

MAPS - Updates & Opioid Laws

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Conflict of Interest Disclosures; Kim Gaedeke

I do not have any relationships with any entities producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients or any other potential conflicts to disclose.



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Bureau of Professional Licensing

- Established in July 2015
- 10 Occupational Licensing/Regulation Boards
- 27 Health Professional Licensing/Regulation Boards
- Boards are advisory and determine sanctions
- License and regulate over 758,000 individuals
- 3 Divisions: Licensing, Investigations & Inspections, Enforcement
- Enforcement Division: Administers Pharmacy and Drug Monitoring Section and Michigan Automated Prescription System (MAPS) Section; investigates overprescribing, over dispensing, and drug diversion



MAPS Background

- Contains over 120 million records
- Data maintained for 5 years
- Required reporting of CS Schedule 2-5 from:
 - Prescribers who dispense CS Schedule 2-5
 - Pharmacists (dispensers)
 - Veterinarians
- Required as of June 1, 2018 to register and use MAPS:
 - Prescribers



MAPS – NarxCare Integrations

Generic
Electronic Health Record

Stephanie Marshall List Recent Search

Acct Number: 1836593821 DOB: 2/16/1959 Immunizations: None Narx: **Nar 301, Sed 240, Stim 000, Ovd 180**
MRN: #324561 Gender: M Allergies: aspirin, latex, peanuts Fall Risk Score: 6
Bed: 10 Code: Full Code Adv Directive: Yes Attending: Dr. Goodall

Chart Summary	Chart Summary
Procedures and Diagnoses	Anticipated Discharge Date –
Allergies	Reason for Visit
Mar	Fall, hip pain
Results	Advance Directive- Yes – 03/23/09
Power Note	Code Status
Orders	Full Code
Form Browser	Allergies
Patient Information	Aspirin
Immunization Schedule	Latex
Reference Text Browser	Peanuts
Problems and Diagnoses	
Consults	

NarxCare:	Narcotic	301	Show Report
	Sedative	240	
	Stimulant	000	
	Overdose	180	
Blood Type –	Skin Integrity Risk Score –		
Fall Risk Score – 6 (conley)	Lab Pregnancy Status		
Pain Scale 5	N/A		
Pain Location	Immunizations		
	None		

March 25, 2016 7:00 AM CDT

Vital Signs	
Oxygen Therapy	
Pain Assessment Detail	
General	
CV Assessment	
Edema Assessment	
Respiratory Assessment	
Nursing Notes	
Note Writer	
PE Elements	



MAPS - NarxCare Report

Williams, Johnny Age: 33M Date: 7/17/2017 | [NARX REPORT](#) | [RESOURCES](#)

Communications Messages: 0 Care Notes: 0 [Add Note](#)

Risk Indicators

Narx Scores		Overdose Risk Score	Red Flags (2)
Narcotic	633	590 (range 0-999)	<ul style="list-style-type: none"> >= 4 opioid or sedative dispensing pharmacies in any 90 day period in the last 2 years >= 5 opioid or sedative providers in any year in the last 2 years
Sedative	280		
Stimulant	000		
Explain these scores		Explain the overdose risk score	Explain these red flags

