

HB 2257 -1 STAFF MEASURE SUMMARY

House Committee On Health Care

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Sub-Referral To: Joint Committee On Ways and Means

Meeting Dates: 2/5

WHAT THE MEASURE DOES:

Declares substance use disorders (SUD) as chronic illnesses. Requires the Department of Corrections to study and report SUD treatment options for individuals in custody. Directs the Oregon Health Authority (OHA) to convene advisory group; develop accreditation requirements for SUD treatment programs; implement accreditation requirements no later than January 2, 2021. Directs the Health Evidence Review Commission (HERC) to study and develop recommendations regarding barriers to and reimbursement for SUD services in Medicaid no later than December 31, 2019. Requires OHA to create pilot project to provide medication-assisted treatment to pregnant individuals. Appropriates \$5 million for pilot project. Defines “syringe service program.”

ISSUES DISCUSSED:

EFFECT OF AMENDMENT:

-1 Modifies relating to clause by adding “creating new provisions.” Requires OHA advisory group to solicit stakeholder input, consider relevant factors, and identify how to maximize federal funding. Removes requirement for HERC study. Prohibits Medicaid health plan from requiring prior authorization during first 30 days of SUD treatment. Specifies items provided by syringe service programs are not considered “drug paraphernalia.” Defines “dental managing director” for Oregon Prescription Drug Monitoring Program (PDMP) and adds position to list of professionals able to request information from the PDMP. Adds “gabapentin” to schedule of drugs able to be dispensed by pharmacies. Requires pharmacies to report the diagnosis code used by prescriber and reason for prescription to the PDMP. Modifies operative dates.

REVENUE: No revenue impact.

FISCAL: Fiscal impact statement issued.

BACKGROUND:

The Oregon Health Authority's Public Health Division reports that Oregon has one of the highest rates of prescription opioid misuse in the nation. More drug poisoning deaths involve prescription opioids than any other type of drug, including alcohol, methamphetamines, heroin, and cocaine. An average of three Oregonians die every week from prescription opioid overdoses, and many more develop opioid use disorders.

In 2017, Governor Brown created the Opioid Epidemic Task Force as a statewide effort to “combat opioid abuse and dependency.” The Task Force consists of medical experts, drug treatment specialists, and government officials. The Task Force initially prioritized reducing the number of narcotic pills in circulation, improving access to high quality treatment, facilitating data sharing, and promoting education efforts in Oregon. In 2018, based on the initial work of the Task Force, Governor Brown proposed House Bill 4143 as a multi-pronged approach to address the epidemic of opioid.

After passage of HB 4143 (2018), the Task Force continued its work to address the state’s opioid crisis by defining substance use disorder as a chronic disease rather than an acute illness, and addressing access, payment, and affordability of treatment services among commercial and public payers.

House Bill 2257 seeks to address the epidemic of opioid use in Oregon.

PRELIMINARY