


*I Mina'trentai Sais Na Liheslaturan Guåhan*  
**BILL STATUS**

BILL NO.	SPONSOR	TITLE	DATE INTRODUCED	DATE REFERRED	CMTE REFERRED	PUBLIC HEARING DATE	DATE COMMITTEE REPORT FILED	FISCAL NOTES	NOTES
168-36 (LS)	Telena Cruz Nelson	AN ACT TO ADD NEW §§ 41806 AND AMEND §§ 41810 OF ARTICLE 18, CHAPTER 4, DIVISION 1, TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO THE REQUIRED REGISTRATION OF PRESCRIBERS TO THE GUAM PRESCRIPTION MONITORING PROGRAM (PDMP).	8/4/21 1:32 p.m.						

***I MINA'TRENTAI SAIS NA LIHESLATURAN GUÅHAN***  
**2021 (FIRST) Regular Session**

**Bill No. 168-36 (LS)**

Introduced by:

Telena Cruz Nelson 

**AN ACT TO ADD NEW §§ 41806 AND AMEND §§ 41810 OF ARTICLE 18, CHAPTER 4, DIVISION 1, TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO THE REQUIRED REGISTRATION OF PRESCRIBERS TO THE GUAM PRESCRIPTION MONITORING PROGRAM (PDMP).**

1 **BE IT ENACTED BY THE PEOPLE OF GUAM:**

2 **Section 1. Legislative Findings and Intent** *I Liheslaturan Guåhan* finds  
3 that Schedule II, Schedule III, or Schedule IV substances and other controlled  
4 substances are widely prescribed in the medical field, but these medications may  
5 also be misused, abused, or diverted for nonmedical purposes. The Guam  
6 Prescription Drug Monitoring Program (PDMP) was established to ensure the  
7 integrity in the healthcare community by providing prescribers and pharmacies  
8 information of their patients to assure legitimate use of controlled substances. The  
9 Department of Public Health and Social Services (DPHSS) has the authority to  
10 adopt rules relating to the control of the manufacture, distribution, prescribing, and  
11 dispensing of controlled substances in Guam, and such rules implement the  
12 monitoring of pharmaceutical controlled substances.

1 Prescribers in forty-two (42) states are currently required to check their  
2 respective state PDMP prior to prescribing controlled substances. As of May 2021,  
3 Guam currently has a total of three hundred ninety-two (392) unique physicians  
4 with a controlled substance registration; however, only sixty-five (65) are  
5 registered to the PDMP database, and only thirty-one percent (31%) of all  
6 prescriptions on Guam have reports generated from the PDMP database by a  
7 pharmacist or physician. The mandated use and review of the database within the  
8 PDMP is intended to help reduce misuse, abuse, and diversion of controlled  
9 substances.

10 Several states like Kansas, Colorado, and Oregon have implemented various  
11 systems that can be integrated within the PDMP database to reduce the incidence of  
12 opioid use disorder, which include updating the reporting requirements for  
13 dispensers and the utilization of a prescriber report card. Currently, the reporting  
14 requirements for dispensers to report prescription activity to the PDMP in Guam is  
15 for every fifteenth (15<sup>th</sup>) and the last day of each month, which causes delayed access  
16 to data information. Starting on January 1, 2021 in California, the dispensing of a  
17 controlled substance must be reported within one (1) working day after the  
18 medication is released to the patient. The previous deadline to report was seven (7)  
19 days after dispensing. Enabling such legislation will provide access to live data  
20 which will enable better utilization of the PDMP system, alongside the use of a  
21 practitioner report card. Many states, including the District of Columbia, use their  
22 state's PDMPs to send doctors individualized report cards that show how their  
23 prescribing of opioid controlled substances compared with their peers. A practitioner  
24 report card is intended to provide an opportunity for the practitioner to examine their  
25 prescribing behaviors in the context of improving the quality of their patient's care.  
26 The state of Tennessee, for example, analyzes the top prescribers of controlled  
27 substances and releases to prescribers a report card identifying those individuals

1 prescribing controlled substances at a high rate. In Minnesota, practitioner report  
2 cards show that the number of annual opioid prescriptions for patients dropped by at  
3 least thirty percent (30%), according to new data from the Minnesota Department of  
4 Human Health Services. Some physicians have found that informing doctors about  
5 their prescribing levels was an important step in reducing the number of opioid  
6 prescriptions.

7 Clinicians should review the patient’s history of controlled substance  
8 prescriptions using the PDMP at least every three (3) months to determine whether  
9 the patient is receiving unnecessary opioid dosages or dangerous combinations that  
10 may put the patient at a high risk for overdose.

11 It is, therefore, the intent of *I Liheslaturan Guåhan* to require any practitioner  
12 on Guam who engages in the practice of dispensing, prescribing, or administering a  
13 controlled substance to be registered in the Guam PDMP. Dispensers and prescribers  
14 shall be required to utilize the PDMP and obtain any prescription information insofar  
15 as the information relates to the patient under the purview of the dispenser or  
16 prescriber.

17 **Section 2.** A new § 41806.1 is hereby *added* to Article 18 of Chapter 4,  
18 Division 1, Title 26, Guam Administrative Rules and Regulations, to read:

19 “§ 41806.1. Registration Requirement.

20 Any person or practitioner on Guam who intends to engage in the practice of  
21 dispensing, prescribing, or administering of a controlled substance within Guam  
22 shall be registered in the Guam Prescription Drug Monitoring Program.”

23 **Section 3.** § 41810(a) and (d) of Article 18, Chapter 4, Division 1, Title 26,  
24 Guam Administrative Rules and Regulations, are hereby amended to read:

25 “(a) A prescriber, or licensed health care practitioner duly authorized by a  
26 prescriber, shall obtain any prescription monitoring information insofar as the  
27 information relates to a patient under the prescriber’s care. The information shall be

1 provided in a format established by the Department, which may include, but is not  
2 limited to, delivery by electronic means, facsimile transmission, or telephonic  
3 communication. The information shall be provided within twenty-four (24) business  
4 hours of the prescriber's request."

5       “(d) A prescriber, or licensed health care practitioner duly authorized by a  
6 prescriber, shall, before writing a prescription for a controlled substance listed in  
7 Schedule II, III, IV, or V for a patient, obtain a patient utilization report regarding  
8 the patient for the preceding twelve (12) months from the computerized program  
9 established by the Department pursuant to § 67.301 of Chapter 67, Title 9 Guam  
10 Code Annotated, if: ~~the prescriber has a reasonable belief that the patient may be~~  
11 ~~seeking the controlled substance, in whole or in part, for any reason other than the~~  
12 ~~treatment of an existing medical condition and:~~

- 13       (1) the patient is a new patient of the prescriber, or
- 14       (2) the patient has not received any prescription for a controlled substance  
15 from the prescriber in the preceding twelve (12) months.

16       The prescriber shall review the patient utilization report to assess whether the  
17 prescription for the controlled substance is medically necessary.”

18       **Section 4. Severability** If any provision of this Act or its application to any  
19 person or circumstance is found to be invalid or contrary to law, such invalidity shall  
20 not affect other provisions or applications of this Act that can be given effect without  
21 the invalid provision or application, and to this end the provisions of this Act are  
22 severable.