

STATE OF NEW YORK

9401--A

IN SENATE

March 10, 2026

Introduced by Sen. RIVERA -- read twice and ordered printed, and when printed to be committed to the Committee on Health -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee

AN ACT to amend the public health law, in relation to requiring the department of health to facilitate the exchange of data between the state prescription drug program and electronic health records

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

Section 1. Paragraph (c) of subdivision 1 of section 3343-a of the public health law, as added by section 2 of part A of chapter 447 of the laws of 2012, is amended to read as follows:

(c) The registry shall be secure, easily accessible by practitioners and pharmacists, and compatible with the electronic transmission of prescriptions for controlled substances, as required by section two hundred eighty-one of this chapter, and section sixty-eight hundred ten of the education law, and any regulations promulgated pursuant thereto. To the extent practicable, implementation of the electronic transmission of prescriptions for controlled substances shall serve to streamline consultation of the registry by practitioners and reporting of prescription information by pharmacists. The registry shall be interoperable with other similar registries operated by federal or state governments, to the extent deemed appropriate by the commissioner, and subject to the provisions of section thirty-three hundred seventy-one-a of this article. The commissioner shall promulgate regulations allowing for any electronic health records integration vendor to obtain state approval to facilitate interoperability between the prescription monitoring program registry and certified electronic health records systems that can connect with any national data sharing hub. Such approvals should optimize the ability of prescribers and pharmacists to choose their desired integration technology at no additional cost to the state. Such interoperability shall:

(i) enable prescribers and pharmacists to access the prescription monitoring program registry data directly through their certified elec-

EXPLANATION--Matter in italics (underscored) is new; matter in brackets [-] is old law to be omitted.

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1 tronic health records system or pharmacy dispensing software, including
2 via integration technology in place between the prescription monitoring
3 program registry or national data sharing hub and their certified elec-
4 tronic health records system or pharmacy dispensing software;

5 (ii) enable prescribers and pharmacists to visualize the prescription
6 monitoring program registry data in an integrated manner;

7 (iii) maintain an information security program that complies with
8 industry-standard security and privacy frameworks, and any other infor-
9 mation security standards to be determined by the commissioner;

10 (iv) ensure secure transmission and access to data consistent with
11 applicable state and federal privacy laws, including, but not limited
12 to, the Health Insurance Portability and Accountability Act (HIPAA) and
13 paragraph (d) of this subdivision; and

14 (v) in order to maximize efficiency and limit costs, be enabled to the
15 greatest extent possible through the existing prescription monitoring
16 program technology infrastructure.

17 § 2. This act shall take effect immediately.