

Act 112 of 2019

Frequently Asked Questions

Q: When does Act 112 take effect?

A: Act 112 took effect immediately on November 27, 2019.

Q: What is Act 112?

A: Act 112 is intended to increase patient safety and compliance with chronic pain treatment plans involving opioids. Act 112 also aims to increase the prescribers' awareness of other prescriptions their patients are taking and the patient's treatment history.

Q: Who is affected by Act 112?

A: Any Pennsylvania prescriber and patient, when the patient is beginning a new opioid treatment for chronic pain, must meet the requirements of Act 112.

Q: Will Act 112 affect existing opioid treatment plans for chronic pain?

A: No, Act 112 does not affect existing opioid treatment plans for chronic pain.

Q: What are the exceptions to urine drug screening?

A: The Act 112 mandate for urine drug screening shall not apply if the treatment of an individual with a controlled substance containing an opioid is associated with or incident to:

- (1) A medical emergency documented in the medical record of the individual.
- (2) The management of pain associated with cancer.
- (3) The use in palliative or hospice care.
- (4) The professional judgment of the prescriber under subsection (a)(1) and (2).

If an exception applies, the prescriber must document in the individual's health record which exception applies.

Q: What steps must a prescriber take to meet the professional judgement exception under subsection (a)(1) and (2)?

A: The Act 112 mandate for urine drug screening shall not apply if it is not in the prescriber's professional judgement to require the screening after assessing whether the individual has taken, or is currently taking, a prescription drug for treatment of a substance use disorder AND discussing the following with the individual:

- The risks of addiction and overdose associated with the controlled substance containing an opioid;
- The increased risk of addiction to a controlled substance if the individual suffers from a mental disorder or substance use disorder;
- The dangers of taking a controlled substance containing an opioid with benzodiazepines, alcohol or other central nervous system depressants;
- Other information deemed appropriate by the prescriber under 21 CFR 201.57(c)(18); AND
- The nonopioid treatment options available for treating chronic noncancer pain, if applicable, that are consistent with the best practices per the Pennsylvania Opioid Prescribing Guidelines.

The prescriber must document in the individual's health record that the exception applies.