Graphs

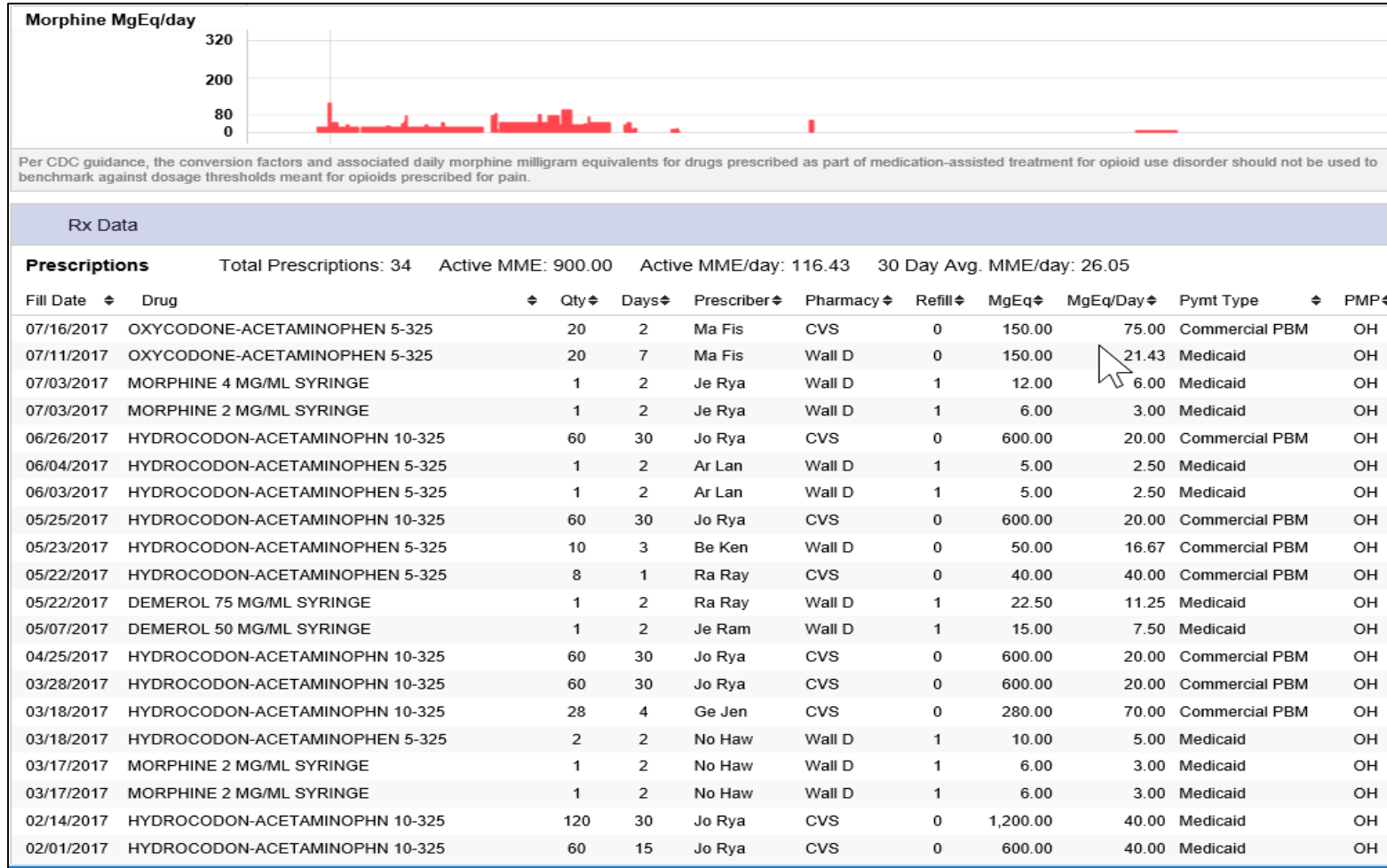
Rx Graph Narcotic Sedative Stimulant

All Prescribers

Prescribers	09/21	2m	6m	1y	2y
15 - Fernandez, Bruce					
14 - Harris, Ruth					
13 - Martin, Patricia					
12 - Holmes, Helen					
11 - Nichols, Jason					
10 - King, James					
9 - Hawkins, Norma					
8 - Jenkins, Gerald					
7 - Ramos, Jesse					
6 - Ray, Ralph					
5 - Kennedy, Beverly					
4 - Lane, Arthur					
3 - Ryan, Jonathan					
2 - Ryan, Jerry					
1 - Fisher, Marie					



MAPS – NarxCare Report (continued)



MAPS – NarxCare Report (continued)

02/01/2017	HYDROCODON-ACETAMINOPHN 10-325	60	15	Jo Rya	CVS	0	600.00	40.00	Medicaid	OH
01/23/2017	OXYCODONE-ACETAMINOPHEN 5-325	60	7	Ma Fis	CVS	0	450.00	64.29	Medicaid	OH
01/12/2017	MORPHINE 2 MG/ML SYRINGE	1	30	No Haw	Wall D	1	6.00	0.20	Private Pay	OH
01/12/2017	MORPHINE 4 MG/ML SYRINGE	1	2	No Haw	Wall D	1	12.00	6.00	Private Pay	OH
01/10/2017	OXYCODONE-ACETAMINOPHEN 5-325	120	30	Jo Rya	CVS	0	900.00	30.00	Commercial PBM	OH
01/07/2017	DEMEROL 25 MG/ML SYRINGE	1	2	Ja Kin	Wall D	1	7.50	3.75	Private Pay	OH
01/03/2017	HYDROCODON-ACETAMINOPHEN 5-325	60	8	Ja Nic	CVS	0	300.00	37.50	Medicaid	OH
12/26/2016	HYDROCODON-ACETAMINOPHEN 5-325	60	8	Ja Nic	Wall D	0	300.00	37.50	Commercial PBM	OH
12/11/2016	HYDROCODON-ACETAMINOPHEN 5-325	28	5	He Hol	CVS	0	140.00	28.00	Private Pay	OH
12/07/2016	HYDROCODON-ACETAMINOPHEN 5-325	14	7	Pa Mar	CVS	0	70.00	10.00	Commercial PBM	OH
12/07/2016	HYDROCODON-ACETAMINOPHEN 5-325	2	2	Pa Mar	Wall D	1	10.00	5.00	Private Pay	OH
11/07/2016	HYDROCODON-ACETAMINOPHEN 5-325	10	5	Pa Mar	CVS	0	50.00	10.00	Private Pay	OH
11/06/2016	HYDROCODON-ACETAMINOPHEN 5-325	1	2	Ru Har	Wall D	1	5.00	2.50	Private Pay	OH
08/01/2016	OXYCODONE-ACETAMINOPHEN 5-325	20	3	Br Fer	Wall D	0	150.00	50.00	Commercial PBM	OH
11/12/2015	MORPHINE 2 MG/ML SYRINGE	1	30	Pa Mar	Wall D	1	6.00	0.20	Private Pay	OH

