# 2008 Hawaii Legislative Session: Summary of Bills Passed

<table>
<thead>
<tr>
<th>Bill Number</th>
<th>Bill Title</th>
<th>Highlights of Bill Additions/Changes</th>
</tr>
</thead>
</table>
| HB7 HD1 SD1 | Relating to the I-SaveRx Prescription Drug Program | Amends Chapter 346, HRS.  
- Allows Hawaii Residents to refill prescriptions from pharmacies in Canada, the United Kingdom, Australia & New Zealand.  
- Program must be operational & available to Hawaii residents by July 1, 2009.  
- State of Hawaii will participate in the I-SaveRx prescription drug program with the State of Illinois & other states in the program as defined in the PBM agreement.  
- Residents can order 3-month supply of Rx refills on the I-SaveRx internet website that is maintained by the PBM |
| SB1487 SD2 HD2 CD1 | Relating to Controlled Substances | Amends Chapter 329, HRS  
- Adds two new definitions: “Designated member of the health care team” and “Physician-patient relationship”  
- Updates CS schedules/definitions to be consistent with federal law  
- For oral Rxs, RPh shall reduce Rx to writing including the following elements – drug name, strength, dosage form, qty in figures only, directions for use, date Rx received, practitioner full name, practitioner DEA#, practitioner oral code, name & address of person Rx is for.  
- Makes it unlawful for a practitioner to pre-date or pre-sign Rxs to facilitate the obtaining or attempted obtaining for CS.  
- Makes it unlawful for a practitioner to facilitate the issuance or distribution of a written Rx when not physically in the State  
- Makes it unlawful for a practitioner to issue an oral Rx for CS when not physically in the State.  
- Makes it unlawful for a person to administer or prescribe CS if their registration has expired.  
- Immediate suspension to dispense CS if pharmacy or practitioner fails to transmit information for the electronic prescription accountability system. |
| SB1491 SD1 HD2 | Relating to Controlled Substances | Amends Chapter 329, HRS  
- Authorizes use of CS registration funds to offset costs of NED investigations  
- Updates CS schedules/definitions to be consistent with federal law  
- Reinstates sales restrictions for liquid, liquid capsule, or gel capsule forms of pseudoephedrine |
| SB2157 SD1 HD2 CD1 | Relating to Health | Amends Chapter 327, HRS  
- Clarifies the patient’s right to be prescribed CS to relieve pain |
<table>
<thead>
<tr>
<th>Bill Number</th>
<th>Bill Title</th>
<th>Highlights of Bill Additions/Changes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Act 131 (5-30-08) Effective on approval</td>
<td></td>
<td>• Increases the time to fill a CII Rx from 3 days to 7 days following the date the Rx was written</td>
</tr>
</tbody>
</table>
| SB2373 SD1 HD2 CD1 Act 184 (6-17-08) Effective on July 1, 2008, except the pharmacy or retailer has until January 1, 2010 to establish the electronic log using software provided by the NED | Relating to Pseudoephedrine Sales | Amends Chapter 329, HRS  
• For sales of pseudoephedrine, the person purchasing/acquiring the product shall produce proper identification that contains the person’s photograph, date of birth, printed name, signature & address  
• The pharmacy or retailer shall record the following information in an electronic log on software provided by the NED:  
  1. Date of transaction  
  2. Name, address, date of birth of the purchasing person  
  3. Type of identification provided by the purchasing person  
  4. The name of the agency issuing the ID provided by the purchasing person  
  5. Name of the pseudoephedrine product & quantity sold  
• The pharmacy or retailer will transmit the log to the NED monthly and retain the information for 2 years  
• Reinstates sales restrictions for liquid, liquid capsule, or gel capsule forms of pseudoephedrine  
• Sets penalty for persons who violate this section as Class C felony.  
• Failure to transmit sales information is a misdemeanor and will result in immediate suspension of pseudoephedrine sales |
| SB2459 SD2 HD1 CD1 Act 212, on 7/3/2008 Effective on approval | Relating to Remote Dispensing | Amends Chapter 461, HRS  
• Describes remote dispensing pharmacy, operations, physical set-up, security, counseling requirements, equipment requirements, policies & procedures  
• Prohibits remote dispensing pharmacy within a 5-mile radius of any pharmacy, with the following exceptions  
  1. Any remote dispensing pharmacy established prior to the effective date of this Act  
  2. If a pharmacy is established within a 5 mile radius of an existing remote dispensing pharmacy, encourage relocation of the remote dispensing pharmacy  
• Prohibits remote dispensing pharmacy use  
  1. For patients with health insurance coverage except for Quest patients  
  2. By any 431-10A or 4323-1 health insurance provider group, hospital or medical service  
• Allows remote dispensing pharmacies for  
  1. Mobile medical clinics in counties with a population less than 100,000  
  2. Federal qualified health centers not within a 5 mile radius of a pharmacy unless exempt  
• Adds 5 new definitions for “remote dispensing”, “remote dispensing machine”, “remote dispensing pharmacy”, “remote dispensing technician”, “responsible pharmacy”  
• Requires the responsible pharmacy to submit an application permit to the Board for approval prior to operating a remote dispensing pharmacy |
| HB1153 SD1 Act 185 (6-17-08) Effective July 1, 2008 | Relating to Precursor to Manufacture Controlled Sub | Amends Section 329-70 relating to Forfeiture and subjects to seizure and forfeiture any money or thing of value, and any vehicle used to transport precursor chemicals for the purpose of manufacturing a controlled substance. |
NEW SECTIONS added to Chapter 329, Part IV HRS

