Support for continuation of the Harold Rogers Grant for Prescription Monitoring Programs and Opposition to NASPAR

WHEREAS, the “National All Schedules Prescription Electronic Reporting Act of 2003” has been introduced in Congress to mandate a national prescription monitoring program,

WHEREAS, the National Association of State Controlled Substances Authorities (NASCSA) and the Alliance of States with Prescription Monitoring Programs (Alliance) have developed and adopted the Prescription Monitoring Program Model Act of 2002 that incorporates the best practices of existing prescription monitoring programs,

WHEREAS, 22 states currently have prescription monitoring programs in place or being implemented and at least 7 additional states are considering such programs,

WHEREAS, the states, through NASCSA and the Alliance have undertaken efforts to introduce standardization across programs, facilitate interstate sharing of monitoring data and provide monitoring data to federal agencies for investigation and to practitioners for care of their patients,

WHEREAS, the states are responsible for regulation of the practice of medicine, pharmacy, nursing and other health care practice and for enforcement of state controlled substances laws and are best equipped to respond to and support state and local efforts to reduce and prevent pharmaceutical diversion,

WHEREAS, a mandated federal program would be duplicative of state efforts and may have the unintended effect of providing a disincentive to states to initiate new programs or continue existing programs,

WHEREAS, the federal Harold Rogers Prescription Monitoring Program has been established to provide funding in support of several new, individual state programs and enhancements to several existing state programs, and
WHEREAS, the goals of the “National All Schedules Prescription Electronic Reporting Act of 2003” can be achieved through furtherance of the Harold Rogers Prescription Monitoring Program,

THEREFORE, BE IT RESOLVED, that NASCSA opposes the passage of H.R. 3015, the “National All Schedules Prescription Electronic Reporting Act of 2003” as written and recommends that Congress instead continue to provide additional funding for the Harold Rogers Prescription Monitoring Program to support states in the development of programs that meet minimum standards, enable interstate and state-federal sharing of data and promote provision of data to practitioners.

ATTEST:  William P. Ward, President

Date:  October 24, 2003