Providers		Total Providers: 15				
Name	Address	City	State	Zipcode	DEA	
Fernandez, Bruce	4367 Pleasant Crossing	Five Points	OH	44262-6811	234853	
Fisher, Marie	7175 Cozy Rabbit Vista	Anderson Ferry	OH	43622-1298	234756	
Harris, Ruth	2003 Stony Nectar Cove	Kingsleys Corners	OH	45983-3673	234843	
Hawkins, Norma	6763 Emerald Robin Parkway	Apple Grove	OH	45273-0588	234852	
Holmes, Helen	8869 Burning Fox Impasse	Bayer Trailer Court	OH	45202-9797	234841	
Jenkins, Gerald	9393 Lost Field	Maple	OH	43654-8273	234851	
Kennedy, Beverly	3099 Umber Pathway	Damascus	OH	44609-5908	234847	
King, James	3355 Rustic Cloud Wynd	Yankee Crossing	OH	45430-6188	234845	
Lane, Arthur	2331 Cozy Port	Holiday City	OH	45620-5987	234844	
Martin, Patricia	7600 Shady Hickory Stead	Fort Jennings	OH	44170-2847	234850	
Nichols, Jason	9093 Hidden Pioneer Lookout	East Gardens	OH	43321-4331	234848	
Ramos, Jesse	9166 Bright Pond Crescent	Belmore	OH	45970-9899	234840	
Ray, Ralph	1467 Little View Townline	West Akron	OH	43739-7351	234849	
Ryan, Jerry	163 Sleepy Edge	Oakthorpe	OH	44740-5125	234846	
Ryan, Jonathan	9892 Silent Elk Ramp	Sites Lake Cottage Area	OH	44502-5801	234842	



MAPS – NarxCare Report (continued)

Pharmacies		Total Pharmacies: 6					
Name	Address	City	State	Zipcode	DEA		
CVS	5483 Gentle Impasse	Home Park	OH	43242-6009	345796		
CVS	7139 High Pond Walk	Randolph Landing	OH	45487-2143	345840		
Wall Drug	3799 Foggy Dale	Herner Corners	OH	45658-6817	345841		
Wall Drug	4543 Iron Carrefour	Powers	OH	43803-2784	345839		
Wall Drug	5639 Cotton Dale Close	Cedar Springs	OH	43423-4846	345842		
Wall Drug	8129 Easy Dell	Antiquity	OH	45300-0810	345843		

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MAPS – NarxCare

- Narx Scores and Predictive Risk Scores (overdose)
 - Scores: based on algorithms, including MMEs, number of prescribers and pharmacies
 - Scores: Ranges from 000-999; higher scores equate to higher risk and misuse
- Red Flags
- Rx Graphs
- PDMP Data
- Used as a tool to help make informed decisions, but should not be the sole basis on how a clinician treats his/her patients.



