



## **120th MAINE LEGISLATURE**

## **FIRST REGULAR SESSION-2001**

Legislative Document

No. 1728

H.P. 1270

House of Representatives, March 21, 2001

An Act to Control the Illegal Diversion and Abuse of Prescription Narcotic Drugs.

(AFTER DEADLINE)

Submitted by the Department of the Attorney General and approved for introduction by a majority of the Legislative Council pursuant to Joint Rule 205.

Reference to the Committee on Criminal Justice suggested and ordered printed.

Millicent M. Mac Jailand

MILLICENT M. MacFARLAND, Clerk

Presented by Representative POVICH of Ellsworth. Cosponsored by Senator McALEVEY of York and Representatives: QUINT of Portland, SCHNEIDER of Durham, SIMPSON of Auburn, SNOWE-MELLO of Poland.

	Be it enacted by the People of the State of Maine as follows:
2	Sec. 1. 17-A MRSA §701, sub-§4, as amended by PL 1981, c. 436,
4	§1, is further amended to read:
6	<b>4.</b> "Written instrument" includes any token, coin, stamp, seal, badge, trademark, credit card, absentee ballot application,
8	absentee ballot envelope, <u>medical drug prescription form</u> , other evidence or symbol of value, right, privilege or identification,
10	and any paper, document or other written instrument containing written or printed matter or its equivalent;
12	Sec. 2. 17-A MRSA §1102, sub-§1, ¶I, as amended by PL 1995, c.
14	499, §2 and affected by §5, is further amended to read:
16	I. Unless listed or described in another schedule, all narcotic drugs, including, but not limited to, <u>the following</u>
18	<u>narcotic drugs or their salts, isomers or salts of isomers:</u> heroin (diacetylmorphine), methadone, methadone
20	hydrochloride, levo-alpha-acetyl-methadol, or LAAM, pethidine, morphine, <u>oxycodone</u> , <u>hydrocodone</u> , <u>hydromorphone</u> ,
22	<u>fentanyl</u> and opium. As used in this chapter, "heroin" means any compound, mixture or preparation containing heroin;
24	Sec. 3. 17-A MRSA §1102, sub-§2, ¶D, as enacted by PL 1975, c.
26	499, §1, is repealed.
28	Sec. 4. 17-A MRSA §1103, sub-§3, ¶D, as amended by PL 1999, c. 422, §2, is further amended to read:
30 32	D. Lysergic acid diethylamide in any of the following quantities, states or concentrations:
52	quancicies, states of concentrations.
34	(1) Any compound, mixture, substance or solution in a liquid state that contains a detectable quantity of
36	lysergic acid diethylamide;
38	(2) Fifty or more squares, stamps, tablets or units of any compound, mixture or substance containing a
40	detectable quantity of lysergic acid diethylamide; or
42	(3) Any quantity of any compound, mixture or substance that, in the aggregate, contains 2,500 micrograms or
44	more of lysergic acid diethylamide; er
46	Sec. 5. 17-A MRSA §1103, sub-§3, ¶E, as enacted by PL 1999, c. 422, §3, is amended to read:
48	E. Fourteen grams or more of methamphetamine+ <u>;</u>
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	Sec. 6. 17-A MRSA §1103, sub-§3, ¶¶F and G are enacted to read:
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4	F. Ninety or more pills, capsules, tablets, vials, ampules, syringes or units containing any narcotic drug other than heroin; or
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8	G. Any quantity of pills, capsules, tablets, units, compounds, mixtures or substances that, in the aggregate, contains 800 milligrams or more of oxycodone or 100
10	milligrams or more of hydromorphone.
12	Sec. 7. 17-A MRSA §1105, sub-§1, ¶¶H and I, as enacted by PL 1999, c. 531, Pt. I, §5, are amended to read:
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16	H. A person violates section 1103 or 1106 and, at the time of the offense, the person trafficks in or furnishes methamphetamine in a quantity of 100 grams or more; or
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20	I. A person violates section 1103 or 1106 and, at the time of the offense, the person trafficks in or furnishes heroin in a quantity of 6 grams or more or 270 or more individual
22	bags, folds, packages, envelopes or containers of any kind containing heroin+; or
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26	Sec. 8. 17-A MRSA  1105, sub-,  J is enacted to read:
28	J. A person violates section 1103 or 1106 and, at the time of the offense, the person trafficks in or furnishes 300 or
30	more pills, capsules, tablets, vials, ampules, syringes or units containing any narcotic drug other than heroin, or any
32	quantity of pills, capsules, tablets, units, compounds, mixtures or substances that, in the aggregate, contains 8,000 milligrams or more of oxycodone or 1,000 milligrams or
34	more of hydromorphone.
36	Sec. 9. 17-A MRSA $1106$ , sub- $3$ , $D$ , as amended by PL 1999, c. 422, $8$ , is further amended to read:
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40	D. Lysergic acid diethylamide in any of the following quantities or concentrations:
42	(1) Not less than 25 squares, stamps, tablets or units of any compound, mixture or substance containing a
44	detectable quantity of lysergic acid diethylamide; or
46	(2) Any quantity of any compound, mixture or substance that, in the aggregate, contains not less than 1,250
48	micrograms of lysergic acid diethylamide; of

