongoing evaluation component of the Program.

Consultation with stakeholders and professionals

(g) The Secretary and the Board shall consult with stakeholders and professionals knowledgeable about prescription drug monitoring programs as appropriate to obtain input and guidance about implementation of the Program.

West's Annotated Code of Maryland (2011)

Health--General

Title 21. Food, Drugs, and Cosmetics

Subtitle 2A. Prescription Drug Monitoring Program

§ 21-2A-07. Technical advisory committee

In general

(a) There is a technical advisory committee to the Program.

Purpose of committee

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(b) The purpose of the technical advisory committee is to review requests for information from the Program under § 21-2A-06(b)(3), (4), (5), (7), and (8) of this subtitle.

Committee members

(c) The technical advisory committee consists of the following members, appointed by the Secretary:

(1) A board certified anesthesiologist licensed and practicing in the State, nominated by the Maryland Society of Anesthesiologists;

(2) A certified addiction medicine specialist licensed and practicing in the State, nominated by the Maryland Society for Addiction Medicine;

(3) A pharmacist licensed and practicing in the State;

(4) A medical professional, licensed and practicing in the State, who is treating cancer patients; and

(5) A board certified physician specializing in the treatment of patients with pain, licensed and practicing in the State, nominated by the Maryland Society of Physical Medicine and Rehabilitation.

MASSACHUSETTS

Code of Massachusetts Regulations (2011)
Title 105: Department of Public Health
Chapter 700.000: Implementation of M.g.l. C. 94C

700.012: Prescription Monitoring Program

...

(B) Prescription Monitoring Program Advisory Council.

(1) The Commissioner of the Department of Public Health shall establish a Prescription Monitoring Program Advisory Council to advise the Department on the implementation of 105 CMR 700.012. The membership of this Advisory Council shall include representatives of the Department of Public Health; Executive Office of Public Safety; disciplinary authorities, including the Boards of Registration in Medicine, Pharmacy, Dentistry, Podiatry, Veterinary Medicine, Nursing and Physician Assistants; representatives of associations or societies representing professions authorized to issue or dispense prescriptions, patient interests, and privacy interests; and a person with expertise in the design or operation of a secure automated data system.

(2) The Prescription Monitoring Program Advisory Council shall assist the Department and Boards of Registration, as appropriate, in designing education programs for the appropriate prescribing of controlled substances.

(C) Prescription Monitoring Program Medical Review Group.

(1) The Commissioner shall establish the Prescription Monitoring Program Medical Review Group to advise the Department on accepted medical practice standards related to the disclosure of information pursuant to subsection 105 CMR 700.012(D)(4)(b). The Medical Review Group shall advise the Department in the evaluation of prescription information and clinical aspects of the implementation of 105 CMR 700.012.

(2) Members of the Medical Review Group shall be licensed health care practitioners and pharmacists and, to the extent feasible, at least one member shall be licensed in the same discipline as the practitioner whose records are under review. Licensed practitioners and pharmacists shall be appointed by the Commissioner in consultation with the appropriate Boards of Registration and statewide professional societies in the discipline under which records will be reviewed. Practitioners serving on the Medical Review Group must have a valid Controlled Substances Registration for Schedules II through V pursuant to M.G.L. c. 94C, § 7.

MICHIGAN

Michigan Compiled Laws Annotated (2011)
Chapter 333. Health
Public Health Code
Article 7. Controlled Substances
Part 71. General Provisions

§ 333.7112. Advisory commission; per diem, terms, vacancies, meetings, reports

Sec. 7112. (1) Members of the controlled substances advisory commission shall receive per diem compensation as established annually by the legislature and shall be reimbursed for expenses incurred pursuant to section 1216.

(2) The members of the controlled substances advisory commission shall serve for terms of 2 years. An individual shall not serve more than 2 terms and a partial term, consecutive or otherwise. A vacancy shall be filled for the balance of the unexpired term in the same manner as the original appointment.

(3) The controlled substances advisory commission shall meet at least once each 3 months and shall report on its activities and make recommendations as described in section 7113 to the administrator, the governor, and the legislature at least annually.

Michigan Compiled Laws Annotated (2011)
Chapter 333. Health
Public Health Code
Article 7. Controlled Substances
Part 71. General Provisions

§ 333.7113. Advisory commission; powers and duties

Sec. 7113. (1) The controlled substances advisory commission shall monitor indicators of controlled substance abuse and diversion. If that data shows that Michigan exceeds the average national per capita consumption of a controlled substance, the controlled substances advisory commission shall investigate and determine if there is a legitimate reason for the excess consumption. If the controlled substances advisory commission determines there is not a legitimate reason for the excess consumption, the controlled substances advisory commission shall recommend to the administrator a plan of action to overcome the problem. The controlled substances advisory commission may also recommend action to the administrator if other indicators show that a special problem is developing with any controlled substance available by prescription.

