

## HB 2376 -1 STAFF MEASURE SUMMARY

### House Committee On Health Care

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**Prepared By:** Oliver Droppers, LPRO Analyst

**Meeting Dates:** 3/30, 4/1

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#### **WHAT THE MEASURE DOES:**

Requires licensed dentist, physician, or nurse practitioner who prescribes opioid to offer a prescription for naloxone or any other federally approved drug approved for reversal of opioid overdose. Specifies naloxone prescription may be prescribed if the patient: has an opioid prescription is 50 milligram morphine units or more per day; is also prescribed benzodiazepine and an opioid; or has a history of overdose of substance use disorder. Requires health practitioner to provide educational material to patient, or patient's guardian if a minor, on use of naloxone or other drug for overdose reversal when prescribing naloxone. Specifies requirement does not apply to individuals in hospice or in the custody of Department of Corrections or Oregon Youth Authority. Authorizes applicable licensure boards to adopt rules and to refuse to grant, suspend, or revoke a practitioner's license for failure to meet naloxone prescription requirements. . Prescription requirements become operative January 1, 2022. Remaining provisions take effect on 91st day after sine die.

#### **ISSUES DISCUSSED:**

##### **EFFECT OF AMENDMENT:**

-1 Adds licensed physician assistant, naturopathic physician, and optometrist to list of practitioners to offer naloxone prescription. Requires Prescription Monitoring Program Prescribing Practices Review Subcommittee to develop educational materials for practitioners.

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

*FISCAL: May have fiscal impact, but no statement yet 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 2376 requires specified licensed health care professionals to offer a prescription for naloxone if a patient is also prescribed certain opioids to reduce the risk of an opioid overdose.