State PMP Laws that Confer Immunity on Prescribers and/or Dispensers

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Introduction

The following statutes and regulations represent those states that specifically provide civil and/or criminal immunity to prescribers and dispensers for accessing, failing to access, or reporting data to the prescription monitoring program database. This does not mean that if a state is not included in this memorandum that prescribers and dispensers can be held liable for those actions as there may be other statutes or regulations which would provide immunity that aren't included in the prescription monitoring program statutes and regulations for that state.

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Alaska
§ 17.30.200 (eff. until July 16, 2017)
§ 17.30.200 (eff. July 17, 2017)

West's Alaska Statutes Annotated (2016)
Title 17. Food and Drugs
Chapter 30. Controlled Substances
Article 5. Controlled Substance Prescription Database

§ 17.30.200. Controlled substance prescription database

<Text of Section Effective until July 16, 2017>

. . .

(h) An individual who has submitted information to the database in accordance with this section may not be held civilly liable for having submitted the information. Nothing in this section requires or obligates a dispenser or practitioner to access or check the database before dispensing, prescribing, or administering a medication, or providing medical care to a person. **Dispensers or practitioners may not be held civilly liable for damages for accessing or failing to access the information in the database.**

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West's Alaska Statutes Annotated (2016)
Title 17. Food and Drugs
Chapter 30. Controlled Substances
Article 5. Controlled Substance Prescription Database

§ 17.30.200. Controlled substance prescription database

<Text of Section Effective July 17, 2017>

. . .

(h) An individual who has submitted information to the database in accordance with this section may not be held civilly liable for having submitted the information. **Dispensers or practitioners may not be held civilly liable for damages for accessing or failing to access the information in the database.**

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Arizona
§ 36-2609

Arizona Revised Statutes Annotated (2016)
Title 36. Public Health and Safety
Chapter 28. Controlled Substances Prescription Monitoring Program
Article 1. General Provisions

§ 36-2609. Use of information; civil immunity

A. An individual or entity that complies with the reporting requirements of § 36-2608 is not subject to civil liability or other civil relief for reporting the information to the board.

B. Unless a court of competent jurisdiction makes a finding of malice or criminal intent, the board, any other state agency or any person or entity in proper possession of information pursuant to this article is not subject to civil liability or other legal or equitable relief for any of the following acts or omissions:

1. Furnishing information pursuant to this article.

2. Receiving, using or relying on, or not using or relying on, information received pursuant to this article.

3. Information that was not furnished to the board.

4. Information that was factually incorrect or that was released by the board to the wrong person or entity.

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Delaware
16 § 4798

West's Delaware Code Annotated (2016)
Title 16. Health and Safety
Part IV. Food and Drugs
Chapter 47. Uniform Controlled Substances Act
Subchapter VII. Miscellaneous

§ 4798. The Delaware Prescription Monitoring Program

. . .

(j) Unless a court of competent jurisdiction makes a finding of gross negligence, malice or criminal intent, the Office of Controlled Substances, any other state agency, any prescriber or dispenser, or any person or entity in proper possession of information pursuant to this statute is not subject to civil liability, administrative action or other legal or equitable relief for any of the following acts or omissions:

(1) Furnishing information pursuant to this section.

(2) Receiving, using or relying on, or not using or relying on, information received pursuant to this section.

(3) Information that was not furnished to the Office of Controlled Substances.

(4) Information that was factually incorrect or that was released by the Office of Controlled Substance to the wrong person or entity.

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District of Columbia
§ 48-853.08
17 ADC 10300

West's District of Columbia Code Annotated 2001 Edition (2016)
Division VIII. General Laws.
Title 48. Foods and Drugs.
Subtitle II. Prescription Drugs.
Chapter 8G. Prescription Drug Monitoring Program.

§ 48-853.08. Immunity from liability.

(a) The Director and the employees of the Department shall not be liable for any civil damages resulting from the accuracy or inaccuracy of any information reported, compiled, or maintained by the Program pursuant to this chapter.

(b) The Director and the employees of the Department shall not be liable for any civil damages resulting from the disclosure of or failure to disclose any information in compliance with this chapter and the Department's regulations.

