

6336

2015-2016 Regular Sessions

I N A S S E M B L Y

March 20, 2015

Introduced by M. of A. ORTIZ -- read once and referred to the Committee
on Health

AN ACT to amend the public health law, in relation to requiring baseline
and periodic and/or targeting drug testing to be utilized by clini-
cians prescribing prescription narcotic drugs

THE PEOPLE OF THE STATE OF NEW YORK, REPRESENTED IN SENATE AND ASSEM-
BLY, DO ENACT AS FOLLOWS:

1 Section 1. Section 3331 of the public health law is amended by adding
2 a new subdivision 8 to read as follows:
3 8. (A) BASELINE AND PERIODIC AND/OR TARGETING DRUG TESTING SHALL BE
4 UTILIZED BY CLINICIANS PRESCRIBING PRESCRIPTION NARCOTIC DRUGS, AS
5 DEFINED BY SUBDIVISIONS (B) AND (C) OF SCHEDULE II OF SECTION
6 THIRTY-THREE HUNDRED SIX OF THIS ARTICLE, TO ESTABLISH A GENERAL ASSESS-
7 MENT FOR NEW PATIENTS AND IN MONITORING ADHERENCE TO EXISTING PATIENT
8 TREATMENT PLANS, AS WELL AS DETECTING THE USE OF NON-PRESCRIBED DRUGS.
9 (B) (I) TESTING SHALL BE REQUIRED PRIOR TO THE ISSUANCE OF THE INITIAL
10 PRESCRIPTION AND SHALL INCLUDE CONFIRMATORY OR QUANTITATIVE METHODS,
11 SUCH AS BUT NOT LIMITED TO LIQUID CHROMATOGRAPHY - MASS SPECTROMETRY
12 TECHNOLOGY.
13 (II) A CLINICIAN SHALL NOT ISSUE IN EXCESS OF A FOUR-DAY SUPPLY OF A
14 PRESCRIPTION NARCOTIC DRUG WITHOUT FIRST OBTAINING CONFIRMATORY OR QUAN-
15 TITATIVE TESTING RESULTS PRIOR TO AN INITIAL PRESCRIPTION BEING ISSUED.
16 (C) SUCH TESTING, AT A MINIMUM, SHALL OCCUR TWICE ANNUALLY. PATIENTS
17 BEING TREATED FOR ADDICTION SHALL BE TESTED AS FREQUENTLY AS NECESSARY
18 TO ENSURE THERAPEUTIC ADHERENCE.
19 (D) THE DEPARTMENT IS DIRECTED TO ENSURE THAT CONFIRMATORY AND QUANTI-
20 TATIVE CHROMATOGRAPHIC DRUG TESTING METHODOLOGIES ARE SUBJECT TO
21 REIMBURSEMENT FOR CLINICAL HEALTH CARE PROVIDERS, INCLUDING CLINICAL
22 LABORATORIES.
23 (E) FOR THE PURPOSES OF THIS SUBDIVISION, THE FOLLOWING DEFINITIONS
24 SHALL APPLY:

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

LBD02534-01-5

1 (I) "BASELINE TESTING" MEANS THE INITIAL PATIENT ASSESSMENT THROUGH
2 URINE DRUG TESTING TO (1) IDENTIFY THE PRESENCE OF ILLICIT SUBSTANCES
3 PRIOR TO PRESCRIBING THE CONTROLLED MEDICATIONS, OR (2) CONFIRM THE
4 PRESENCE OR ABSENCE OF A PRESCRIBED DRUG OR DRUG CLASS.

5 (II) "PERIODIC TESTING" MEANS RANDOM URINE DRUG TESTING, AT RANDOM
6 VISITS WITH A RANDOM SELECTION OF DRUGS TO BE TESTED. THE FREQUENCY OF
7 PERIODIC TESTING SHALL BE BASED ON MEDICAL NECESSITY AND A COMPLETE
8 CLINICAL ASSESSMENT OF THE INDIVIDUAL PATIENT'S RISK POTENTIAL FOR ABUSE
9 AND DIVERSION.

10 (III) "TARGETED TESTING" MEANS A TEST ORDERED AT THE DISCRETION OF A
11 CLINICIAN, BASED ON OBSERVATION OF THE PATIENT AND RELATED CIRCUM-
12 STANCES, THAT ENHANCE CLINICAL DECISION MAKING.

13 S 2. This act shall take effect on the sixtieth day after it shall
14 have become a law.