

STATE OF NEW YORK

6168

2021-2022 Regular Sessions

IN SENATE

April 13, 2021

Introduced by Sen. LANZA -- read twice and ordered printed, and when printed to be committed to the Committee on Health

AN ACT to amend the public health law, in relation to requiring hospital and emergency room physicians to notify a patient's prescriber that such patient is being treated for a controlled substance overdose

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

1 Section 1. Paragraphs (i) and (j) of subdivision 1 of section 3371 of
2 the public health law, as added by section 4 of part A of chapter 447 of
3 the laws of 2012, are amended to read as follows:

4 (i) to a medical examiner or coroner who is an officer of or employed
5 by a state or local government, pursuant to his or her official duties;
6 ~~and~~

7 (j) to an individual for the purpose of providing such individual with
8 his or her own controlled substance history or, in appropriate circum-
9 stances, in the case of a patient who lacks capacity to make health care
10 decisions, a person who has legal authority to make such decisions for
11 the patient and who would have legal access to the patient's health care
12 records, if requested from the department pursuant to subdivision six of
13 section thirty-three hundred forty-three-a of this article or from a
14 treating practitioner pursuant to subparagraph (iv) of paragraph (a) of
15 subdivision two of this section; and

16 (k) to a practitioner to inform him or her that a patient is under
17 treatment for a controlled substance overdose by hospital or emergency
18 room practitioner for the purposes of subdivision two of this section.

19 § 2. Paragraph (a) of subdivision 2 of section 3371 of the public
20 health law, as amended by section 56-b chapter 92 of the laws of 2021,
21 is amended to read as follows:

22 (a) a practitioner, or a designee authorized by such practitioner
23 pursuant to paragraph (b) of subdivision two of section thirty-three
24 hundred forty-three-a, section thirty-three hundred sixty-one of this

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

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1 article or section thirty of the cannabis law, for the purposes of: (i)
2 informing the practitioner that a patient may be under treatment with a
3 controlled substance by another practitioner or that a patient is under
4 treatment for a controlled substance overdose; (ii) providing the prac-
5 titioner with notifications of controlled substance activity as deemed
6 relevant by the department, including but not limited to a notification
7 made available on a monthly or other periodic basis through the registry
8 of controlled substances activity pertaining to his or her patient;
9 (iii) allowing the practitioner, through consultation of the
10 prescription monitoring program registry, to review his or her patient's
11 controlled substances history as required by section thirty-three
12 hundred forty-three-a, section thirty-three hundred sixty-one of this
13 article or section thirty of the cannabis law; and (iv) providing to his
14 or her patient, or person authorized pursuant to paragraph (j) of subdi-
15 vision one of this section, upon request, a copy of such patient's
16 controlled substance history as is available to the practitioner through
17 the prescription monitoring program registry; or

18 § 3. Paragraph (a) of subdivision 2 of section 3371 of the public
19 health law, as added by section 5 of part A of chapter 447 of the laws
20 of 2012, is amended to read as follows:

21 (a) a practitioner, or a designee authorized by such practitioner
22 pursuant to paragraph (b) of subdivision two of section thirty-three
23 hundred forty-three-a of this article, for the purposes of: (i) inform-
24 ing the practitioner that a patient may be under treatment with a
25 controlled substance by another practitioner or that a patient is under
26 treatment for a controlled substance overdose; (ii) providing the prac-
27 titioner with notifications of controlled substance activity as deemed
28 relevant by the department, including but not limited to a notification
29 made available on a monthly or other periodic basis through the registry
30 of controlled substances activity pertaining to his or her patient;
31 (iii) allowing the practitioner, through consultation of the
32 prescription monitoring program registry, to review his or her patient's
33 controlled substances history as required by section thirty-three
34 hundred forty-three-a of this article; and (iv) providing to his or her
35 patient, or person authorized pursuant to paragraph (j) of subdivision
36 one of this section, upon request, a copy of such patient's controlled
37 substance history as is available to the practitioner through the
38 prescription monitoring program registry; or

39 § 4. The opening paragraph of paragraph (a) of subdivision 2 of
40 section 3343-a of the public health law, as added by section 2 of part A
41 of chapter 447 of the laws of 2012, is amended to read as follows:

42 Every practitioner shall consult the prescription monitoring program
43 registry prior to prescribing or dispensing any controlled substance
44 listed on schedule II, III or IV of section thirty-three hundred six of
45 this article, for the purpose of reviewing a patient's controlled
46 substance history as set forth in such registry and every emergency room
47 or hospital practitioner shall consult the prescription monitoring
48 program registry when treating a patient for a controlled substance
49 overdose and shall notify the patient's prescriber of such overdose;
50 provided, however, that nothing in this section shall preclude an
51 authorized practitioner, other than a veterinarian, from consulting the
52 registry at his or her option prior to prescribing or dispensing any
53 controlled substance. The duty to consult the registry shall not apply
54 to:

55 § 5. This act shall take effect immediately; provided, however, that
56 the amendments to paragraph (a) of subdivision 2 of section 3371 of the

1 public health law as amended by section two of this act shall be subject
2 to the expiration and reversion of such subdivision pursuant to section
3 12 of chapter 90 of the laws of 2014, as amended, when upon such date
4 the provisions of section three of this act shall take effect.