(c) In the absence of gross negligence or willful misconduct, prescribers or dispensers complying in good faith with the reporting requirements of this chapter shall not be liable for any civil damages for any act or omission resulting from the submission of such required reports.

West's District of Columbia Municipal Regulations (2016)
Title 17. Business, Occupations, and Professionals
Chapter 103. Prescription Drug Monitoring Program

10300. GENERAL PROVISIONS

10300.1 The Prescription Drug Monitoring Program (Program) shall employ information technology necessary for dispensers to report the prescription monitoring data set forth in § 10301.4 to the Program.

10300.2 A prescriber or dispenser:

(a) Is not required or obligated to access or use the prescription monitoring data available under the Program; and

(b) When acting in good faith, is not subject to liability or disciplinary action arising solely from:

(1) Requesting or receiving, or failing to request or receive, prescription monitoring data from the Program; or

(2) Acting, or failing to act, on the basis of prescription monitoring data provided by the Program.

10300.3 The Program shall retain prescription monitoring data for at least three (3) years from the date of receipt.

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Florida
§ 893.055

West's Florida Statutes Annotated (2016)
Title XLVI. Crimes (Chapters 775-899)
Chapter 893. Drug Abuse Prevention and Control

§ 893.055. Prescription drug monitoring program

(1) As used in this section, the term:

(a) "Patient advisory report" or "advisory report" means information provided by the department in writing, or as determined by the department, to a prescriber, dispenser, pharmacy, or patient concerning the dispensing of controlled substances. **All advisory reports are for informational purposes only and impose no obligations of any nature or any legal duty on a prescriber, dispenser, pharmacy, or patient.** The patient advisory report shall be provided in accordance with s. 893.13(7)(a) 8. The advisory reports issued by the department are not subject to discovery or introduction into evidence in any civil or administrative action against a prescriber, dispenser, pharmacy, or patient arising out of matters that are the subject of the report; and a person who participates in preparing, reviewing, issuing, or any other activity related to an advisory report may not be permitted or required to testify in any such civil action as to any findings, recommendations, evaluations, opinions, or other actions taken in connection with preparing, reviewing, or issuing such a report.

. . .

(12) A prescriber or dispenser, or his or her designee, may have access to the information under this section which relates to a patient of that prescriber or dispenser as needed for the purpose of reviewing the patient's controlled drug prescription history. **A prescriber or dispenser acting in good faith is immune from any civil, criminal, or administrative liability that might otherwise be incurred or imposed for receiving or using information from the prescription drug monitoring program. This subsection does not create a private cause of action, and a person may not recover damages against a prescriber or dispenser authorized to access information under this subsection for accessing or failing to access such information.**

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Georgia
§ 16-13-63

West's Code of Georgia Annotated (2016)
Title 16. Crimes and Offenses
Chapter 13. Controlled Substances
Article 2. Regulation of Controlled Substances
Part 2. Electronic Data Base of Prescription Information

§ 16-13-63. Civil liability

(a) Nothing in this part shall require a dispenser or prescriber to obtain information about a patient from the program established pursuant to this part. **A dispenser or prescriber shall not have a duty and shall not be held civilly liable for damages to any person in any civil or administrative action or criminally responsible for injury, death, or loss to person or property on the basis that the dispenser or prescriber did or did not seek or obtain information from the electronic data base established pursuant to Code Section 16-13-57. Nothing in this part shall create a private cause of action against a prescriber or dispenser.**

(b) A dispenser or prescriber acting in good faith shall not be held civilly liable for damages to any person in any civil or administrative action or criminally responsible for injury, death, or loss to person or property for receiving or using information from the electronic data base established pursuant to Code Section 16-13-57.

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Idaho
§ 37-2730A

West's Idaho Code Annotated (2016)
Title 37. Food, Drugs, and Oil
Chapter 27. Uniform Controlled Substances
Article III

§ 37-2730A. Prescription tracking program

. . .

