AN ACT

To enact R.S. 40:978(G) and (H), relative to opioid prescriptions; to provide for a seven-day limit on prescriptions; to provide for exceptions to the limitation; to authorize a prescription to be filled for a lesser quantity than the maximum prescribed amount; and to provide for related matters.

Be it enacted by the Legislature of Louisiana:

Section 1. R.S. 40:978(G) and (H) are hereby enacted to read as follows:

§978. Prescriptions

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G.(1)(a) Except as provided in Paragraph (2) of this Subsection, when issuing a first time opioid prescription for outpatient use to an adult patient with an acute condition, a medical practitioner shall not issue a prescription for more than a seven-day supply.

(b) Except as provided in Paragraph (2) of this Subsection, a medical practitioner shall not issue a prescription for an opioid to a minor for more than a seven-day supply at any time and shall discuss with a parent or guardian of the minor the risks associated with opioid use and the reasons why the prescription is necessary.

(2) If, in the professional medical judgment of a medical practitioner, more than a seven-day supply of an opioid is required to treat the adult or minor patient's

CODING: Words in struck through type are deletions from existing law; words underscored are additions.
acute medical condition or is necessary for the treatment of chronic pain
management, pain associated with a cancer diagnosis, or for palliative care, the
practitioner may issue a prescription for the quantity needed to treat the patient's
acute medical condition or pain. The condition triggering the prescription of an
opioid for more than a seven-day supply shall be documented in the patient's medical
record and the practitioner shall indicate that a nonopioid alternative was not
appropriate to address the medical condition.

(3) This Subsection shall not apply to medications designed for the treatment
of substance abuse or opioid dependence.

H.(1) Prior to issuing a prescription for an opioid, a medical practitioner
shall do both of the following:

(a) Consult with the patient regarding the quantity of the opioid and the
patient's option to fill the prescription in a lesser quantity.

(b) Inform the patient of the risks associated with the opioid prescribed.

(2)(a) A pharmacist filling a prescription for an opioid may dispense the
prescribed substance in an amount less than the recommended full quantity indicated
on the prescription if requested by the patient and the prescription complies with the
provisions of this Section. The patient may request that the pharmacist fill an
additional amount not to exceed the remaining prescribed quantity at any time prior
to the expiration of the prescription.

(b) If the dispensed amount is less than the recommended full quantity, the
pharmacist or a designee shall ensure that the actual dispensed amount is accurately
recorded in the prescription monitoring program. The pharmacist or a designee shall
also, within seven days, make a notation in the interoperable electronic health record
of the patient if the pharmacist has access to the record.

(c) Nothing in this Subsection shall be interpreted to conflict with or
supersede any other requirement established in this Section for a prescription of a
controlled dangerous substance or any requirements or conditions for drug
substitutions established by law.
The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

HB 192 Original 2017 Regular Session Moreno

Abstract: Provides for a 7-day limit on certain opioid prescriptions.

Proposed law prohibits a medical practitioner from prescribing more than a 7-day supply when issuing a first time opioid prescription for outpatient use to an adult patient with an acute condition. Further prohibits a medical practitioner from issuing a prescription for more than a 7-day supply of an opioid to a minor at any time and requires the practitioner to discuss with a parent or guardian of the minor the risks associated with opioid use and the reasons why the prescription is necessary.

Proposed law exempts prescriptions for more than a 7-day supply which, in the professional medical judgment of the medical practitioner, are necessary to treat the adult or minor patient's acute medical condition or are necessary for the treatment of chronic pain management, pain associated with a cancer diagnosis, or for palliative care.

Proposed law requires a medical practitioner to do both of the following prior to issuing a prescription for an opioid:

1. Consult with the patient regarding the quantity of the opioid and the patient's option to fill the prescription in a lesser quantity.

2. Inform the patient of the risks associated with the opioid prescribed.

Proposed law authorizes a pharmacist filling a prescription for an opioid to dispense the prescribed substance in an amount less than the recommended full quantity indicated on the prescription if requested by the patient. Further authorizes the patient to request that the pharmacist fill an additional amount not to exceed the remaining prescribed quantity at any time prior to the expiration of the prescription.

Proposed law requires, if the dispensed amount is less than the recommended full quantity, the pharmacist or a designee to ensure that the actual dispensed amount is accurately recorded in the prescription monitoring program. Further requires the pharmacist or a designee to also, within seven days, make a notation in the interoperable electronic health record of the patient if the pharmacist has access to the record.

(Adds R.S. 40:978(G) and (H))