

## Section Summary – HOPE Act (v.1)

**Sections 1-6** contain technical changes and additions to the drug schedules within the NC Controlled Substances Act.

**Sec. 7** eliminates “trafficking in mephedrone” as a criminal offense. Presumably this is being repealed as duplicative, since “trafficking in MDPV” is being amended to make all “trafficking in substituted cathinones” a felony.

**Sec. 8** allows “certified diversion investigators” to inspect prescriptions, order forms & records, and stocks of controlled substances. Currently, two groups have this authority: (1) federal & state officers that enforce controlled substance laws, and (2) authorized NCDHHS employees.

**Sec. 9** creates criminal liability for registrants and practitioners authorized to possess or access controlled substances, and who divert for unauthorized use. (Currently only their employees are subject.) Also criminalizes misapplication or diversion by other health care workers of controlled substances prescribed for another’s use.

**Sec. 10** adds new elements to the data that dispensers must submit to CSRS, including:

- Dispenser’s NPI
- Veterinary prescribing data, including details on animal and owner
- **Prescriber’s NPI – meant to expand evaluation and reporting of prescribing by provider type and specialty**
- If Schedule II or III: the name, type of photo ID, ID number presented by the person seeking dispensation

**Sec. 11** is the bulk of the bill:

Authorizes DHHS to review CSRS data and report to the Medicaid Investigations Division “prescribing practices that suggest possible fraudulent activities.”

Allows CSRS to release data to a local law enforcement officer, who is:

- A “certified diversion investigator” (requirements for certification unclear; recert. every 3 yrs)
- Supervised by a “qualified law enforcement agency” (city/county police, sheriff’s office, college campus police)
- Requesting data for a bona fide investigation relating to enforcement of drug laws.

CSRS to maintain audit trail “that may be used to investigate or prosecute violations of this section.”

- Precluding use in defending criminal charges brought against patient/prescriber?

CSRS data may be shared by investigator:

- If information is outside his/her jurisdiction, or
- With other law enforcement personnel or prosecutorial officials, or
- with law enforcement personnel in other agencies in an official joint investigation

Penalties for accessing the CSRS by an authorized individual who:

- Negligently discloses prescription information = suspended CSRS access for 1 year + remedial training
  - If negligence occurs again within 2 years = permanent suspension of CSRS access
- Knowingly discloses for an unauthorized purpose = class 3 misdemeanor
- Willfully/maliciously obtains and discloses = Class I felony

**Sec. 12** appropriates new recurring funds:

- \$10M to DHHS to increase availability of community-based treatment and recovery for SUD.
- \$1M to DHHS to acquire naloxone and distribute to law enforcement agencies.
- \$160K appropriated for Operation Medicine Drop.

**Sec. 13** makes all provisions effective July 1, 2018.