(5) Unless there is shown malice or criminal intent or gross negligence or reckless, willful and wanton conduct as defined in section 6-904C, Idaho Code, the state of Idaho, the board, any other state agency, or any person, or entity in proper possession of information as herein provided shall not be subject to any liability or action for money damages or other legal or equitable relief by reason of any of the following:

(a) The furnishing of information under the conditions herein provided;

(b) The receiving and use of, or reliance on, such information;

(c) The fact that any such information was not furnished; or

(d) The fact that such information was factually incorrect or was released by the board to the wrong person or entity.

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Illinois
720 § 570/318

West's Smith-Hurd Illinois Compiled Statutes Annotated (2016)
Chapter 720. Criminal Offenses
Offenses Against the Public
Act 570. Illinois Controlled Substances Act
Article III. Registration and Control of Manufacture, Distribution and Dispensing

§ 570/318. Confidentiality of information

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(j) Based upon federal, initial and maintenance funding, a prescriber and dispenser inquiry system shall be developed to assist the health care community in its goal of effective clinical practice and to prevent patients from diverting or abusing medications.

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(8) If there is an adverse outcome because of a prescriber or dispenser making an inquiry, which is initiated in good faith, the prescriber or dispenser shall be held harmless from any civil liability.

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Indiana
§ 35-48-7-11.1

West's Annotated Indiana Code (2016)
Title 35. Criminal Law and Procedure
Article 48. Controlled Substances
Chapter 7. Central Repository for Controlled Substances Data

§ 35-48-7-11.1 INSPECT program; confidentiality

. . .

(l) A practitioner who checks the INSPECT program for the available data on a patient is immune from civil liability for an injury, death, or loss to a person solely due to a practitioner:

(1) seeking information from the INSPECT program; and

(2) in good faith using the information for the treatment of the patient.

The civil immunity described in this subsection does not extend to a practitioner if the practitioner receives information directly from the INSPECT program and then negligently misuses this information. This subsection does not apply to an act or omission that is a result of gross negligence or intentional misconduct.

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(n) A practitioner who in good faith discloses information based on a report from the INSPECT program to a law enforcement agency is immune from criminal or civil liability. A practitioner that discloses information to a law enforcement agency under this subsection is presumed to have acted in good faith.

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Iowa
§ 124.553

Iowa Code Annotated (2016)
Title IV. Public Health
Subtitle 1. Alcoholic Beverages and Controlled Substances
Chapter 124. Controlled Substances
Division VI. Drug Prescribing and Dispensing--Information Program

§ 124.553. Information access

. . .

6. Nothing in this section shall require a pharmacist or prescribing practitioner to obtain information about a patient from the program. **A pharmacist or prescribing practitioner does not have a duty and shall not be held liable in damages to any person in any civil or derivative criminal or administrative action for injury, death, or loss to person or property on the basis that the pharmacist or prescribing practitioner did or did not seek or obtain or use information from the program. A pharmacist or prescribing practitioner acting reasonably and in good faith is immune from any civil, criminal, or administrative liability that might otherwise be incurred or imposed for requesting or receiving or using information from the program.**

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Kansas
§ 65-1688

West's Kansas Statutes Annotated (2016)
Chapter 65. Public Health
Article 16. Regulation of Pharmacists

§ 65-1688. Same; act does not create civil liability or duty

No person authorized to prescribe or dispense scheduled substances and drugs of concern shall be liable to any person in a civil action for damages or other relief for injury, death or loss to person or property on the basis that such person authorized to prescribe or dispense scheduled substances and drugs of concern did or did not seek or obtain information from the prescription monitoring program prior to prescribing or dispensing scheduled substances and drug of concern to a patient. Nothing in this act shall be construed to create a duty or otherwise require a person authorized to prescribe or dispense scheduled substances and drug of concern to obtain information about a patient from the prescription monitoring program prior to prescribing or dispensing scheduled substances and drug of concern to such patient.