1. "§329- Administrative penalties. (a) Any person who violates this chapter or any rule adopted by the department pursuant to this chapter shall be fined not more than $10,000 for each separate offense. Any action taken to collect the penalty provided for in this subsection shall be considered a civil action and the fine shall be deposited into the state general fund.

(b) The director may impose by order the administrative penalty specified in this section, in addition to any other administrative or judicial remedy provided by this part, or by rules adopted pursuant to this chapter. Factors to be considered in imposing the administrative penalty include:

(1) The nature and history of the violation;
(2) Any prior violation; and
(3) The opportunity, difficulty, and history of corrective action.

For any judicial proceeding to recover the administrative penalty imposed, the administrator need only show that notice was given, a hearing was held or the time granted for requesting a hearing has expired without such a request, the administrative penalty was imposed, and the penalty remains unpaid.

2. §329- Injunctive relief. The administrator may institute a civil action in any court of competent jurisdiction for injunctive relief to prevent any violation of this chapter or any rule adopted to implement this chapter. The court shall have powers to grant relief in accordance with the Hawaii rules of civil procedure.

NOTE: Senate Bill 1487 SD2 HD2 CD1 Act 186 (6-15-08)

Section 329-1, Definitions

"Designated member of the health care team" includes physician assistants, advanced practice registered nurses, and covering physicians who are authorized under state law to prescribe drugs.
"Physician-patient relationship" means the collaborative relationship between physicians and their patients. To establish this relationship, the treating physician or the physician's designated member of the health care team, at a minimum shall:

1. Personally perform a face-to-face history and physical examination of the patient that is appropriate to the specialty training and experience of the physician or the designated member of the physician's health care team, make a diagnosis and formulate a therapeutic plan, or personally treat a specific injury or condition;

2. Discuss with the patient the diagnosis or treatment, including the benefits of other treatment options; and

3. Ensure the availability of appropriate follow-up care.

NOTE: Senate Bill 1487 SD2 HD2 CD1 Act 186 (6-15-08)

Section 329-14, Schedule I
Section 329-14(e) Depressants. Unless specifically excepted, the schedule shall include any material, compound, mixture, or preparation which contains any quantity of the substance:

(1) Mecloqualone; or
(2) Methaqualone.

NOTE: Senate Bill 1491 SD1 HD2 CD1 Act 119 (5-28-08)

Chapter §329-16 Schedule II.

