

TENNESSEE GENERAL ASSEMBLY  
FISCAL REVIEW COMMITTEE



FISCAL MEMORANDUM

HB 843 – SB 810

March 13, 2019

**SUMMARY OF ORIGINAL BILL:** Requires health care prescribers to issue all prescriptions for controlled substances electronically on or after January 1, 2021. Authorizes a healthcare practitioner to prescribe a partial fill of an opioid. Authorizes a pharmacist to have discretion regarding a partial filling for a Schedule III-V controlled substance. Requires, by January 1, 2020, all pharmacy dispensing software vendors update their software to allow for a partial fill of a controlled substance. Authorizes the Board of Pharmacy (BOP) to take action against pharmacy dispensing software vendors for non-compliance. Deletes treatment guidelines for prescribing opioids and pain clinics.

FISCAL IMPACT OF ORIGINAL BILL:

NOT SIGNIFICANT

**SUMMARY OF AMENDMENT (005777):** Deletes and replaces language in the original bill such that the substantive changes are: (1) to require any subsequent partial fill of a controlled substance be filled within six months from issuance of the original prescription, unless federal law requires it to be filled within a shorter timeframe, as opposed to within 30 days as is the case under current law; (2) to delete language that limited partial fills of a controlled substance to Schedule II controlled substances; (3) to change the date by which all pharmacy dispensing software vendors are required to update their software to allow for a partial fill of a controlled substance, from January 1, 2020, to January 1, 2021, and to delete authorization for the BOP to take action against pharmacy dispensing software vendors for non-compliance; (4) to increase the opioid dosage restriction a healthcare practitioner is currently authorized to treat a patient with in cases where the patient has a condition that will be treated by a procedure that is more than minimally invasive and sound medical judgment would determine the risk of adverse effects from the pain exceeds the risk of the development of a substance use disorder or overdose event; (5) to prohibit a healthcare practitioner from treating a patient with more than a 14-day supply of opioids approved by the food and drug administration to treat upper respiratory symptoms or cough; (6) to delete requirement of current law for a person to pay the prorated portion of cost sharing and copayments for a partial fill prescription of an opioid; and (7) to delete requirement of current law effective July 1, 2019, for a person to pay the prorated portion of cost sharing and copayments for a partial fill prescription of a controlled substance other than an opioid.

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**FISCAL IMPACT OF BILL WITH PROPOSED AMENDMENT:**

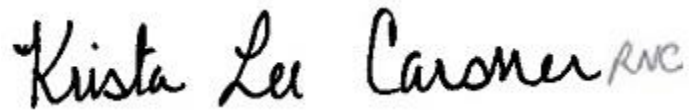
**Unchanged from the original fiscal note.**

Assumptions for the bill as amended:

- Based on information provided by the Department of Finance and Administration, Division of Benefits Administration (Benefits Administration), Benefits Administration provides pharmaceutical benefits to the state group insurance program members through a carved out pharmacy benefits manager (PBM). The PBM can comply with the proposed legislation using their current system configuration.
- Based on information provided by the Division of TennCare (Division), the Division would not pay an additional dispensing fee for the partial fills; therefore, any fiscal impact is estimated to be not significant.

**CERTIFICATION:**

The information contained herein is true and correct to the best of my knowledge.



Krista Lee Carsner, Executive Director

/vlh