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Maine
22 § 7249 (eff. July 29, 2016)

Maine Revised Statutes Annotated (2016)
Title 22. Health and Welfare
Subtitle 4. Human Services
Part 3. Drug Abuse
Chapter 1603. Controlled Substances Prescription Monitoring

§ 7249. Reporting of prescription monitoring information

<Text of Section Effective July 29, 2016>

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4. Immunity from liability. A dispenser or prescriber is immune from liability for disclosure of information if the disclosure was made pursuant to and in accordance with this chapter.

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Maryland
Health-General § 21-2A-08 (eff. until Sept. 30, 2016)
Health-General § 21-2A-08 (eff. Oct. 1, 2016)
ADC 10.47.07.09

West's Annotated Code of Maryland (2016)
Health--General
Title 21. Food, Drugs, and Cosmetics
Subtitle 2a. Prescription Drug Monitoring Program

§ 21-2A-08. Liability of Department agents and employees, prescribers or dispensers

<Text of Section Effective until September 30, 2016>

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Prescribers or dispensers

(b) A prescriber or dispenser, acting in good faith, is not subject to liability or disciplinary action arising solely from:

(1) Requesting or receiving, or failing to request or receive, prescription monitoring data from the Program; or

(2) Acting, or failing to act, on the basis of prescription monitoring data provided by the Program.

West's Annotated Code of Maryland (2016)
Health--General
Title 21. Food, Drugs, and Cosmetics
Subtitle 2a. Prescription Drug Monitoring Program

§ 21-2A-08. Liability of Department agents and employees, prescribers or dispensers

<Text of Section Effective October 1, 2016>

. . .

Prescribers or dispensers

(b) Except as provided in § 21-2A-09(b)(3) of this subtitle, a prescriber, prescriber delegate, pharmacist, or pharmacist delegate acting in good faith, is not subject to liability or disciplinary action arising solely from:

(1) Requesting or receiving, or failing to request or receive, prescription monitoring data from the Program; or

(2) Acting, or failing to act, on the basis of prescription monitoring data provided by the Program.

Code of Maryland Regulations (2016)
Title 10. Department of Health and Mental Hygiene
Subtitle 47. Alcohol and Drug Abuse Administration
Chapter 07. Prescription Drug Monitoring Program

.09 General Provisions.

. . .

C. A prescriber or dispenser:

(1) Is not required or obligated to access or use the prescription monitoring data available under the Program; and

(2) When acting in good faith, is not subject to liability or disciplinary action arising solely from:

(a) Requesting or receiving, or failing to request or receive, prescription monitoring data from the Program; or

(b) Acting, or failing to act, on the basis of prescription monitoring data provided by the Program.

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Minnesota
§ 152.126 (eff. until July 31, 2016)
§ 152.126 (eff. August 1, 2016)

Minnesota Statutes Annotated (2014)
Health (Ch. 144-159)
Chapter 152. Drugs; Controlled Substances
Prescriptions

§ 152.126. Prescription monitoring program.

<Text of Section Effective until July 31, 2016>

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Subd. 9. Immunity from liability; no requirement to obtain information. (a) A pharmacist, prescriber, or other dispenser making a report to the program in good faith under this section is immune from any civil, criminal, or administrative liability, which might otherwise be incurred or imposed as a result of the report, or on the basis that the pharmacist or prescriber did or did not seek or obtain or use information from the program.

(b) Nothing in this section shall require a pharmacist, prescriber, or other dispenser to obtain information about a patient from the program, and the pharmacist, prescriber, or other dispenser, if acting in good faith, is immune from any civil, criminal, or administrative liability that might otherwise be incurred or imposed for requesting, receiving, or using information from the program.

. . .

Minnesota Statutes Annotated (2016)
Health (Ch. 144-159)
Chapter 152. Drugs; Controlled Substances
Prescriptions

§ 152.126. Prescription monitoring program

<Text of Section Effective August 1, 2016>

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Subd. 9. Immunity from liability; no requirement to obtain information. (a) A pharmacist, prescriber, or other dispenser making a report to the program in good faith under this section is immune from any civil, criminal, or administrative liability, which might otherwise be incurred or imposed as a result of the report, or on the basis that the pharmacist or prescriber did or did not seek or obtain or use information from the program.