(d) Depressants. Unless specifically excepted or unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of the following substances having a depressant effect on the central nervous system, including their isomers, esters, ethers, salts, and salts of isomers, esters, and ethers, unless specifically excepted, whenever the existence of these isomers, esters, ethers, and salts is possible within the specific chemical designation:

(5) Secobarbital.

(e) Stimulants. Any material, compound, mixture, or preparation which contains any quantity of the following substances having a danger or probable danger associated with a stimulant effect on the central nervous system:
(2) Any substance which contains any quantity of methamphetamine, including its salts, isomers, and salts of isomers;

(3) Phenmetrazine and its salts; and

(4) Methylphenidate.

(f) Immediate precursor. Unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of the following substances:

(1) Immediate precursor to amphetamine and methamphetamine:
   (A) Phenylacetone, phenyl-2-propanone (P2P), benzyl methyl ketone, methyl benzyl ketone.
   or

(2) Immediate precursors to phencyclidine (PCP):
   (A) 1-phenylcyclohexylamine; and
   (B) 1-piperidinocyclohexanecarbonitrile (PCC).

(g) Hallucinogenic substances, unless listed in another schedule, shall include:

(1) Nabilone.

NOTE: Senate Bill 1491 SD1 HD2 CD1 Act 119 (5-28-08)

Section 329-18, Schedule III

"(c) Depressants. Unless listed in another schedule, any material, compound, mixture, or preparation containing any quantity of the following substances having a depressant effect on the central nervous system:

(5) Embutramide (Tributame);
(6) Ketamine, its salts, isomers, and salts of isomers, also known as (+ or -)-2-(2-chlorophenyl)-2-(methylamino)-cyclohexanone;
(7) Lysergic acid;
(8) Lysergic acid amide;
(9) Methyprylon;
(10) Sulfondiethylmethane;
(11) Sulfonethylmethane;
(12) Sulfonmethane;
(13) Tiletamine/Zolazepam (Telazol, 2-(ethylamino)-2-(-thienyl)-cyclohexanone, flupyrazapon) or any salts thereof; and
(14) Gamma hydroxybutyric acid and its salts, isomers, and salts of isomers that are contained in a drug product for which an application has been approved under section 505 of the federal Food, Drug, and Cosmetic Act.

NOTE: Senate Bill 1487 SD2 HD2 CD1 Act 186 (6-15-08)

Chapter 329-20 Schedule IV
(b) **Depressants.** Any material, compound, mixture, or preparation which contains any quantity of the following substances, *including its salts, isomers, esters, ethers, and salts of isomers, whenever the existence of these isomers, esters, ethers, and salts is possible within the specific chemical designation, that has* a degree of danger or probable danger associated with a depressant effect on the central nervous system:

**NOTE:** Senate Bill 1491 SD1 HD2 CD1 Act 119 (5-28-08)

Chapter 329-38, Prescriptions

Chapter 329-38(b) **A schedule II controlled substance prescription shall:**

1. **Be filled within seven** days following the date the prescription was issued to the patient; and

**NOTE** Senate Bill 2157 SD1 HD2 CD1 Act 131 (5-30-08)

Chapter §329-22 Schedule V.

(c) **Stimulants.** Unless specifically exempted or excluded or unless listed in another schedule, any material, compound, mixture, or preparation that contains any quantity of the following substances having a stimulant effect on the central nervous system, including its salts, isomers, and salts of isomers.

(d) **Depressants.** Unless specifically exempted or excluded or unless listed in another schedule, any material, compound, mixture, or preparation that contains any quantity of the following substances having a depressant effect on the central nervous system, including its salts, isomers, and salts of isomers:

1. **Pregabalin** [(S)-3-(aminomethyl)-5-methylhexanoic acid].

**NOTE:** Senate Bill 1491 SD1 HD2 CD1 Act 119 (5-28-08)

Chapter 329-38(g) **Prescriptions for controlled substances shall be issued only as follows:**

1. **All prescriptions for controlled substances shall originate from within the state** and be dated as of, and signed on, the day when the prescriptions were issued and shall contain:

   (A) The first and last name and address of the patient; and

   (B) The drug name, strength, dosage form, quantity prescribed, and directions for use. Where a prescription is for gamma hydroxybutyric acid, methadone, or buprenorphine, the practitioner shall record
as part of the directions for use, the medical need of the patient for the prescription. The controlled substance prescriptions shall be no larger than eight and one-half inches by eleven inches and no smaller than three inches by four inches.

