



SB 2316: Creating the Nation's Model Prescription Monitoring Program

The Texas State Board of Pharmacy's prescription monitoring program (PMP) served as the centerpiece of the 2017 Texas Legislature's efforts to address opioid addiction through the practice of "doctor shopping." Texas' PMP collects a patient's prescription drug history, which allows pharmacists and physicians to review a patient's prescription drug history. The ultimate goal of the Legislature's mandate is to stop the practice of "doctor shopping." The 2017 Texas Legislature recognized that electronic health record (EHR) systems were not necessarily ready to connect to the PMP and delayed the mandate for physicians to check the PMP when prescribing certain drugs until September 1, 2019.

The medical organizations listed above represent physicians who treat patients with both acute injuries and chronic pain. They support a robust PMP in Texas and view it as a helpful tool that will limit some misuse and diversion. These organizations believe that SB 2316 is a critical piece of legislation that will help make Texas' PMP the model PMP for other states to follow.

SB 2316 was supported in the Senate committee hearing by pharmacy groups, electronic health record vendors, hospitals, and physician groups. The bill would:

Delay the mandate until March 1, 2020. A manual check of the PMP, which requires logging into the system, is time-intensive, and this creates significant workflow concerns in places like emergency departments. Fortunately, technology is available that integrates the PMP into a patient's medical record, which leads to a seamless check of the patient's prescribing history. The 86th Legislature recognized the importance of the integration technology by dedicating funds in the supplemental budget for the Texas State Board of Pharmacy (TSBP) to acquire the integration licenses.

Achieving broad electronic connection between the PMP and physician/hospital EMR systems and pharmacy systems will be a process, not an event. SB 2316 wisely recognizes that it will take time for TSBP to acquire the licenses and ensure that EHRs are prepared. As a result, SB 2316 would delay the mandate for physicians to check the PMP from September 1, 2019, to March 1, 2020.

Create a PMP advisory committee. The TSBP does not have a technical and quality assurance committee to provide feedback on the PMP. For the PMP to be a useful clinical tool, an interim report recommended the creation of an advisory committee to ensure that the PMP is functioning properly and as designed.

SB 2316's committee substitute would create an advisory committee of physicians, pharmacists, and EHR experts that would identify challenges, assure data integrity/security, monitor progress towards systemwide integration, define best practices, and evaluate how the PMP is functioning in clinical settings.