(b) Nothing in this section shall require a pharmacist, prescriber, or other dispenser to obtain information about a patient from the program, and the pharmacist, prescriber, or other dispenser, if acting in good faith, is immune from any civil, criminal, or administrative liability that might otherwise be incurred or imposed for requesting, receiving, or using information from the program.

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Montana
§ 37-7-1507

West's Montana Code Annotated (2015)
Title 37. Professions and Occupations
Chapter 7. Pharmacy
Part 15. Prescription Drug Registry

§ 37-7-1507. Prescription drug registry--immunity

(1) A person or entity that complies with the reporting requirements of 37-7-1503 is not subject to civil liability or other legal or equitable relief for reporting the information to the board.

(2) Unless a court of competent jurisdiction finds that a person or entity committed an unlawful act pursuant to 37-7-1513, a person or entity in proper possession of information pursuant to this part is not subject to civil liability or other legal or equitable relief for any of the following acts or omissions:

(a) furnishing information pursuant to 37-7-1502 through 37-7-1506;

(b) receiving, using or relying on, or not using or relying on information received pursuant to 37-7-1502 through 37-7-1506; or

(c) relying on information that was entered into the registry in error, was factually incorrect, or was released by the board to the wrong person or entity.

(3) The immunity provisions of this section do not apply to the board, a state agency, or any political subdivision of the state.

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Nevada
§ 453.1545

West's Nevada Revised Statutes Annotated (2015)
Title 40. Public Health and Safety
Chapter 453. Controlled Substances
Uniform Controlled Substances Act
General Provisions

§ 453.1545. Development of computerized program to track prescriptions for controlled substances; course of training required for persons who access database; reporting of illegal activity; agreements with state agency of another state to receive or exchange information obtained by program; confidentiality of information obtained from program; immunity from liability for practitioner who transmits certain required information and reports; gifts, grants and donations

. . .

10. A practitioner who is authorized to write prescriptions for and each person who is authorized to dispense controlled substances listed in schedule II, III or IV who makes a good faith effort to comply with applicable laws and regulations when transmitting to the Board or the Division a report or information required by this section or a regulation adopted pursuant thereto is immune from civil and criminal liability relating to such action.

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New Jersey
§ 45:1-48

New Jersey Statutes Annotated (2016)
Title 45. Professions and Occupations
Subtitle 1. Professions and Occupations Regulated by State Boards of Registration and Examination
Chapter 1. General Provisions
[Article 3.3. Prescription Monitoring Program

45:1-48. Immunity from liability

Immunity from liability.

a. The division shall be immune from civil liability arising from inaccuracy of any of the information submitted to it pursuant to sections 25 through 30 of P.L.2007, c. 244 (C.45:1-45 through C.45:1-50).

b. A pharmacy permit holder, pharmacist, mental health practitioner, licensed health care professional, or practitioner shall be immune from civil liability arising from compliance with sections 25 through 30 of P.L.2007, c. 244 (C.45:1-45 through C.45:1-50).

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North Dakota
§ 19-03.5-05

West's North Dakota Century Code Annotated (2015)
Title 19. Foods, Drugs, Oils, and Compounds
Chapter 19-03.5. Prescription Drug Monitoring Program

§ 19-03.5-05. Immunity

Nothing in this chapter requires a prescriber or dispenser to obtain information about a patient from the central repository prior to prescribing or dispensing a controlled substance. **A prescriber, dispenser, or other health care practitioner may not be held liable in damages to any person in any civil action on the basis that the prescriber, dispenser, or other health care practitioner did or did not seek to obtain information from the central repository. Unless there is shown a lack of good faith, the board, any other state agency, a prescriber, dispenser, or any other individual in proper possession of information provided under this chapter may not be subject to any civil liability by reason of:**

1. The furnishing of information under the conditions provided in this chapter;

2. The receipt and use of, or reliance on, such information;

3. The fact that any such information was not furnished; or

4. The fact that such information was factually incorrect or was released by the board to the wrong person or entity.

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Ohio
§ 4729.80

Baldwin's Ohio Revised Code Annotated (2016)
Title XLVII. Occupations--Professions
Chapter 4729. Pharmacists; Dangerous Drugs
Miscellaneous Provisions

§ 4729.80 Disclosure of database information; disclosure of requests for database information

. . .