(2) The controlled substances advisory commission shall publicly issue an annual report to the administrator, the governor, and the legislature on the current status of the abuse and diversion of controlled substances in this state. The report shall also identify existing efforts to overcome the abuse and diversion of controlled substances in this state and make recommendations for needed legislative, administrative, and interagency activities.

(3) The controlled substances advisory commission may include in the report required by subsection (2) recommendations for action that involve licensing, law enforcement, substance abuse treatment and prevention, education, professional associations, pharmaceutical manufacturers, and other relevant individuals and agencies.

(4) By December 31, 1993, the department of commerce, in consultation with the Michigan pharmacists association, shall establish a standardized data base format consistent with the standards of the national council for prescription drug programs that may be used by dispensing pharmacies or a practitioner described in section 7334(2) to transmit the prescription-related information required under section 7334 to the department of commerce electronically or on storage media including, but not limited to, disks, tapes, and cassettes. The controlled substances advisory commission shall approve or revise the standardized data base format within 3 months after the department of commerce establishes the format. Upon commission approval or revision, the department of commerce shall implement transmission of information under the format and prescription-related information required under section 7334 may be transmitted to the department of commerce electronically or on storage media.

MINNESOTA

Minnesota Statutes Annotated (2011)
Health (Ch. 144-159)
Chapter 152. Drugs; Controlled Substances
Prescriptions

§ 152.126. Controlled substances prescription electronic reporting system

...

Subd. 3. Prescription Electronic Reporting Advisory Committee. (a) The board shall convene an advisory committee. The committee must include at least one representative of:

- (1) the Department of Health;
- (2) the Department of Human Services;
- (3) each health-related licensing board that licenses prescribers;
- (4) a professional medical association, which may include an association of pain management and chemical dependency specialists;
- (5) a professional pharmacy association;
- (6) a professional nursing association;
- (7) a professional dental association;
- (8) a consumer privacy or security advocate; and
- (9) a consumer or patient rights organization.

(b) The advisory committee shall advise the board on the development and operation of the electronic reporting system, including, but not limited to:

- (1) technical standards for electronic prescription drug reporting;
- (2) proper analysis and interpretation of prescription monitoring data; and
- (3) an evaluation process for the program.

MONTANA

West's Montana Code Annotated (2011)
Title 37. Professions and Occupations
Chapter 7. Pharmacy
Part 15. Prescription Drug Registry

§ 37-7-1510. Prescription drug registry--advisory group.

(1) The board shall establish an advisory group to provide information and advice about the development and operation of the registry, including but not limited to information on:

- (a) the criteria for reporting information from the registry to prescribers and pharmacists;
- (b) the design and implementation of educational courses about the registry;
- (c) standards for evaluating the effectiveness of the registry; and
- (d) administrative rules for establishing and maintaining the registry.

(2) The advisory group consists of but is not limited to representatives of:

- (a) health care licensing boards that oversee health care providers who have authority to prescribe or dispense drugs;
- (b) associations that represent health care professionals who have authority to prescribe or dispense drugs;
- (c) associations that advocate for patients;
- (d) entities involved in tribal health services or issues; and
- (e) the department of justice provided for in 2-15-2001.

(3) The advisory group may identify other individuals for appointment to the group.

(4) The board shall establish rules for the conduct of advisory group business.

(5) The advisory group may not receive or access confidential health care information contained in the registry.

NORTH DAKOTA

West's North Dakota Century Code Annotated (2011)
Title 19. Foods, Drugs, Oils, and Compounds
Chapter 19-03.5. Prescription Drug Monitoring Program

§ 19-03.5-07. Advisory council

1. An advisory council is established to advise and make recommendations to the board regarding how to best use the program to improve patient care and foster the goal of reducing misuse, abuse, and diversion of controlled substances; to encourage cooperation and coordination among state, local, and federal agencies and other states to reduce the misuse, abuse, and diversion of controlled substances; and to provide advice and recommendations to the board regarding any other matters as requested by the board. The advisory council may have access to central repository information to fulfill its duties.

2. The advisory council must consist of:

- a. One dispenser selected by the board;
- b. One physician selected by the North Dakota medical association;
- c. One prescriber selected by the board of nursing;
- d. A designee of the attorney general;
- e. A designee of the department of human services;
- f. One prescriber selected by the board of medical examiners;
- g. One prescriber selected by the North Dakota nurses association; and
- h. Any other prescriber or dispenser determined by the board to be necessary to meet a mandate of, or avoid a delay in implementing, an appropriations measure. The number of additional members selected by the board must be limited to the number necessary to meet the mandate or avoid the delay of an appropriation.