A practitioner may sign a prescription in the same manner as the practitioner would sign a check or legal document (e.g., J.H. Smith or John H. Smith) and shall use both words and figures (e.g., alphabetically and numerically as indications of quantity, such as five (5)), to indicate the amount of controlled substance to be dispensed. Where an oral order is not permitted, prescriptions shall be written with ink or indelible pencil or typed, shall be manually signed by the practitioner, and shall include the name, address, telephone number, and registration number of the practitioner. The prescriptions may be prepared by a secretary or agent for the signature of the practitioner, but the prescribing practitioner shall be responsible in case the prescription does not conform in all essential respects to this chapter and any rules adopted pursuant to this chapter. In receiving an oral prescription from a practitioner, a pharmacist shall promptly reduce the oral prescription to writing, which shall include the following information: the drug name, strength, dosage form, quantity prescribed in figures only, and directions for use; the date the oral prescription was received; the full name, DEA registration number, and oral code number of the practitioner; and the name and address of the person for whom the controlled substance was prescribed or the name of the owner of the animal for which the controlled substance was prescribed.

A corresponding liability shall rest upon a pharmacist who fills a prescription not prepared in the form prescribed by this section. A pharmacist may add a patient's missing address or change a patient's address on all controlled substance prescriptions after verifying the patient's identification and noting the identification number on the back of the
prescription. The pharmacist shall not make changes to the patient's name, the controlled substance being prescribed, the quantity of the prescription, the practitioner's DEA number, or the practitioner's signature;

(2) An intern, resident, or foreign-trained physician, or a physician on the staff of a Department of Veterans Affairs facility or other facility serving veterans, exempted from registration under this chapter, shall include on all prescriptions issued by the physician:
(A) The registration number of the hospital or other institution; and
(B) The special internal code number assigned to the physician by the hospital or other institution in lieu of the registration number of the practitioner required by this section.

The hospital or other institution shall forward a copy of this special internal code number list to the department as often as necessary to update the department with any additions or deletions. Failure to comply with this paragraph shall result in the suspension of that facility's privilege to fill controlled substance prescriptions at pharmacies outside of the hospital or other institution. Each written prescription shall have the name of the physician stamped, typed, or hand-printed on it, as well as the signature of the physician;

(3) An official exempted from registration shall include on all prescriptions issued by the official:
(A) The official's branch of service or agency (e.g., "U.S. Army" or "Public Health Service"); and
(B) The official's service identification number, in lieu of the registration number of the practitioner required by this section. The service identification number for a Public Health Service employee shall be the employee's social security or other government issued identification number. Each prescription shall have the name of the officer stamped, typed, or handprinted on it, as well as the signature of the officer; and
(4) A physician assistant registered to prescribe controlled substances under the authorization of a supervising physician shall include on all controlled substance prescriptions issued:

(A) The DEA registration number of the supervising physician; and

(B) The DEA registration number of the physician assistant.

Each written controlled substance prescription issued shall include the printed, stamped, typed, or hand-printed name, address, and phone number of both the supervising physician and physician assistant, and shall be signed by the physician assistant. The medical record of each written controlled substance prescription issued by a physician assistant shall be reviewed and initialed by the physician assistant's supervising physician within seven working days."