(D) A pharmacist or prescriber shall not be held liable in damages to any person in any civil action for injury, death, or loss to person or property on the basis that the pharmacist or prescriber did or did not seek or obtain information from the database.

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Oklahoma
63 § 2-309D

Oklahoma Statutes Annotated (2016)
Title 63. Public Health and Safety
Chapter 2. Uniform Controlled Dangerous Substances Act
Article III. Regulation of Manufacture, Distribution, Dispensing, Prescribing, Administering and Using for Scientific Purposes of Controlled Dangerous Substances
Anti-Drug Diversion Act

§ 2-309D. Central repository information--Confidentiality--Access--Disclosure--Penalties—Liability

. . .

G. 1. Registrants shall have access to the central repository for the purposes of patient treatment and for determination in prescribing or screening new patients. The patient's history may be disclosed to the patient for the purposes of treatment of information at the discretion of the physician.

. . .

3. Registrants shall not be liable to any person for any claim of damages as a result of accessing or failing to access the information in the central repository and no lawsuit may be predicated thereon.

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Oregon
§ 431A.865

West's Oregon Revised Statutes Annotated (2016)
Title 36. Public Health and Safety
Chapter 431A. Public Health Programs and Activities
Prescription Monitoring Program
(Program)

§ 431A.865. Prescription monitoring information disclosure; limitations

. . .

(7) Nothing in ORS 431.962 to 431.978 and 431.992 requires a practitioner or pharmacist who prescribes or dispenses a prescription drug to obtain information about a patient from the prescription monitoring program. A practitioner or pharmacist who prescribes or dispenses a prescription drug may not be held liable for damages in any civil action on the basis that the practitioner or pharmacist did or did not request or obtain information from the prescription monitoring program.

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Pennsylvania
35 § 872.8

Purdon's Pennsylvania Statutes and Consolidated Statutes (2016)
Title 35 P.S. Health and Safety
Chapter 6B. Drugs, Poisons and Dangerous Substances
Achieving Better Care by Monitoring All Prescriptions Program (Abc-Map) Act

§ 872.8. Requirements for prescribers

. . .

(e) Immunity.--A prescriber or dispenser who has submitted or received information from the system in accordance with this section and section 7, and has held the information in confidence as required by section 9, shall not be held civilly liable or disciplined in a licensing board action for submitting the information or not seeking or obtaining information from the system prior to prescribing or dispensing a controlled substance.

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South Carolina
§ 44-53-1680

Code of Laws of South Carolina 1976 Annotated (2016)
Title 44. Health
Chapter 53. Poisons, Drugs and Other Controlled Substances
Article 15. Prescription Monitoring Program

§ 44-53-1680. Violations and penalties.

(A) A dispenser or authorized delegate who knowingly fails to submit prescription monitoring information to drug control as required by this article, or who knowingly submits incorrect prescription information, is guilty of a misdemeanor, and upon conviction, must be fined not more than two thousand dollars or imprisoned not more than two years, or both.

(B) A person or persons authorized to have prescription monitoring information pursuant to this article who knowingly discloses this information in violation of this article is guilty of a felony and, upon conviction, must be fined not more than ten thousand dollars or imprisoned not more than ten years, or both.

(C) A person or persons authorized to have prescription monitoring information pursuant to this article who uses this information in a manner or for a purpose in violation of this article is guilty of a felony and, upon conviction, must be fined not more than ten thousand dollars or imprisoned not more than ten years, or both.