Sec. 10. 17-A MRSA §1106, sub-§3, ¶E, as enacted by PL 1999, c. 422,  $\S$ 9, is amended to read: 2 4 Ε. Seven grams or more of methamphetamine+; Sec. 11. 17-A MRSA §1106, sub-§3, ¶¶F and G are enacted to 6 read: 8 F. Forty-five or more pills, capsules, tablets, vials, ampules, syringes or units containing any narcotic drug 10 other than heroin; or 12 G. Any guantity of pills, capsules, tablets, units, 14 compounds, mixtures or substances that, in the aggregate, contains not less than 400 milligrams of oxycodone or not less than 50 milligrams of hydromorphone. 16 Sec. 12. 17-A MRSA §1108, sub-§§1 and 2, as repealed and 18 replaced by PL 1979, c. 512, §33, are amended to read: 20 A person is guilty of acquiring drugs by deception if, 1. as a result of deception, he the person obtains or exercises 22 control over a prescription for a scheduled drug, or what he that person knows or believes to be a scheduled drug, and which is, in 24 fact, a scheduled drug. 26 As used in this section, "deception" has the same 2. 28 meaning as in section 354, subsection 2- and includes: 30 A. Failure by a person, after having been asked by a prescribing health care provider or a person acting under the direction or supervision of a prescribing health care 32 provider, to disclose the particulars of every narcotic drug 34 or prescription for a narcotic drug issued to that person by a different health care provider within the preceding 30 36 days; or 38 B. Furnishing a false name or address to a prescribing health care provider or a person acting under the direction 40 or supervision of a prescribing health care provider. Sec. 13. 17-A MRSA §1108, sub-§5 is enacted to read: 42 5. For purposes of the causation required by subsection 1, 44 engaging in an act of deception described in subsection 2, 46 paragraph A or B is deemed to have resulted in the acquisition of any drugs prescribed to that person by that prescribing health care provider or person acting under the direction or supervision 48 of that prescribing health care provider. 50

Sec. 14. 17-A MRSA §1109, sub-§2, as enacted by PL 1975, c. 499, §1, is amended to read:

- 4 2. Stealing drugs is a-Glass-D-erime-:
- 6 A. A Class C crime if the drug is a schedule W, X or Y drug; or
  - B. A Class D crime if the drug is a schedule Z drug.

Sec. 15. 17-A MRSA §1112, sub-§1, as amended by PL 1979, c. 12 512, §34, is further amended to read:

14 1. A laboratory which that receives a drug or substance from a law enforcement officer or agency for analysis as a 16 scheduled drug shall, if it is capable of so doing, analyze the same as requested by a method designed to accurately determine the composition of the substance, including by chemical means, 18 visual examination, or both, and shall issue a certificate stating the results of such the analysis. Such The certificate, 20 when duly signed and sworn to by a person certified as qualified for this purpose by the Department of Human Services under 22 certification standards set by that department, shall--be is 24 admissible in evidence in any a court of the State of-Maine, and shall-be is prima facie evidence that the composition, quality 26 and quantity of the drug or substance are as stated therein in the certificate, unless with 10 days written notice to the prosecution, the defendant requests that a qualified witness 28 testify as to such the composition, quality and quantity.