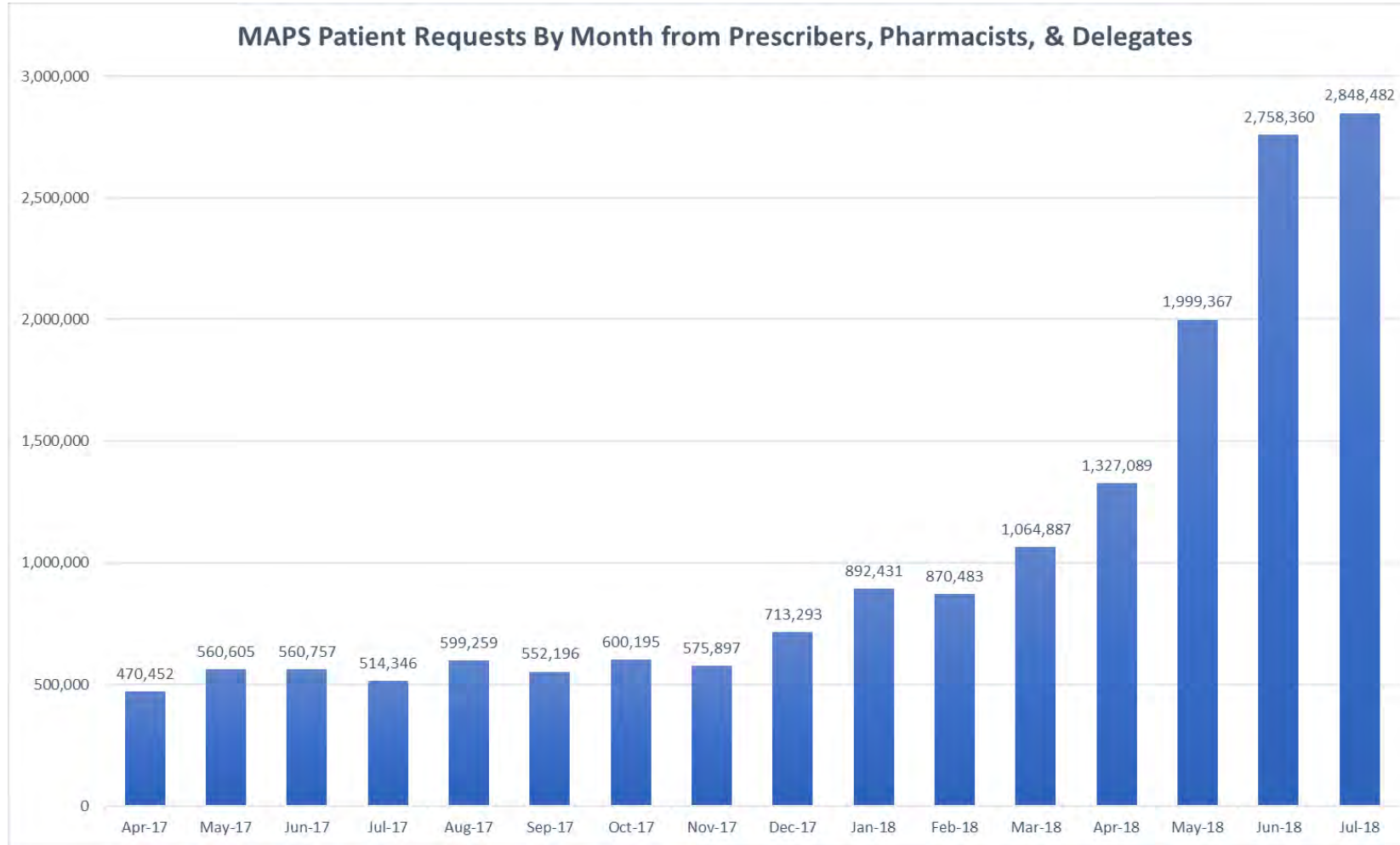
Integrations & Registrations as of October 2018

MAPS Integrations		
	In-Production	Pending Production (In- discussion, received request, or in-testing)
Health System	16	8
Hospital	62	35
Number of Prescribers	28,641	18,104
Number of Pharmacies	413	13
Total Number of Healthcare Professionals	30,887	18,894
TOTAL	30,954	37,054

MAPS Online Registered Users		
	As of 04/04/2017 ("Go-Live")	As of 10/31/2018
Prescribers	9,156	41,984
Pharmacists	3,994	7,996
Delegates	1,096	17,189
TOTAL	14,246	67,169



MAPS – Patient Requests



CUSTOMER DRIVEN. BUSINESS MINDED.

Bureau of Professional Licensing

Complaint & Enforcement Process



CUSTOMER DRIVEN. BUSINESS MINDED.

Filing A PHC Complaint with BPL

- Nursing profession complaints submitted online
- All other health professions submitted using BPL's Complaint Form
- Complaints are submitted to BPL's Investigations and Inspections Division

May we release your name and this information to the practitioner?
 Yes No

Please be advised this agency DOES NOT assist citizens seeking reimbursement or resolution of billing or fee disputes or investigate anonymous complaints. In addition, this agency DOES NOT handle complaints against health care facilities.