3. The advisory council shall make recommendations to the board regarding:

- a. Safeguards for the release of information to individuals who have access to the information contained in the central repository;
- b. The confidentiality of program information and the integrity of the patient's relationship with the patient's health care provider;

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c. Advancing the purposes of the program, including enhancement of the quality of health care delivery in this state; and

d. The continued benefits of maintaining the program in relationship to the cost and other burdens to the state.

4. The board may provide reimbursement of expenses and per diem to members of the advisory council within the limits provided in state law.

OREGON

West's Oregon Revised Statutes Annotated (2011)
Title 36. Public Health and Safety
Chapter 431. State and Local Administration and Enforcement of Health Laws
Prescription Monitoring Program
(Commission)

§ 431.976. Prescription Monitoring Program Advisory Commission; purposes; membership appointments

<Text subject to final change by the Oregon Office of the Legislative Counsel.>

(1) The Prescription Monitoring Program Advisory Commission is created for the purposes of:

(a) Studying issues related to the prescription monitoring program established under ORS 431.962;

(b) Reviewing the program's annual report and making recommendations to the Oregon Health Authority regarding the operation of the program; and

(c) Developing criteria used to evaluate program data.

(2) The commission shall consist of 11 members appointed by the authority as follows:

(a) A person nominated by the Pain Management Commission;

(b) A person who dispenses controlled substances nominated by an association representing pharmacists;

(c) A practicing dentist nominated by an association representing dentists;

(d) A practicing physician nominated by an association representing physicians;

(e) A practicing doctor of osteopathy nominated by an association representing osteopathic physicians and surgeons;

(f) A nurse authorized to prescribe controlled substances nominated by an association representing nurses;

(g) A practicing naturopathic physician nominated by an association representing naturopathic physicians;

(h) A practicing optometrist, nominated by an association representing optometrists;

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- (i) A representative of the authority with expertise in administering addiction services; and
- (j) Two members of the public, one of whom must be an expert in information technology.

West's Oregon Revised Statutes Annotated (2011)
Title 36. Public Health and Safety
Chapter 431. State and Local Administration and Enforcement of Health Laws
Prescription Monitoring Program
(Commission)

§ 431.978. Prescription Monitoring Program Advisory Commission; terms of office; vacancies in office

<Text subject to final change by the Oregon Office of the Legislative Counsel.>

- (1) The term of office of each member of the Prescription Monitoring Program Advisory Commission is four years, but a member serves at the pleasure of the Oregon Health Authority. Before the expiration of the term of a member, the authority shall appoint a successor whose term begins on July 1 next following. A member is eligible for reappointment. If there is a vacancy for any cause, the authority shall make an appointment to become immediately effective.
- (2) The commission shall elect one of its members to serve as chairperson.
- (3) The commission shall meet at least once annually at a time and place specified by the chairperson of the commission. The commission may meet at other times and places specified by the call of the chairperson or of a majority of the members of the commission.
- (4) The commission may adopt rules necessary for the operation of the commission.
- (5) A majority of the members of the commission constitutes a quorum for the transaction of business.
- (6) Official action by the commission requires the approval of a majority of the members of the commission.
- (7) The authority shall provide staff support to the commission.
- (8) Members of the commission are not entitled to compensation, but may be reimbursed for actual and necessary travel and other expenses incurred by them in the performance of their official duties in the manner and amounts provided for in ORS 292.495. Claims for expenses incurred in performing functions of the commission shall be paid out of funds appropriated to the authority for that purpose.

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(9) All agencies of state government, as defined in ORS 174.111, are directed to assist the commission in the performance of its duties and, to the extent permitted by laws relating to confidentiality, to furnish such information and advice as the members of the commission consider necessary to perform their duties.

SOUTH DAKOTA

South Dakota Codified Laws (2011)
Title 34. Public Health and Safety
Chapter 34-20E. Prescription Drug Monitoring Program

§ 34-20E-15. Advisory council established

An advisory council is established to advise and make recommendations to the board regarding how to best use the program to improve patient care and foster the goal of reducing misuse, abuse, and diversion of controlled substances; to encourage cooperation and coordination among state, local, and federal agencies and other states to reduce the misuse, abuse, and diversion of controlled substances; and to provide advice and recommendations to the board regarding any other matters as requested by the board. The advisory council shall serve without compensation. The advisory council may have access to central repository information to fulfill its duties.