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Sec. 16. 32 MRSA §13786-A is enacted to read:

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## <u>§13786-A.</u> Security requirements; rules

1. Rules. The Department of Public Safety, after consultation with the Board of Osteopathic Licensure, the Board 36 of Licensure in Medicine and the Board of Pharmacy, shall adopt 38 rules that establish security requirements for all written prescriptions for schedule II drugs issued by health care 40 providers. For purposes of this section, "schedule II drug" has the same meaning as in the federal Controlled Substances Act of 42 1970, 21 United States Code, Section 812. Rules adopted pursuant to this subsection are routine technical rules as defined in 44 Title 5, chapter 375, subchapter II-A. The rules must include a procedure to obtain a waiver for prescription blanks that provide substantially equivalent protection against forgery. The rules 46 must deal with the following subjects: 48

A. Measures designed to prevent unauthorized copying of a completed or blank prescription form;

 B. Measures designed to prevent the erasure or modification of information written on the prescription by the
 prescribing health care provider; and

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<u>C. Measures to prevent the use of counterfeit prescription</u> forms.

## SUMMARY

12 This bill clarifies the definition of "narcotic drugs" under the Maine Revised Statutes, Title 17-A, chapter 45 by 14 specifically listing the most commonly encountered prescription narcotic drugs by chemical name.

This bill removes archaic references to drug preparations 18 that are inaccurately described or no longer commonly encountered in modern medical treatment.

This bill sets the number of illicit prescription pills or 22 other units that would result in a presumption of trafficking or furnishing at trial: 90 pills or units for trafficking, and 45 24 Oxycodone, for furnishing. Oxycontin, and hydromorphone, Dilaudid, are singled out for separate treatment based on the 26 aggregate amount of the drug in milligrams due to their availability in very powerful single pill dosage formulations. 28

The bill creates a charge of aggravated trafficking and furnishing based on trafficking and furnishing 300 or more pills or other units of narcotic drugs other than heroin. Again, the compounds contained in Oxycontin and Dilaudid are singled out for special treatment based on aggregate amounts of the drugs in milligrams. A charge of aggravated trafficking or furnishing would be a Class A felony, with a mandatory minimum sentence of 4 years in prison.

38 The bill prevents the use of altered, forged or counterfeit prescriptions by having the Department of Public Safety, after 40 consultation with the Board of Osteopathic Licensure, the Board of Licensure in Medicine and the Board of Pharmacy, adopt rules 42 establishing security requirements for written prescriptions for schedule II drugs, primarily through requiring the use of 44 tamper-proof prescription forms.

46 The bill prevents "doctor shopping" by amending the crime of acquiring drugs by deception to clarify that failure to disclose
48 recent narcotic prescriptions from other doctors, or use of a false name or address, is within the definition of "deception."
50 It also addresses the issue of having to prove causation between

obtaining drugs and the deceptive act if the patient deceives the physician in these ways. This provision is based in part on current law in the Province of Saskatchewan, Canada.

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- The bill increases the penalties for stealing schedule W, X or Y drugs by making it a Class C felony offense. Stealing schedule Z drugs would remain a Class D crime. This equalizes the penalties for the crimes of acquiring drugs by deception and stealing drugs.
- The bill clarifies that a medical drug prescription form is a "written instrument" for purposes of the forgery law.
- 14 The bill clarifies that the analysis of a scheduled drug may be by a method designed to accurately determine the composition 16 of the drug, and may include a visual examination. This is intended to approve the already common practice of proving the 18 composition of a commercially manufactured pharmaceutical drug by visual observation of the unique markings on the pill by a 20 chemist or pharmacist.