INSTRUCTIONS: Print legibly or type information. Complete all sections of this form. Sign at the bottom. Return the form to the address above. Please complete a separate form for each practitioner you are filing a complaint against.

Information About You			Complaint Being Filed Against	
Your Name			Practitioner's First and Last Name	
Street Address			Street Address	
City			City	
State	Zip Code	Country	State	Zip Code
Patient's Name			Practitioner's Telephone Number	
Patient's Date of Birth (MM/DD/YYYY)			Treatment/Incident Date	
Patient's Last 4 Digits of Their Social Security Number			Would you like to authorize a person other than yourself to communicate with the Department regarding your complaint? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Your Telephone Numbers With Area Code			Name:	
Cell:			Address:	
Home:			Telephone Number:	
Work:			Relationship to You:	
Check the profession for which you are lodging a complaint about: <input type="checkbox"/> Acupuncture <input type="checkbox"/> Marriage & Family Therapist <input type="checkbox"/> Osteopathic Physician (DO) <input type="checkbox"/> Respiratory Therapist <input type="checkbox"/> Allopathic Physician (MD) <input type="checkbox"/> Massage Therapist <input type="checkbox"/> Pharmacist <input type="checkbox"/> Sanitarian <input type="checkbox"/> Athletic Trainer <input type="checkbox"/> Nurse (RN or LPN) <input type="checkbox"/> Pharmacy Technician <input type="checkbox"/> Social Worker <input type="checkbox"/> Audiologist <input type="checkbox"/> Nursing Home Administrator <input type="checkbox"/> Physical Therapist <input type="checkbox"/> Speech/Language Pathologist <input type="checkbox"/> Chiropractor <input type="checkbox"/> Physician's Assistant <input type="checkbox"/> Veterinarian <input type="checkbox"/> Counselor <input type="checkbox"/> Occupational Therapist <input type="checkbox"/> Podiatrist <input type="checkbox"/> Dentistry <input type="checkbox"/> Optometrist <input type="checkbox"/> Psychologist				
Are there civil actions pending? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is there a police report? <input type="checkbox"/> Yes <input type="checkbox"/> No	May we release your name and this information to the practitioner? <input type="checkbox"/> Yes <input type="checkbox"/> No	Will you testify at an Administrative Hearing if necessary? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Please provide details of your specific concerns related to the treatment rendered. Attach additional sheets if necessary.				
Your Signature			Date	

The Department of Licensing and Regulatory Affairs will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability or political beliefs. If you need assistance with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.



Filing A PHC Complaint with BPL- FAQs

Q: Do I have to report a colleague who may have violated the Public Health Code?

- MCL 333.16222(1)
- A licensee or registrant who has knowledge that another licensee or registrant has committed a violation under section 16221, article 7, or article 8 or a rule promulgated under article 7 or article 8 **shall** report the conduct and the name of the subject of the report to the department.
- Failure of a licensee or registrant to make a report under this subsection **does not give rise to a civil cause of action** for damages against the licensee or registrant, but the licensee or registrant **is subject to administrative action** under sections 16221 and 16226.

Q: Will my identity remain confidential?

- MCL 333.16222(2)
- Unless the licensee or registrant making a report under subsection (1) otherwise **agrees in writing**, the identity of the licensee or registrant making a report under subsection (1) **shall** remain confidential **unless disciplinary proceedings under this part are initiated** against the subject of the report and the licensee or registrant making the report is required to testify in the proceedings.

Q: Do I have to report a colleague who may be impaired?

- MCL 333.16223
- . . . a licensee or registrant who has reasonable cause to believe that a licensee, registrant, or applicant is impaired **shall** report that fact to the department.
- A licensee or registrant who fails to report under this subsection is **not liable in a civil action** for damages resulting from the failure to report, but the licensee or registrant **is subject to administrative action** under sections 16221 and 16226.
- A licensee or registrant who in good faith complies with this section is **not liable for damages in a civil action or subject to prosecution in a criminal proceeding as a result of the compliance.**



The PHC Complaint/Enforcement Process

- Complaint is submitted to and reviewed by the Inspections and Investigations Division
 - *closed or authorized for investigation*
 - Complaint is investigated
 - *Closed, referred to expert, or transferred to Enforcement Division for drafting of Administrative Complaint and possible Order of Summary Suspension*
- ➔
- Enforcement Division drafts and serves Administrative Complaint and possible Order of Summary Suspension (OSS)
 - OSS can be mandatory or discretionary
- ➔
- Licensee receiving Administrative Complaint elects either
 - *A compliance conference, settlement, or formal administrative hearing*
 - *Failure to respond results in automatic sanctions imposed by a Board's Disciplinary Subcommittee (DSC) via a Final Order*
 - Licensee receiving Order of Summary Suspension and Administrative Complaint
 - *Cannot practice until matter is resolved through the administrative hearing process*