Chapter 329-38 subsections (j), (k), (l), and (m) to read as follows:

"(j) A prescription for a schedule II controlled substance may be transmitted by the practitioner or the practitioner's agent to a pharmacy by facsimile equipment; provided that the original written, signed prescription is presented to the pharmacist for review prior to the actual dispensing of the controlled substance, except as noted in subsections (k), (l), and (m). The original prescription shall be maintained in accordance with section 329-36. A prescription for a schedule III, IV, or V controlled substance may be transmitted by the practitioner or the practitioner's agent to a pharmacy by facsimile; provided that:

(1) The information shall be communicated only between the prescribing practitioner or the prescriber's authorized agent and the pharmacy of the patient's choice. The original prescription shall be maintained by the practitioner in accordance with section 329-36;

(2) The information shall be communicated in a retrievable, recognizable format acceptable to the intended recipient and shall include the physician's oral code designation and the name of the recipient pharmacy;

(3) No electronic system, software, or other intervening mechanism or party shall alter the practitioner's prescription, order entry,
selection, or intended selection without the practitioner’s approval on a per prescription per order basis. Facsimile prescription information shall not be altered by any system, software, or other intervening mechanism or party prior to receipt by the intended pharmacy;

(4) The prescription information processing system shall provide for confidentiality safeguards required by federal or state law; and

(5) Prescribing practitioners and pharmacists shall exercise prudent and professional judgment regarding the accuracy, validity, and authenticity of any facsimile prescription information. The facsimile shall serve as the original written prescription for purposes of this section and shall be maintained in accordance with section 329-36.

(k) A prescription prepared in accordance with subsection (g) written for a narcotic listed in schedule II to be compounded for the direct administration to a patient by parenteral, intravenous, intramuscular, subcutaneous, or intraspinal infusion, but does not extend to the dispensing of oral dosage units of controlled substances, may be transmitted by the practitioner or the practitioner's agent to the pharmacy by facsimile. The original prescription shall be maintained by the practitioner in accordance with section 329-36. The pharmacist shall note on the face of the facsimile prescription in red ink "Home Infusion/IV" and this facsimile shall serve as the original written prescription for purposes of this section and it shall be maintained in accordance with section 329-36.

(l) A prescription prepared in accordance with subsection (g) written for a schedule II substance for a patient enrolled in a hospice care program certified or paid for by medicare under Title XVIII or a hospice program that is licensed by the State may be transmitted by the practitioner or the practitioner's agent to the dispensing pharmacy by facsimile. The original prescription shall be maintained by the practitioner in accordance with section 329-36. The practitioner or practitioner's agent shall note on the prescription that the patient is a hospice patient. The pharmacist shall note on the face of the facsimile prescription in red ink "HOSPICE" and this facsimile shall serve as the original written prescription for purposes of this section and it shall be maintained in accordance with section 329-36.
(m) A prescription prepared in accordance with subsection (g) written for a schedule II controlled substance for a resident of a state-licensed long-term care facility may be transmitted by the practitioner or the practitioner's agent to the dispensing pharmacy by facsimile. The original prescription shall be maintained by the practitioner in accordance with section 329-36. The pharmacist shall note on the face of the facsimile prescription in red ink "LTCF" and this facsimile shall serve as the original written prescription for purposes of this section and it shall be maintained in accordance with section 329-36.

NOTE: Senate Bill 1487 SD2 HD2 CD1 Act 186 (6-15-08)

Chapter §329-41 Prohibited acts B--penalties. (a)
It is unlawful for any person:
(1) Who is subject to part III to distribute, administer, prescribe, or dispense a controlled substance in violation of section 329-38 or rules authorized under section 329-31; however, a licensed manufacturer or wholesaler may sell or dispense a controlled substance to a master of a transpacific ship or a person in charge of a transpacific aircraft upon which no physician is regularly employed, for the actual medical needs of persons on board such ship or aircraft when not in port; provided schedule I or II controlled substances shall be sold to the master of such ship or person in charge of such aircraft only in accordance with the provisions set forth in 21 Code of Federal Regulations, Sections 1301, 1305, and 1307, adopted pursuant to Title 21, United States Code, Section 821;

(2) Who is a registrant to manufacture a controlled substance not authorized by the registrant's registration or to distribute or dispense a controlled substance not authorized by the registrant's registration to another registrant or another authorized person;

(3) To refuse or fail to make available, keep, or furnish any record, notification, order form, prescription, statement, invoice, or information in patient charts relating to the administration, dispensing, or prescribing of controlled substances;

