

# MAINE STATE LEGISLATURE

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# 124th MAINE LEGISLATURE

## FIRST REGULAR SESSION-2009

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Legislative Document

No. 1193

S.P. 441

In Senate, March 25, 2009

### **An Act To Establish Uniform Protocols for the Use of Controlled Substances**

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Reference to the Committee on Business, Research and Economic Development suggested and ordered printed.

A handwritten signature in cursive script that reads "Joy J. O'Brien".

JOY J. O'BRIEN  
Secretary of the Senate

Presented by Senator MILLS of Somerset.

1 **Be it enacted by the People of the State of Maine as follows:**

2 **Sec. 1. 5 MRSA §12004-G, sub-§17-A** is enacted to read:

3 **17-A.**

4 <u>Drug</u>	<u>Joint Practice</u>	<u>Expenses Only</u>	<u>32 MRSA §3300-B</u>
5 <u>Prescriptions</u>	<u>Council on</u>		
6	<u>Controlled</u>		
7	<u>Substances</u>		

8 **Sec. 2. 32 MRSA §3300-B** is enacted to read:

9 **§3300-B. Joint Practice Council on Controlled Substances**

10 **1. Establishment; membership.** The Joint Practice Council on Controlled  
11 Substances is established pursuant to Title 5, section 12004-G, subsection 17-A. The  
12 council consists of 5 members as follows: 2 allopathic physicians appointed by the  
13 board; an osteopathic physician appointed by the Board of Osteopathic Licensure; a  
14 pharmacist appointed by the Maine Board of Pharmacy; and the Director of the Office of  
15 Substance Abuse within the Department of Health and Human Services or a person  
16 designated by the director. The council shall select one of its members to serve as chair.

17 **2. Definitions.** As used in this section, unless the context otherwise indicates, the  
18 following terms have the following meanings.

19 A. "Controlled substance" has the same meaning as in Title 22, section 7246,  
20 subsection 1.

21 B. "Council" means the Joint Practice Council on Controlled Substances under  
22 subsection 1.

23 C. "Prescriber" means a health care practitioner whose license includes the authority  
24 to prescribe a controlled substance.

25 **3. Support.** The board shall staff, support and fund the council.

26 **4. Duties.** The council shall develop, adopt and publish a protocol for the use and  
27 administration of controlled substances.

28 **5. Licensing boards.** A licensing board that licenses health care practitioners shall  
29 adopt a protocol published by the council as a standard of practice for all prescribers  
30 licensed by that board. Failure by a prescriber to adhere to a protocol published by the  
31 council pursuant to this subsection is grounds for discipline by the board with jurisdiction  
32 over the prescriber's license.

33 **6. Minimum standards.** Protocols adopted by the council under subsection 4 must  
34 include at a minimum the following constraints:

35 A. That an opioid or a narcotic drug may not be prescribed beyond 30 days for the  
36 treatment of chronic pain arising from a noncancerous or nonterminal condition

1 except by a prescriber with specialized training and expertise in managing a patient  
2 suffering from chronic pain;

3 B. That a patient being treated for chronic pain may be prescribed an opioid or  
4 narcotic drug from only one prescriber at any given time;

5 C. That a controlled substance may not be dispensed by mail; and

6 D. That a patient may obtain a controlled substance through only one dispensing  
7 pharmacy at any given time and may change pharmacies for such a purpose only with  
8 advance permission of the prescriber managing the condition for which the controlled  
9 substance is being administered.

10 7. Rules. The council shall adopt rules to implement this section. Rules adopted  
11 under this subsection are routine technical rules pursuant to Title 5, chapter 375,  
12 subchapter 2-A.

13

### SUMMARY

14 This bill creates the Joint Practice Council on Controlled Substances under the Board  
15 of Licensure in Medicine to develop and administer protocols for the use and  
16 administration of controlled substances, including requiring an opioid or narcotic drug to  
17 be prescribed in certain circumstances by a health care practitioner with specialized  
18 expertise and training, requiring that a patient's opioid or narcotic drug be prescribed by  
19 only one prescriber at a time, prohibiting a controlled substance from being dispensed by  
20 mail and allowing a patient to obtain a controlled substance at only one pharmacy.