The PHC Complaint/Enforcement Process- *Continued*

- If the Department proposes settlement terms
 - *If Licensee agrees to terms, a Consent Order and Stipulation is drafted. After Licensee and the Department sign the document, it is forwarded to the Board's DSC for review*
 - *The DSC either approves the Consent Order and Stipulation, making it legal and binding, or rejects it and proposes a counter offer*
 - *If a settlement cannot be reached, the matter is forwarded for a formal administrative hearing*
- If the matter goes through the formal administrative hearing process
 - *Based on the issuance of an Administrative Complaint and OSS, Licensee's election, or a failure to reach a settlement*
 - *The DSC either approves the Proposal for Decision making it legal and binding, dismisses the Administrative Complaint based on the Administrative Law Judge's (ALJ) findings, or reverses the ALJ and makes its own findings of fact and conclusions of law*
- Licensee may appeal the DSC's decision to the Michigan Court of Appeals
- If no appeal, the Department monitors Licensee's compliance with further sanctions for noncompliance



Legislative Action

New Opioid Laws



CUSTOMER DRIVEN. BUSINESS MINDED.

Public Act 246 of 2017

Requires disclosure of opioid information to minors and patients.

- Beginning **June 1, 2018**, a prescriber shall comply with the following before issuing a new prescription for a controlled substance containing an opioid to a minor:
 - Discuss with the minor and the minor's parent or guardian the potential risks of addiction and overdose associated with the controlled substance.
 - Discuss the increased risk of addiction to a controlled substance to an individual suffering from both mental and substance abuse disorders.
 - Discuss the danger of taking a controlled substance containing an opioid with benzodiazepine, alcohol, or another central nervous system depressant.
 - Discuss any other information in the patient counseling information section of the label for the prescription.

Public Act 246 of 2017



- Requires the signature of the minor's parent or guardian to consent to the minor's treatment on a "start talking consent form", which is to be filed in the minor's medical record.
- The form is to contain:
 - Signatures of the parties involved.
 - Information on the name and quantity of the controlled substance.
 - Acknowledgement that the drug has potential for abuse.
 - A statement certifying that the prescriber discussed with the minor and the minor's guardian the potential risks of the drug.
- If an adult signing a consent form is not the parent or guardian, the prescriber shall not prescribe more than a single 72-hour supply of the controlled substance to the minor.



Public Act 246 of 2017

- Exceptions to the law in case of emergency:
 - If it is detrimental to the minor's health.
 - Certain surgical circumstances.
 - Specific hospice related instances.
 - If the minor's parent or guardian is not legally required to consent.
- Beginning **June 1, 2018**, before an opioid is prescribed to a patient, a prescriber shall provide the following information:
 - The dangers of opioid addiction.
 - How to properly dispose of an expired, unused, or unwanted controlled substance.
 - That the delivery of a controlled substance is a felony under Michigan Law.
 - If the patient is pregnant or is a female of reproductive age, the short and long term effects of exposing a fetus to an opioid, including but not limited to neonatal abstinence syndrome.

Public Act 246 of 2017



- The prescriber shall obtain the signature of the patient or the patient's representative on a form provided by the Department of Health and Human Services, that they were informed of the above requirements. The form can be found at michigan.gov/stopoverdoses under the prescriber tab.
- The signed form shall be kept in the patient's medical record.
 - The requirement does not apply if the controlled substance is prescribed for inpatient use
- Provides sanctions for prescribers for failing to inform minors and their guardians of the risks of opioid abuse.



Public Act 247 of 2017 (PA 101 of 2018)



Please note this law was amended with PA 101 of 2018, which extends the effective date to March 31, 2019 unless LARA promulgates rules to provide exceptions to the bona-fide prescriber-patient relationship for prescribing.

Requires prescribers to be in bona-fide prescriber-patient relationships prior to prescribing.

- Beginning **March 31, 2019**, a licensed prescriber shall not prescribe a controlled substance listed in Schedules 2-5 unless the prescriber is in a bona fide prescriber-patient relationship with the patient.
- If the prescriber provides a controlled substance, the prescriber shall provide follow-up care to the patient to monitor the efficacy of the use of the controlled substance as a treatment of the patient's medical condition.



