HB 4081 -4 STAFF MEASURE SUMMARY

House Committee On Health Care

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WHAT THE MEASURE DOES:

Requires pharmacist who dispenses opioid prescription to offer prescription for naloxone, or similar drug, and information about naloxone under specified circumstances. Creates exceptions to requirement to offer prescription for naloxone or similar drug. Requires health benefit plan to provide payment or reimbursement for naloxone prescription and dispensation by pharmacist. Becomes operative January 1, 2023. Takes effect on 91st day following adjournment sine die.

REVENUE: May have revenue impact, but no statement yet issued.

FISCAL: May have fiscal impact, but no statement yet issued.

ISSUES DISCUSSED:

- Increase in opioid overdose deaths in Oregon
- Effectiveness of naloxone in preventing death
- Effectiveness of co-prescription mandates in other states
- Variability in out-of-pocket cost for naloxone

EFFECT OF AMENDMENT:

-4 Amends definition of "kit" to include any drug approved by the United States Food and Drug Administration for the complete or partial reversal of opioid overdose. Adds definitions of "opioid" and "opioid overdose. Removes concurrent prescription of gabapentin from conditions requiring pharmacist to offer naloxone.

REVENUE: No revenue impact

FISCAL: Fiscal impact issued

BACKGROUND:

Naloxone and methadone are two medications frequently used in the treatment of opioid addiction and overdose. Naloxone blocks opioid receptor sites, reversing the toxic effects of overdose. Naloxone is administered when a patient is showing signs of opioid overdose and can be given by intranasal spray or injection.

In 2009, the Oregon Legislative Assembly passed Senate Bill 355 directing the Oregon Health Authority (OHA) to develop a Prescription Drug Monitoring Program (PDMP). The program, designed to identify potential misuse, abuse, or diversion of prescription drugs, contains information provided by Oregon-licensed retail pharmacies, which submit prescription data for all Schedule II, III, and IV controlled substances dispensed to Oregon residents.

In 2017, the Governor convened an Opioid Epidemic Task Force to address four different policy areas: better pain management, fewer pills, improved access to treatment, and data/education. The Task Force released a report in 2018 with a comprehensive set of recommendations, emphasizing substance use disorder as a chronic condition that requires both acute treatment and long-term management. Also in 2018, House Bill 4143 passed requiring health care professionals licensed to prescribe opioids and opiates to register with the PDMP.

House Bill 4081 requires a pharmacist dispensing opioids to offer a prescription for naloxone under specified circumstances.