**A** **BILL**

TO AMEND SECTION 44‑53‑360, AS AMENDED, CODE OF LAWS OF SOUTH CAROLINA, 1976, RELATING TO THE DISPENSING OF PRESCRIBED CONTROLLED SUBSTANCES, SO AS TO ALLOW THE FACSIMILE OF AN ORIGINAL PRESCRIPTION FOR A SCHEDULE II CONTROLLED SUBSTANCE TO SERVE AS THE ORIGINAL PRESCRIPTION FOR CERTAIN INDIVIDUALS.

Be it enacted by the General Assembly of the State of South Carolina:

SECTION 1. Section 44‑53‑360 of the 1976 Code, as last amended by Act 71 of 2007, is further amended to read:

“Section 44‑53‑360. ~~(a)~~(A)(1) Except when dispensed directly by a practitioner, other than a pharmacist, to an ultimate user, or in emergency situations as prescribed by the department by regulation, ~~no~~ a controlled substance included in Schedule II may not be dispensed without the written prescription of a practitioner. ~~Prescriptions shall~~ A prescription for a controlled substance included in Schedule II must be retained ~~in conformity with the requirements of~~ pursuant to Section 44‑53‑340~~. No prescription for a controlled substance in Schedule II~~ and may not be refilled.

(2) A pharmacist may dispense a controlled substance included in Schedule II pursuant to a facsimile of a written, signed prescription provided:

(a) the original manually signed prescription is presented to the pharmacist for review before the actual dispensing of the controlled substance; and

(b) the prescription includes the name and address of the prescribing individual practitioner, the phone number for verbal confirmation, the time and date of transmission, and the name of the pharmacy intended to receive the transmission, as well as any other information required by federal or state law.

(3) Notwithstanding item (2), a facsimile of a written, signed prescription for a controlled substance included in Schedule II may serve as the original written prescription if the prescription is to be dispensed to:

(a) a home infusion pharmacy for compounding for the direct administration to a patient by parenteral, intravenous, intramuscular, subcutaneous, or intraspinal infusion;

(b) a resident of a long‑term care facility;

(c) a patient enrolled in a hospice care program certified or paid for by Medicare under Title XVIII of the Social Security Act or a hospice program licensed by the department, provided the prescribing individual practitioner or the practitioner’s agent notes on the prescription that the patient is a hospice patient; or

(d) a resident of a community residential care facility or an assisted living facility.

(4) The facsimile of the original prescription for a controlled substance issued pursuant to item (3) must be maintained in the medical record of the patient.

~~(b)~~(B)(1) A pharmacist may dispense a controlled substance included in Schedule III, IV, or V pursuant to either a written prescription signed by a practitioner, or a facsimile of a written, signed prescription, transmitted by the practitioner or the practitioner’s agent to the pharmacy, or pursuant to an oral prescription, reduced promptly to writing and filed by the pharmacist.

(2) A prescription transmitted by facsimile pursuant to this subsection must be received at the pharmacy as it was originally transmitted by facsimile and must include the name and address of the practitioner, the phone number for verbal confirmation, the time and date of transmission, and the name of the pharmacy intended to receive the transmission, as well as any other information required by federal or state law.

(3) ~~Such~~ A prescription~~, when authorized,~~ for a controlled substance included in Schedule III, IV, or V must be retained pursuant to Section 44‑53‑340 and may not be refilled more than five times or later than six months after the date of the prescription unless renewed by the practitioner.

~~(c)~~(C) ~~No~~ A controlled ~~substances~~ substance included in any schedule may not be distributed or dispensed ~~for~~ other than for a medical purpose. ~~No~~ A practitioner may not dispense a Schedule II narcotic controlled substance for the purpose of maintaining the addiction of a narcotic dependent person outside of a facility or program approved by the ~~Department of Health and Environmental Control~~ department. ~~No~~ A practitioner may not dispense a controlled substance outside of a bona fide practitioner‑patient relationship.

~~(d)~~(D) ~~Unless~~ A prescription may not be refilled unless specifically indicated in writing on the face of the prescription that it is to be refilled~~, and~~ with the number of times ~~specifically indicated, no~~ the prescription may be refilled. The indication of ‘PRN’ or ‘ad lib’ or phrases, abbreviations, or symbols of like meaning ~~shall~~ may not be construed as to exceed five refills or six months, whichever ~~shall~~ first ~~occur~~ occurs. Preprinted refill instructions on the face of a prescription ~~shall~~ must be disregarded by the dispenser unless an affirmative marking or other indication is made by the prescriber.

~~(e)~~(E) ~~Prescriptions~~ A prescription for a controlled ~~substances~~ substance included in Schedule II, with the exception of transdermal patches, must not exceed a thirty‑one day supply. ~~Prescriptions~~ A prescription for a Schedule II ~~substances~~ controlled substance must be dispensed within ninety days of the date of issue, after which time ~~they are~~ the prescription is void. ~~Prescriptions~~ A prescription for a controlled ~~substances~~ substance in Schedules III through V~~, inclusive,~~ must not exceed a ninety‑day supply.

~~(f)~~(F) ~~Preprinted prescriptions~~ A preprinted prescription for a controlled ~~substances~~ substance included in any schedule ~~are~~ is prohibited.

~~(g)~~(G) The ~~Board shall~~ board, by ~~rules and regulations~~ regulation, shall specify the manner by which ~~prescriptions are~~ a prescription must be filed.

~~(h)~~(H)(1) ~~A prescription, in~~ In order to be effective ~~in legalizing~~ to legalize the possession of a controlled substance and ~~eliminating~~ eliminate the need for registration of the recipient, a prescription must be issued for a legitimate medical ~~purposes~~ purpose. The responsibility for the proper prescribing and dispensing of a controlled ~~substances~~ substance is ~~upon~~ on the prescribing practitioner, but a corresponding liability rests with the pharmacist who fills and ultimately dispenses the prescription.

(2) An order purporting to be a prescription issued to a drug dependent person, not in the course of generally accepted medical treatment, but for the purpose of providing the user with a controlled ~~substances~~ substance sufficient to maintain ~~his~~ dependence ~~upon~~ on the controlled substance~~,~~ or ~~to provide him with~~ ~~quantities~~ a quantity of a controlled ~~substances~~ substance in great excess of the normal dosage ~~ranges~~ range as recommended by the manufacturer of the controlled substance, is not a prescription within the meaning and intent of this article~~;~~, and ~~the~~ a person filling, ~~or~~ dispensing, or issuing ~~such an~~ the order~~, as well as the person issuing it, shall be deemed~~ is in violation of this section.

~~(i)~~(I) ~~Excepting~~ Except for a mail order prescription dispensed ~~in compliance with~~ pursuant to Chapter 43 ~~of~~, Title 40 for which the dispenser requires proper identification of the recipient, a prescription for a controlled substance in Schedules II through V may not be filled unless the dispenser knows the recipient or requires the recipient to produce a ~~government issued~~ government‑issued photo identification, and the dispenser notes the identification source and number on the prescription, or in a readily retrievable log, including:

(1) prescription number;

(2) date prescription filled;

(3) number and type of identification; and

(4) initials of person obtaining and recording information.”

SECTION 2. This act takes effect upon approval by the Governor.

‑‑‑‑XX‑‑‑‑