Public Act 247 of 2017 (PA 101 of 2018)



- If the prescriber is unable to provide follow-up care, they shall refer the patient to the patient's primary care provider for follow-up care, or if a primary care provider does not exist, another licensed prescriber who is geographically accessible to the patient.
- Defines a bona fide prescriber-patient relationship as treatment or a counseling relationship between a prescriber and a patient in which both of the following are present:
 - The prescriber has reviewed the patient's relevant medical or clinical records and completed a full assessment of the patient's medical history and current medical condition, including a relevant medical evaluation of the patient conducted in person or via telehealth.
 - The prescriber has created and maintained records of the patient's condition in accordance with medically accepted standards.



Public Act 247 of 2017 (PA 101 of 2018)



- LARA, in consultation with its board(s), may promulgate rules:
 - Describing circumstances under which a bona fide prescriber-patient relationship is not required for purposes of prescribing a Schedule 2 to 5 controlled substance.
 - The rules may also include an alternative requirement for prescribing a Schedule 2 to 5 controlled substance when a bona fide prescriber-patient relationship is not required by the rules.
- Provides terms for sanction for violating the bona fide relationship requirements.
- Please note with PA 101 of 2018, the December 27, 2018 deadline for rule promulgation does not apply.



Public Act 248 of 2017



Requires prescribers to be registered to MAPS prior to prescribing or dispensing a controlled substance, and also requires a review of MAPS when prescribing or dispensing in a quantity that exceeds a 3-day supply.

- Beginning **June 1, 2018**, before prescribing or dispensing to a patient a controlled substance in a quantity that exceeds a 3-day supply, a licensed prescriber shall obtain and review a MAPS report concerning that patient. The requirement does not apply in any of the following circumstances:
 - If the dispensing occurs in a hospital or a freestanding surgical outpatient facility and the controlled substance is administered to the patient in the hospital or facility.
 - If the patient is an animal, the dispensing occurs in a veterinary hospital or clinic, and the controlled substance is administered to the animal in that hospital or clinic.
 - If the controlled substance is prescribed by a licensed prescriber who is a veterinarian and the controlled substance will be dispensed by a pharmacist.
- Beginning **June 1, 2018**, before prescribing or dispensing a controlled substance to a patient, a licensed prescriber shall register with MAPS.



Public Act 249 of 2017



Contains provisions for sanction for various violations of the opioid bills package.

- Contains many of the provisions of the other bills, as it is being used as a vehicle to correct conflicts in statute created by the package of bills being passed.
 - Includes the bona fide prescriber-patient relationship language of PA 247 of 2017.
 - Contains the mandatory MAPS report review language for prescribers contained in PA 248 of 2017, as well as language regarding mandatory registration with MAPS for prescribers.



Public Act 249 of 2017



- Provides penalties for violation of the following:
 - Beginning **March 31, 2019**, prescribers failing to adhere to the bona fide prescriber-patient relationship requirements.
 - Beginning **June 1, 2018**, prescribers failing to obtain and review a MAPS report, when required, prior to prescribing or dispensing to a patient a controlled substance in a quantity that exceeds a 3-day supply.
 - Beginning **June 1, 2018**, prescribers failing to register with MAPS prior to prescribing or dispensing a controlled substance to a patient.
 - Beginning **June 1, 2018**, prescribers failing to provide minors, and their parents or guardians, with proper education regarding the risks of opioid abuse.



Public Act 249 of 2017

- Beginning **June 1, 2018**, if the department has reasonable basis that a licensee failed to obtain and review a MAPS report or failed to register to MAPS, LARA:
 - Is not required to conduct an investigation.
 - May issue a letter to the licensee notifying Issue Includes the bona fide prescriber-patient relationship language of PA 247 of 2017.
 - A letter issued under this section of the law is not considered a disciplinary action.
- Not registering and checking MAPS may result in sanctions as determined by the board.

Public Act 250 of 2017



Requires the providing of information regarding Substance Use Disorder Services.

- Effective **March 27, 2018:**

- A health professional licensee or registrant that treats a patient for an opioid-related overdose is required to provide that patient with information regarding Substance Use Disorder Services.



Public Act 251 of 2017



Requires prescribers treating for acute pain, to not prescribe a patient more than a 7-day supply of an opioid within a 7-day period.

- Beginning **July 1, 2018**, if a prescriber is treating a patient for acute pain, that the prescriber shall not prescribe the patient more than a 7-day supply of an opioid within a 7-day period.
- Further, beginning **March 27, 2018**, the legislation provides that a pharmacist, consistent with federal law and regulations on the partial filling of a controlled substance included in Schedule 2, may partially fill in increments, a prescription for a controlled substance included in Schedule 2.