(D) Nothing in this chapter requires a pharmacist or practitioner to obtain information about a patient from the prescription monitoring program. **A pharmacist or practitioner does not have a duty and must not be held liable in damages to any person in any civil or derivative criminal or administrative action for injury, death, or loss to person or property on the basis that the pharmacist or practitioner did or did not seek or obtain information from the prescription monitoring program. A pharmacist or practitioner acting in good faith is immune from any civil, criminal, or administrative liability that might otherwise be incurred or imposed for requesting or receiving information from the prescription monitoring program.**

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South Dakota
§ 34-20E-11

South Dakota Codified Laws (2016)
Title 34. Public Health and Safety
Chapter 34-20E. Prescription Drug Monitoring Program

§ 34-20E-11. Immunity from civil liability

Nothing in this chapter requires a prescriber or dispenser to obtain information about a patient from the central repository prior to prescribing or dispensing a controlled substance. **A prescriber, dispenser, or other health care provider may not be held liable in damages to any person in any civil action on the basis that the prescriber, dispenser, or other health care provider did or did not seek to obtain information from the central repository. Unless there is shown a lack of good faith, the board, a prescriber, dispenser, or any other person in proper possession of information provided under this chapter is not subject to any civil liability by reason of:**

(1) The furnishing of information under the conditions provided in this chapter;

(2) The receipt and use of, or reliance on, such information;

(3) The fact that any such information was not furnished; or

(4) The fact that such information was factually incorrect or was released by the board to the wrong person or entity.

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Tennessee
§ 53-10-306
§ 53-10-307
§ 53-10-310

West's Tennessee Code Annotated (2016)
Title 53. Food, Drugs and Cosmetics
Chapter 10. Legend Drugs
Part 3. Tennessee Prescription Safety Act of 2016

§ 53-10-306. Confidentiality; disclosure; penalties

. . .

(k)(1) Any person who obtains or attempts to obtain information from the database by misrepresentation or fraud is guilty of a Class A misdemeanor.

. . .

(5) Where an individual authorized under subsection (a) acts in good faith in accessing or using information from the database in accordance with the limitations under this part, that person shall not incur any civil or criminal liability as a result of that use or access.

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West's Tennessee Code Annotated (2016)
Title 53. Food, Drugs and Cosmetics
Chapter 10. Legend Drugs
Part 3. Tennessee Prescription Safety Act of 2016

§ 53-10-307. Submission and dissemination of information; immunity

(a) The failure of a healthcare practitioner to submit information to the database required under this part after the committee or the commissioner has submitted a specific written request for the information, or when the committee or the commissioner determines the individual has a demonstrable pattern of failing to submit the information as required, is grounds for the denial of licensure, renewal of licensure, or other disciplinary action against the healthcare practitioner before the licensing board with jurisdiction over the healthcare practitioner and for the committee to take the following actions:

(1) Recommend to the appropriate licensure board that it should refuse to issue a license to the individual;

(2) Recommend to the appropriate licensure board that it should refuse to renew the individual's license; and

(3) Recommend to the appropriate licensure board that it should commence disciplinary action against the licensee seeking revocation, suspension, or other appropriate discipline, including civil penalties.

(b) An individual or entity that has submitted information to the database in accordance with this part and in good faith shall not be subject to a suit for civil damages nor held civilly liable for having submitted the information.

(c) An individual or entity that in good faith disseminates information contained in, or derived from, the database to the individuals authorized by this part to receive it in the manner authorized by this part or rules promulgated pursuant to this part, shall not be subject to a suit for civil damages nor held individually liable for having done so.

(d) Submitting the information as required by this part shall not subject the person submitting the information to licensure disciplinary action or any action for breach of confidentiality, ethical duty to a patient, or the sharing of any professional secret.

(e)(1) Failure to submit the required information by any healthcare practitioner shall not be considered a violation if a good faith effort was made and the failure of the report to be transmitted was due to technical difficulties or the inability to have the report received by the database.

(2) Technical difficulties shall include the failure of the database to receive the transmission of any report, the failure of any healthcare practitioner's system or switch used in the transmission of a report, electrical problems, natural disasters, fires, flooding, or other unforeseen circumstance as defined in rules by the commissioner pursuant to § 53-10-311.

West's Tennessee Code Annotated (2016)
Title 53. Food, Drugs and Cosmetics
Chapter 10. Legend Drugs
Part 3. Tennessee Prescription Safety Act of 2016

§ 53-10-310. Electronic access to controlled substance database; penalty

. . .