South Dakota Codified Laws (2011)
Title 34. Public Health and Safety
Chapter 34-20E. Prescription Drug Monitoring Program

§ 34-20E-16. Membership of advisory council

The advisory council shall consist of:

- (1) One dispenser selected by the board;
- (2) One prescriber selected by the Board of Medical and Osteopathic Examiners;
- (3) One prescriber selected by the Board of Nursing;
- (4) One prescriber selected by the Board of Dentistry;
- (5) One prescriber selected by the Board of Examiners in Optometry;
- (6) One prescriber selected by the South Dakota Academy of Physician Assistants;
- (7) One member selected by the South Dakota Association of Healthcare Organizations;
- (8) One member of the South Dakota State Medical Association;
- (9) One member of the South Dakota Nurses Association;
- (10) One member of the South Dakota Pharmacists Association;

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(11) A designee of the attorney general;

(12) A designee of the Department of Health; and

(13) Any other prescriber or dispenser determined by the board to be necessary to meet a mandate of, or avoid a delay in implementing, an appropriations measure. The number of additional members that the board may select is limited to the number necessary to meet the mandate or avoid the delay of an appropriation.

South Dakota Codified Laws (2011)

Title 34. Public Health and Safety

Chapter 34-20E. Prescription Drug Monitoring Program

§ 34-20E-17. Recommendations of advisory council

The advisory council shall make recommendations to the board regarding:

(1) Safeguards for the release of information to persons who have access to the information contained in the central repository;

(2) The confidentiality of program information and the integrity of the patient's relationship with the patient's health care provider;

(3) Advancing the purposes of the program, including enhancement of the quality of health care delivery in this state; and

(4) The continued benefits of maintaining the program in relationship to the cost and other burdens to the state.

TENNESSEE

West's Tennessee Code Annotated (2011)
Title 53. Food, Drugs and Cosmetics
Chapter 10. Legend Drugs
Part 3. Controlled Substance Monitoring Act of 2002

§ 53-10-303. Controlled substance database advisory committee; membership; meetings; duties and responsibilities

(a) There is created the controlled substance database advisory committee. The committee members shall be:

(1) The executive director of the board of pharmacy, who shall serve as database manager;

(2) The director of the department of health's division of health-related boards;

(3) The executive director of the board of medical examiners;

(4) One (1) of the governor-appointed and licensed members of each of the following health care professional licensure boards or committees to be chosen by the licensing board or committee:

(A) The board of medical examiners;

(B) The board of osteopathic examination;

(C) The board of dentistry;

(D) The board of registration in podiatry;

(E) The optometry board;

(F) The board of veterinary medical examiners;

(G) The board of nursing;

(H) The board of medical examiners' committee for physician assistants; and

(I) The board of pharmacy; and

(5) One (1) of the members of the board of pharmacy and one (1) of the members of the board of medical examiners who were appointed to those boards to represent the general public. The boards shall choose those representatives.

(b) The committee shall have a chair and vice-chair, who shall be elected annually from its members.

(c) The committee shall meet at least annually and as often as deemed necessary either at the call of the chair or upon request of at least three (3) members of the committee. A quorum for purposes of official actions by the committee shall be seven (7) members.

(d) The members of the committee chosen to serve by the individual licensure boards and committees, while serving on this committee, shall be deemed to be performing official duties as members of their original board or committee and shall be entitled to the same per diem and travel reimbursements as they would receive for performing their duties for their original board or committee. The member's original board or committee shall pay those per diems and travel reimbursements.

(e) At all times, except when considering, reviewing, discussing, advising or taking action in reference to specifically named individuals or dispensers identified from information contained in, or reported to the database, the committee shall be subject to title 8, chapter 44, part 1, regarding public meetings.

(f) The commissioner of health shall have the authority to promulgate all rules and regulations, pursuant to the Uniform Administrative Procedures Act, compiled in title 4, chapter 5, necessary for implementation of this part. The commissioner of health shall promulgate rules regarding:

(1) Establishing, maintaining, and operating the database;

(2) Access to the database and how access is obtained; and

(3) Control and dissemination of information contained in the database.

(g) The committee shall advise the commissioner of health with respect to any contemplated rulemaking under this part. The committee may make formal recommendations to the commissioner of health.

(h)(1) The committee shall have the duty to examine database information to identify unusual patterns of prescribing and dispensing controlled substances that appear to be higher than normal, taking into account the particular specialty, circumstances, patient-type or location of the prescriber or dispenser.

(2)(A) If the committee determines that a pharmacist or pharmacy has an unusually high pattern of dispensing controlled substances that is not explained by other factors, it shall refer the pharmacist or pharmacy to the chief board of pharmacy investigator.