Public Act 252 of 2017



MAPS review requirements before dispensing or prescribing buprenorphine or methadone.

- Effective **March 27, 2018**.
- Adds the dispensing of a controlled substance at a veterinary hospital or clinic that administers the controlled substance to an animal that is an inpatient, to the following list of exemptions for MAPS reporting requirements:
 - A hospital.
 - A health facility or agency if the controlled substance is dispensed by a dispensing prescriber in a quantity adequate to treat the patient for not more than 48 hours.



Public Act 252 of 2017



- Provides that before dispensing or prescribing buprenorphine or a drug containing buprenorphine or methadone to a patient in a substance disorder program, that a prescriber shall obtain and review a MAPS report on the patient.
- Additionally, the legislation provides that a prescriber shall report data to MAPS if federal law does not prohibit the reporting of data concerning the patient, to LARA.
- The legislation rescinds R 338.3162E from the pharmacy rules, which deals with exemptions to MAPS reporting requirements.



Public Act 253 of 2017



Medicaid eligibility for Substance Use Disorder Services.

- Effective **March 27, 2018.**
- Amends the Social Welfare Act to provide that an eligible individual can receive medically necessary treatment for opioid abuse. The bill codifies coverage by Michigan's Medicaid program for detox programs.



Public Act 254 of 2017



PDOAC recommendations for the instruction of pupils on the dangers of opioid abuse.

- Requires PDOAC, by **July 1, 2018**, to develop or adopt for Michigan's Department of Education, recommendations for the instruction of pupils on the dangers of prescription opioid drug abuse.



Public Act 255 of 2017



MDE model programs of instruction on the dangers of prescription opioid drug abuse.

- No later than **July 1, 2019**, the Department of Education shall make available to school districts the model program of instruction on the dangers of prescription opioid drug abuse, developed or adopted by PDOAC.
- Beginning in the **2019-2020 School Year**, the Department of Education shall ensure that the state model of academic standards for health education includes instruction on prescription opioid drug abuse, including at least the PDOAC recommendations.



Public Act 101 of 2018



- Pushes back the effective date for the bona fide prescriber-patient relationship requirement to 3/31/19; OR
- If rules are promulgated to provide alternatives to the prescriber-patient requirement before 3/31/19, on the date on which rules are promulgated is when the change becomes effective.



Additional Legislative Information



- Individuals seeking additional information regarding the new opioid laws can visit <http://www.legislature.mi.gov> and do the following:
 - Select “Public Act (Signed Bills)” among the options under the “Legislature” category on the left of the page.
 - On the “Public Acts” webpage, enter the Public Act Number, and select a “Public Act Year” below. For example, to find more information regarding Public Act 247 of 2017, Enter “247” in the search box, and select the “Public Act Year” from the dropdown box as “2017”. Select “Search” when ready.
- A direct link to the above referenced “Public Act (Signed Bills)” search page is as follows:
[http://www.legislature.mi.gov/\(S\(gfsic4rztSD0vhcPbmxFjwvy\)\)/mileg.aspx?page=PublicActs](http://www.legislature.mi.gov/(S(gfsic4rztSD0vhcPbmxFjwvy))/mileg.aspx?page=PublicActs).



Additional Resources & Information



LARA and DHHS have produced FAQs regarding the new Opioid Laws, which are posted online at:

- www.Michigan.gov/bpl
 - > Michigan Automated Prescription System (MAPS)
 - > Laws/Regulations
 - > Michigan Opioid Laws Frequently Asked Questions
- https://www.michigan.gov/documents/lara/LARA_DHHS_Opioid_Laws_FAQ_05-02-2018_622175_7.pdf

For information about integrating MAPS with your EMR, visit:

- www.Michigan.gov/mimapsinfo

For additional information about the opioid issue for both the public and providers, please visit the State website at:

- www.Michigan.gov/opioids



Questions?

Special THANK YOU goes to all our Appropriators and Legislators for partnering with Governor Snyder, and Lt. Governor Calley in supporting our efforts to fully replace MAPS as we continue to make it a more robust preventative tool for providers to use in the fight against the Opioid Epidemic.

Also huge thanks BJA, SAMHSA, CDC, and the Michigan Department of Health and Human Services for the grant funds and partnership. We also appreciate our BPL team, Boards, Law Enforcement, and Health Care Associations for being engaged and involved Stakeholders.

Thank you to the DEA for coordinating this training and for their collaboration with LARA.

