

All Westlaw ® versions of statutes and regulations in this Summary are used with permission of the Thomson Reuters Corporation.

2020 **MD** REG TEXT 544832 (NS)

47:2 **Md.** R. 104

Maryland Regulation Text - Netscan

**COMAR** 10.47.07.02, 04, 05

Proposed Actions on Regulations

January 17, 2020

Maryland Department of Health

## **Prescription Drug Monitoring Program**

The purpose of this action is to enable the Maryland Prescription Drug Monitoring Program (PDMP) to implement recent expansion of the requirements and authorities of the PDMP to support the safe and effective use of controlled dangerous substance prescription in Maryland.

**COMAR** 10.47.07.02

**COMAR** 10.47.07.02

**COMAR** 10.47.07.04

**COMAR** 10.47.07.04

**COMAR** 10.47.07.05

**COMAR** 10.47.07.05

### **Title 10**

## **MARYLAND DEPARTMENT OF HEALTH**

### **Subtitle 47 ALCOHOL AND DRUG ABUSE ADMINISTRATION**

#### **10.47.07 Prescription Drug Monitoring Program**

Authority: Health-General Article, §§21-2A-01—21-2A-09, Annotated Code of Maryland

#### **Notice of Proposed Action**

[20-019-P]

The Secretary of Health proposes to amend Regulations .02, .04, and .05 under **COMAR** 10.47.07 **Prescription Drug Monitoring Program**.

#### **Statement of Purpose**

The purpose of this action is to enable the Maryland Prescription Drug Monitoring Program (PDMP) to implement recent expansion of the requirements and authorities of the PDMP to support the safe and effective use of controlled dangerous substance prescription in Maryland. These guidelines are being promulgated in accordance with H.B. 25, Ch. 531, Acts of 2019,

Public Health — Prescription Drug Monitoring Program — Revisions, and H.B. 466, Ch. 364, Acts of 2019, Prescription Drug Monitoring Program — Program Evaluation.

### Comparison to Federal Standards

There is no corresponding federal standard to this proposed action.

### Estimate of Economic Impact

**I. Summary of Economic Impact.** The proposed action would require additional employees and resources. The total impact of the proposed changes for the agency equals \$323,559, including \$100,000 for IT; \$29,741 for start-up, training, and operating costs; and \$193,818 for additional personnel.

Revenue (R+/R-)

#### II. Types of Economic Impact. Expenditure (E+/E-) Magnitude

A. On issuing agency: (E+) \$323,559

B. On other State agencies: NONE

C. On local governments: NONE

Benefit (+) Cost (-) Magnitude

D. On regulated industries or trade groups: NONE

E. On other industries or trade groups: NONE

F. Direct and indirect effects on public: NONE

#### III. Assumptions. (Identified by Impact Letter and Number from Section II.)

A. In total, these regulatory changes will require three full time employees (FTEs), IT resources, and office supplies, as described in H.B. 25's State Agency Explanation of Impact. Ch. 531 requires the Prescription Drug Monitoring Program (PDMP) to expand data analysis activities, increase communication to health care professionals, and provide additional support to the PDMP Technical Advisory Committee (TAC). This will require additional personnel and sustainable IT investment to ensure that this activity can be conducted regularly without impact by competing programmatic demands. Implemented, the proposed action is anticipated to cost \$323,559 in fiscal year 2020. This estimate reflects the costs associated with hiring an epidemiologist and two administrative staff to conduct the data preparation, analysis, and coordinate with the Office of Controlled Substances Administration (OCSA).

The anticipated salary and fringe benefit costs of hiring new FTEs will be \$193,818. In addition to the FTEs, the additional data analysis will require an investment in in-house servers or long-term continuation of existing data storage and processing vendor. The TAC is required to take into account specialty, circumstances, patient type, and location of prescriber or dispenser when reviewing data; this would require additional datasets and/or work on the part of the PDMP to enhance the current data available, and data storage and processing power. This will require the PDMP to acquire, store, and analyze additional data in conjunction with the PDMP data; this expansion in scope of the TAC will require staff time and IT infrastructure.

The Program anticipates operating expenses including additional printing and mailing costs to notify prescribers and provider education. Start-up and training costs are needed for the first year (\$24,600) while staff, IT costs, and operating expenses will be ongoing expenses. The Maryland Department of Health was awarded grant funds from CDC and CMS that can cover anticipated expenditures.

#### **Economic Impact on Small Businesses**

The proposed action has minimal or no economic impact on small businesses.

#### **Impact on Individuals with Disabilities**

The proposed action has no impact on individuals with disabilities.

#### **Opportunity for Public Comment**

Comments may be sent to Jake Whitaker, Acting Director, Office of Regulation and Policy Coordination, Maryland Department of Health, 201 West Preston Street, Room 512, Baltimore, MD 21201, or call 410-767-6499 (TTY 800-735-2258), or email to [mdh.regs@maryland.gov](mailto:mdh.regs@maryland.gov), or fax to 410-767-6483. Comments will be accepted through February 18, 2020. A public hearing has not been scheduled.

ROBERT R. NEALL

Secretary of Health

---

End of Document

© 2020 Thomson Reuters. No claim to original U.S. Government Works.