(B) When the pharmacy investigator completes the investigation of any pharmacy or pharmacist referred to it by the committee pursuant to this subsection, the investigator shall report the results of the investigation back to the committee as follows:

(i) The investigator shall report that the investigation was dismissed if the results of the investigation indicate that the pharmacist or pharmacy had an unusually high dispensing pattern for explainable, legitimate and lawful reasons; or

(ii) The investigator shall report that the investigation was referred to the pharmacy board if the results indicate that a prescriber has an unusually high pattern of prescribing or dispensing controlled substances that are not explained by other factors.

(C) If the action taken by the board indicate that the pharmacist or pharmacy had an unusually high dispensing pattern for explainable, legitimate and lawful reasons, the committee shall take that finding into consideration before it again refers the same pharmacist or pharmacy to the investigator based upon similar conduct.

(3)(A) If the committee determines that a prescriber has an unusually high pattern of prescribing or dispensing controlled substances that are not explained by other factors, it shall refer the prescriber to the health related boards' investigation unit.

(B) When the boards' investigator completes the investigation of any prescriber referred to it by the committee pursuant to this subsection, the investigator shall report the results of the investigation back to the committee as follows:

(i) The investigator shall report that the investigation was dismissed if the results of the investigation indicate that the prescriber had an unusually high dispensing pattern for explainable, legitimate and lawful reasons; or

(ii) The investigator shall report that the investigation was referred to the health related boards if the results indicate that a prescriber has an unusually high pattern of prescribing or dispensing controlled substances that are not explained by other factors.

(C) If the action taken by the board indicate that the prescriber had an unusually high dispensing or prescribing pattern for explainable, legitimate and lawful reasons, the committee shall take that finding into consideration before it again refers the same prescriber to the health related boards' investigation unit based upon similar conduct.

(4) If a pharmacy investigator or a member of the health related boards' investigation unit has reason to believe during any part of an investigation that a prescriber or dispenser is in violation of a criminal law, the investigator is authorized to report the conduct to the appropriate district attorney general.

VERMONT

West's Vermont Statutes Annotated (2011)
Title Eighteen. Health
Part 5. Foods and Drugs
Chapter 84A. Vermont Prescription Monitoring System

§ 4286. Advisory committee

(a)(1) The commissioner shall establish an advisory committee to assist in the implementation and periodic evaluation of VPMS.

(2) The department shall consult with the committee concerning any potential operational or economic impacts on dispensers and health care providers related to transmission system equipment and software requirements.

(3) The committee shall develop guidelines for use of VPMS by dispensers and health care providers and shall make recommendations concerning under what circumstances, if any, the department shall or may give VPMS data, including data thresholds for such disclosures, to law enforcement personnel. The committee shall also review and approve advisory notices prior to publication.

(b) The advisory committee shall be chaired by the commissioner or his or her designee and shall include the following members:

(1) the deputy commissioner for alcohol and drug abuse programs;

(2) a representative from the Vermont medical society;

(3) a representative from the American college of emergency physicians-Vermont chapter;

(4) a representative from the Vermont state nurses association;

(5) a representative from the Vermont board of medical practice;

(6) a representative from the Vermont board of pharmacy;

(7) a pharmacist from the Vermont pharmacists association;

(8) a representative of the Vermont state dental society;

(9) the commissioner of public safety;

(10) a representative of the Vermont attorney general;

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- (11) a representative of the Vermont substance abuse treatment providers association;
 - (12) a mental health provider or a certified alcohol and drug counselor;
 - (13) a consumer in recovery from prescription abuse;
 - (14) a consumer receiving medical treatment for chronic pain; and
 - (15) any other member invited by the commissioner.
- (c) The committee shall meet no less than quarterly in the first year, and no less than annually each following year, but may be convened at any time by the commissioner or the commissioner's designee.
- (d) The committee shall issue a report to the senate and house committees on judiciary, the senate committee on health and welfare, and the house committee on human services no later than January 15th in 2008, 2010, and 2012.
- (e) This section shall sunset July 1, 2012 and thereafter the committee shall cease to exist.

VIRGINIA

West's Annotated Code of Virginia (2011)

Title 54.1. Professions and Occupations

Subtitle III. Professions and Occupations Regulated by Boards Within the Department of Health Professions

Chapter 25.2. Prescription Monitoring Program

§ 54.1-2520. Program establishment; Director's regulatory authority

...

E. The Director shall also establish an advisory committee within the Department to assist in the implementation and evaluation of the Prescription Monitoring Program.