Legislative Analysis



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PRESCRIPTIONS FROM ILLINOIS OR MINNESOTA

Senate Bill 908 (Substitute H-2) Sponsor: Sen. Ron Jelinek

House Committee: Health Policy Senate Committee: Health Policy

First Analysis (10-21-04)

BRIEF SUMMARY: The bill would allow pharmacists and other dispensing practitioners to fill prescriptions for controlled substances that were written by physicians in Illinois or Minnesota.

FISCAL IMPACT: The bill will have no fiscal impact.

THE APPARENT PROBLEM:

In general, the Public Health Code prohibits a practitioner (e.g., a pharmacist) from dispensing a prescription for a controlled substance that was written by a physician licensed to practice in another state, although the code does provide an exception for physicians whose practices are located adjacent to the land border between Michigan and adjoining states (Ohio, Indiana, and Wisconsin) and whose practices may extend into Michigan even though they do not have offices located in the state.

Apparently, many residents of the state obtain health care services from hospitals and clinics in Chicago and Minnesota but are unable to fill their prescriptions here at home. Similarly, many Illinois residents vacation or live part of the year in Michigan and are also prevented from filling prescriptions at Michigan pharmacies. It has been suggested that the exception for out-of-state prescriptions be expanded to include physicians from Illinois and Minnesota.

THE CONTENT OF THE BILL:

<u>Senate Bill 908</u> would amend the Public Health Code to allow pharmacists and other dispensing practitioners to fill prescriptions from physicians licensed by the state of Illinois and Minnesota. Under the bill, a "practitioner" could dispense a prescription for a controlled substance written and signed or transmitted by a licensed physician residing adjacent to the land border between Michigan and another state <u>or residing in Illinois or Minnesota</u>, who is authorized to prescribe controlled substances, and whose practice extends into the state even though he or she does not maintain an office or designate a place to meet patients or receive calls in the state.

MCL 333.7405 and 333.17763

HOUSE COMMITTEE ACTION:

The Senate-passed bill applied only to Illinois. The House committee adopted a substitute bill to also include prescriptions for controlled substances written by physicians residing in Minnesota.

ARGUMENTS:

For:

Unlike many states, Michigan does not allow pharmacists and other dispensing practitioners to fill prescriptions for controlled substances written by out-of-state health care practitioners. A narrow exception is provided for a prescription written by a licensed physician located in states that share a land border with Michigan and whose practice may extend into the state but who do not see patients here (i.e., physicians who practice at the Cleveland Clinic). However, many Michigan residents also travel to Chicago and other cities in Illinois to obtain health care, as well as to the Mayo Clinic in Rochester, Minnesota. Reportedly, many Upper Peninsula residents regularly seek out health care providers in Minnesota. Yet, these residents must fill their prescriptions for pain medications and other controlled substances before returning home (a nuisance to them and a loss of business to Michigan pharmacies). Further, many Illinois residents vacation in Michigan or own summer homes in the state. Even if they spend several months a year here, they cannot get prescriptions filled. It makes sense, therefore, to expand the exemption for filling prescriptions for controlled substances to include those prescribed by Illinois and Minnesota physicians.

Response:

In a related matter, some Michigan residents seek the services of oral surgeons in border states but cannot fill prescriptions for certain pain medications written by their provider when they return home. Perhaps the bill should be amended to allow prescriptions written by licensed oral surgeons to also be filled by Michigan pharmacists.

In addition, the majority of states allow pharmacists to fill prescriptions for controlled substances written by physicians from <u>any</u> state. Given that tourism is a major industry in Michigan – attracting tourists from all over the nation – it may make more sense to lift the prohibition entirely. Since people tend to make other purchases while waiting for prescriptions to be filled, in-state pharmacies could make more sales, and more sales tax revenue could be generated for the state.

POSITIONS:

The Department of Community Health is neutral on the bill. (9-20-04)

Legislative Analyst: Susan Stutzky Fiscal Analyst: Margaret Alston

[■] This analysis was prepared by nonpartisan House staff for use by House members in their deliberations, and does not constitute an official statement of legislative intent.