(d) Any healthcare practitioner, individual or entity who is authorized to access the database by this part shall not be subject to a suit for civil damages or held civilly liable for the failure to register in, report to, or check the database, or for actions taken after reasonable reliance on information in the database, or accessing the database to determine whether or not the healthcare practitioner's professional credentials are being

inappropriately used, or for reporting the same to the appropriate authorities, except as otherwise provided in this part.

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Utah
§ 58-37f-701

West's Utah Code Annotated (2015)
Title 58. Occupations and Professions
Chapter 37F. Controlled Substance Database Act
Part 7. Miscellaneous

§ 58-37f-701. Immunity from liability

(1) An individual who has submitted information to or accessed and reviewed the database in accordance with this chapter may not be held civilly liable, including under Title 78B, Chapter 3, Part 4, Utah Health Care Malpractice Act, for such actions, or lack of action, which are protected and are not subject to civil discovery, as provided in Section 58-37f-302.

(2) Notwithstanding any other provision of law, any action or lack of action by a prescriber or dispenser to meet the requirements of Section 58-37f-303 may not be used by the division in any action against the prescriber or dispenser.

(3) Nothing in Section 58-37f-303 establishes a minimum standard of care for prescribers and dispensers.

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Vermont
18 § 4285

West's Vermont Statutes Annotated (2016)
Title Eighteen. Health
Part 5. Foods and Drugs
Chapter 84A. Vermont Prescription Monitoring System

§ 4285. Immunity

A dispenser or health care provider shall be immune from civil, criminal, or administrative liability as a result of any action made in good faith pursuant to and in accordance with this chapter, but nothing in this section shall be construed to establish immunity for the failure to follow standards of professional conduct or the failure to exercise due care in the provision of services.

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Virginia
§ 54.1-2524

West's Annotated Code of Virginia (2016)
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

§ 54.1-2524. Immunity from liability

A. The Director and the employees of the Department of Health Professions shall not be liable for any civil damages resulting from the accuracy or inaccuracy of any information reported to and compiled and maintained by the Department pursuant to this chapter.

Further, the Director and the employees of the Department of Health Professions shall not be liable for any civil damages resulting from the disclosure of or failure to disclose any information in compliance with subsections B and C of § 54.1-2523 and the Department's regulations.

B. In the absence of gross negligence or willful misconduct, prescribers or dispensers complying in good faith with the reporting requirements of this chapter shall not be liable for any civil damages for any act or omission resulting from the submission of such required reports.

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West Virginia
§ 60A-9-5

West's Annotated Code of West Virginia (2016)
Chapter 60A. Uniform Controlled Substances Act
Article 9. Controlled Substances Monitoring

§ 60A-9-5. Confidentiality; limited access to records; period of retention; no civil liability for required reporting

. . .

(f) Good faith reliance by a practitioner on information contained in the West Virginia Controlled Substances Monitoring Program database in prescribing or dispensing or refusing or declining to prescribe or dispense a schedule II, III, or IV controlled substance shall constitute an absolute defense in any civil or criminal action brought due to prescribing or dispensing or refusing or declining to prescribe or dispense; and

(g) A prescribing or dispensing practitioner may notify law enforcement of a patient who, in the prescribing or dispensing practitioner's judgment, may be in violation of section four hundred ten, article four of this chapter, based on information obtained and reviewed from the controlled substances monitoring database. A prescribing or dispensing practitioner who makes a notification pursuant to this subsection is immune from any civil, administrative or criminal liability that otherwise might be incurred or imposed because of the notification if the notification is made in good faith.

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Wyoming
§ 35-7-1060

West's Wyoming Statutes Annotated (2016)
Title 35. Public Health and Safety
Chapter 7. Food and Drugs
Article 10. Controlled Substances
Article X

§ 35-7-1060. Controlled substances prescription tracking program

. . .

(d) Unless there is shown malice, gross negligence, recklessness or willful and wanton conduct in disclosing information collected under this act, the board, any other state agency and any other person or entity in proper possession of information as provided by this section shall not be subject to any civil or criminal liability or action for legal or equitable relief.

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