(4) To refuse any lawful entry into any premises for any inspection authorized by this chapter;
(5) Knowingly to keep or maintain any store, shop, warehouse, dwelling, building, vehicle, boat, aircraft, or other structure or place for the purpose of using these substances or which is used for keeping or selling them in violation of this chapter or chapter 712, part IV;

(6) Who is a practitioner or pharmacist to dispense a controlled substance to any individual not known to the practitioner or pharmacist, without first obtaining proper identification and documenting, by signature on a logbook kept by the practitioner or pharmacist, the identity of and the type of identification presented by the individual obtaining the controlled substance. If the individual does not have any form of proper identification, the pharmacist shall verify the validity of the prescription and identity of the patient with the prescriber, or their authorized agent, before dispensing the controlled substance. For the purpose of this section, "proper identification" means government-issued identification containing the photograph, printed name, and signature of the individual obtaining the controlled substance;

(7) Who is a practitioner to predate or pre-sign prescriptions to facilitate the obtaining or attempted obtaining of controlled substances; or

(8) Who is a practitioner to facilitate the issuance or distribution of a written prescription or to issue an oral prescription for a controlled substance when not physically in the State.

(b) It shall be unlawful for any person subject to part III of this chapter except a pharmacist, to administer, prescribe, or dispense any controlled substance without a bona fide physician-patient relationship.

(c) Any person who violates this section is guilty of a class C felony.

NOTE: Senate Bill 1487 SD2 HD2 CD1 Act 186 (6-15-08)

Chapter 329-42(a) Prohibited acts C--penalties

"(a) It is unlawful for any person knowingly or intentionally:

(1) To distribute as a registrant a controlled substance classified in schedule I or II, except pursuant to an order form as required by section 329-37;
(2) To use in the course of the manufacture, distribution, administration, or prescribing of a controlled substance a registration number that is fictitious, revoked, suspended, expired, or issued to another person;

NOTE: Senate Bill 1487 SD2 HD2 CD1 Act 186 (6-15-08)

Chapter 329-59(a), Controlled substance registration revolving fund

(a) There is established within the state treasury the controlled substance registration revolving fund. The fund shall be expended at the discretion of the director of public safety for the purpose of:

(1) Offsetting the cost of the electronic prescription accountability system, investigation of violations of this chapter, the registration and control of the manufacture, distribution, prescription, and dispensation of controlled substances and regulated chemicals listed under section 329-61, within the state and the processing and issuance of a patient registry identification certificate designated under part IX;

(2) Funding positions authorized by the legislature by law; and

(3) Funding the narcotics enforcement division's forensic drug laboratory facility.

NOTE: Senate Bill 1491 SD1 HD2 CD1 Act 119 (5-28-08)

Chapter 329-70 Forfeiture. (a) Precursor chemicals that are possessed, transferred, sold, or offered for sale in violation of this part shall be subject to seizure and forfeiture as provided in chapter 712A.

(b) All conveyances, including aircraft, vehicles, or vessels that are used, or intended for use, to transport or in any manner facilitate the transportation of precursor chemicals for a purpose that would constitute a violation of section 329-65(c) or (d), shall be subject to seizure and forfeiture as provided in chapter 712A.

(c) All moneys, negotiable instruments, securities, or other things of value furnished or intended to be furnished by any person in exchange for any of the substances listed in section 329-61 that facilitate any violation of section 329-65(c) or (d), and all proceeds traceable to such an exchange, and all moneys, negotiable instruments, and securities used or intended to be used to facilitate any violation of section 329-65(c) or (d), shall
be subject to seizure and forfeiture as provided in chapter 712A.

NOTE: House Bill 1153 SD1 CD1 Act 185 (6-17-08)

Chapter §329-75  Sales of products, mixtures, or preparations containing pseudoephedrine; reporting requirement for wholesalers.

