

Physician Requirements for Acute Pain

Contained in HB 21

Effective date: July 1, 2018

“Acute pain” means the normal, predicted, physiological, and time-limited response to an adverse chemical, thermal, or mechanical stimulus associated with surgery, trauma, or acute illness. The term does not include pain related to:

1. Cancer.
2. A terminal condition. For purposes of this subparagraph, the term “terminal condition” means a progressive disease or medical or surgical condition that causes significant functional impairment, is not considered by a treating physician to be reversible without the administration of life-sustaining procedures, and will result in death within 1 year after diagnosis if the condition runs its normal course.
3. Palliative care to provide relief of symptoms related to an incurable, progressive illness or injury.
4. A traumatic injury with an Injury Severity Score of 9 or greater.

A prescriber or her designee **must consult the PDMP** to review a patient’s controlled substance dispensing history prior to prescribing a controlled substance for patients age 16 and older.

This requirement does not apply when prescribing or dispensing a non-opioid controlled substance listed in Schedule V. A “non-opioid controlled substance” is a controlled substance that does not contain any amount of a substance listed as an opioid in s.893.03 or 21 U.S.C. 812.

Exceptions from this requirement:

- The department determines the system to be nonoperational;
- Cannot be accessed by the prescriber or dispenser because of a temporary technological or electrical failure. A prescriber or dispenser who does not consult the system shall document the reason he or she did not consult the system in the patient’s medical record.

By January 31, 2019, and at each subsequent renewal:

Must complete a board-approved 2-hour continuing education course as part of the biennial license renewal.

The course must be offered by a statewide professional association of physicians in this state that is accredited to provide educational activities designated for the American Medical Association Physician’s Recognition Award Category I Credit or the American Osteopathic Category 1-A continuing medical education requirement.

This section **applies to MDs, DOs, dentists and podiatrist (registered with the DEA and authorized to prescribe controlled substances)**. ARNPs and PAs **have an existing requirement for a 3 hour course** in order to prescribe controlled substances.

The course must include:

- Current standards for prescribing controlled substances, particularly opiates;
- Alternatives to standards;
- Nonpharmacological therapies;
- Prescribing emergency opioid antagonists;
- The risks of opioid addiction following all stages of treatment in the management of acute pain.

DOH to adopt **rules establishing guidelines for prescribing controlled substances** for acute pain, similar to guidelines established for the prescribing of controlled substances for chronic pain.

Such rules must address:

- Evaluation of the patient;
- Creation and maintenance of a treatment plan;
- Obtaining informed consent and agreement for treatment;
- Periodic review of the treatment plan;
- Consultation;
- Medical record review; and
- Compliance with controlled substance laws and regulations.

Schedule II controlled substance for the treatment of acute pain:

May not exceed a 3-day supply, except that up to a 7-day supply may be prescribed if:

- The prescriber, in his or her professional judgment, believes that more than a 3-day supply of such an opioid is medically necessary to treat the patient's pain as an acute medical condition;
- The prescriber indicates "**ACUTE PAIN EXCEPTION**" on the prescription; and
- The prescriber adequately documents in the patient's medical records the acute medical condition and lack of alternative treatment options that justify deviation from the 3-day supply limit established in this subsection.

* For the treatment of pain other than acute pain, a prescriber must indicate "FOR NONACUTE PAIN" on a prescription for an opioid drug listed as a Schedule II controlled substance. Definition of Chronic Pain: pain unrelated to cancer which persists beyond the usual course of disease or the injury that is the cause of the pain or more than 90 days after surgery.

Schedule II treatment of pain related to a traumatic injury with an Injury Severity Score of 9 or greater:

Physician must concurrently prescribe an **emergency opioid antagonist**, as defined in s. 381.887(1).

CERTIFICATE OF EXEMPTION:

A pain management clinic claiming an exemption from the registration requirements, must apply for a certificate of exemption on a form adopted in rule and must renew such exemption biennially.

Clinics that are exempt include hospitals, a clinic in which the majority of the physicians who provide service in the clinic primarily provide surgical services, medical schools, and clinics owned and operated by anesthesiologists, physiatrists, rheumatologists or neurologists.