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Resolve, To Reduce Opioid Overprescription, Overuse and Abuse

Sec. 1 Work group on prescribing opioid drugs for chronic, noncancer-related pain. Resolved: That the Substance Abuse Services Commission, as established in the Maine Revised Statutes, Title 5, section 12004#G, subsection 13#C and referred to in this resolve as "the commission," shall convene a work group of commission members and public and private stakeholders, referred to in this resolve as "the work group," to review and make recommendations for improvements in how physicians and other prescribers treat patients in chronic, noncancer-related pain without causing addiction or diversion.

1. Tasks. The work group's tasks include, but are not limited to:

- A. Review of current efforts in the State aimed at preventing addiction and diversion;
- B. Examination of similar efforts in other states, including Washington State, which in 2010 enacted comprehensive legislation on this subject;
- C. Consideration of additional tools that could lead to decreased abuse while not unduly restricting access to adequate pain control; and
- D. Consideration of enhancements to the Controlled Substances Prescription Monitoring Program established in the Maine Revised Statutes, Title 22, section 7248.

2. Chair; membership. The commission shall appoint a chair of the work group from among the work group members. The membership of the work group must include representatives appointed or invited to participate by the commission from all of the following state agencies, advocacy organizations and the public:

- A. Licensing boards of licensees who prescribe narcotics;
- B. Representatives of professional associations representing the major health professions that prescribe controlled substances;
- C. The Maine Hospice Council, established in the Maine Revised Statutes, Title 22, section 8611;
- D. Representatives of licensed pharmacies; and
- E. Representatives of the Department of Health and Human Services, Office of MaineCare Services, the Maine Hospital Association, specialists in substance abuse treatment and services, specialists in the treatment of addiction and specialists in the treatment of pain.

3. Funding. The commission shall fund the work of the work group from within existing resources.

4. Report. The commission shall report the findings and any recommendations of the work group to the Joint Standing Committee on Health and Human Services not later than December 1, 2011.