Chapter 329-75(a)  Notwithstanding any other law to the contrary, a pharmacy or retailer may sell or distribute to a person without a prescription not more than 3.6 grams per day, without regard to the number of transactions, of any product, mixture, or preparation containing any detectable quantity of pseudoephedrine, its salts, optical isomers, or salts of optical isomers as the only active ingredient or in combination with other active ingredients; provided that the pharmacy or retailer shall comply with the following conditions:

(1) The product, mixture, or preparation shall be sold, or distributed from an area not accessible by customers or the general public, such as behind the counter or in a locked display case and where the seller delivers the product directly into the custody of the purchaser;

(2) Any person purchasing or otherwise acquiring any product, mixture, or preparation shall produce proper identification containing the photograph, date of birth, printed name, signature, and address of the individual obtaining the substance;

(3) The pharmacy or retailer shall record, in an electronic log on software provided by the narcotics enforcement division of the department and approved by the administrator:

(A) The date of any transaction under paragraph (2);

(B) The name, address, and date of birth of the person;

(C) The type of identification provided by the individual obtaining the substance;

(D) The agency issuing the identification used; and

(E) The name of the compound, mixture, or preparation, and the amount; and

(4) The pharmacy or retailer shall:

(A) Record the information required under paragraph (3) on an electronic worksheet on
software provided by the narcotics enforcement division of the department; and

(B) Electronically mail the worksheet record to the narcotics enforcement division once a month.

The information shall be retained by the pharmacy or retailer for a period of two years. The electronic log shall be capable of being checked for compliance against all state and federal laws, including interfacing with other states to ensure comprehensive compliance, and shall be subject to random and warrantless inspection by county or state law enforcement officers.

NOTE: Chapter 329-75(a)(3),(4) and (5) shall take effect on January 1, 2010;

(b) No person shall knowingly purchase, possess, receive, or otherwise acquire more than nine grams of any product, mixture, or preparation containing any detectable quantity of pseudoephedrine or its salts, isomers, or salts of optical isomers within a thirty-day period, except that this limit shall not apply to any quantity of such product, mixture, or preparation dispensed pursuant to a valid prescription.

(c) Any person who violates subsection (b) is guilty of a class C felony.

(d) The department, by rule, may exempt other products from this section, if the administrator finds that the products are not used in the illegal manufacture of methamphetamine or other controlled substances. A manufacturer of a drug product may apply for removal of the product from this section if the product is determined by the administrator to have been formulated in such a way as to effectively prevent the conversion of the active ingredient into methamphetamine.

(e) Notwithstanding any other provision of this chapter to the contrary, every wholesaler shall report to the administrator all sales made to any retailer, of any product, mixture, or preparation containing any detectable quantity of pseudoephedrine, its salts, optical isomers, or salts of optical isomers, as the only active ingredient or in combination with other active ingredients. The department shall provide a common reporting form that contains at least the following information about the product, mixture, or preparation:

(1) Generic or other name;
(2) Quantity sold;
(3) Date of sale;
(4) Name and address of the wholesaler; and
(5) Name and address of the retailer.

(f) **Intentional or knowing failure of a retailer or pharmacy to transmit any information as required by this section shall be a misdemeanor and shall result in the immediate suspension of that retailer's ability to sell any product, mixture, or preparation containing any detectable quantity of pseudoephedrine, its salts, optical isomers, or salts of optical isomers as the only active ingredient or in combination with other active ingredients until authorized by the administrator.**

NOTE: Senate Bill 2373 SD1 HD2 CD1 Act 184 (6-17-08)

Chapter §329-101(f) Reporting of dispensation of controlled substances; electronic prescription accountability system; requirements; penalty.

(f) **Intentional or knowing failure to transmit any information as required by this section shall be a misdemeanor and shall result in the immediate suspension of that pharmacy or practitioner's ability to dispense controlled substance in the state until authorized by the administrator.**

NOTE: Senate Bill 1487 SD2 HD2 CD1 Act 186 (6-15-08)

Chapter §329-102(f) Central repository

(f) **All prescriptions for controlled substances in schedules II through V and other controlled substances designated by the designated state agency that are processed by an out-of-state pharmacy shall conform to reporting and registration requirements adopted by the State, and to any additional rules the department adopts.**

NOTE: Senate Bill 1487 SD2 HD2 CD1 Act 186 (6-15-08)