HB 4081

Nearly half of accidental opioid overdose deaths are caused by prescription opioids.

Currently, only 5% of Oregonians filling a highrisk opioid prescription receive an opioid antagonist.

In 2020, 472 Oregonians died of an accidental opioid overdose. In the first half of 2021, 350 Oregonians died.

Nationwide, opioid overdose deaths increased 28% in 2021. Opioid overdose deaths in Oregon increased 40% in 2020, and 45% in 2021.

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Prevent Opioid Overdose Deaths

Ensure patients know the risk and have the tools to prevent overdose

Opioid overdose can happen anytime to anyone using opioid drugs, in any community. Too often, opioid reversal medicine is not in the right hands at the right time. Co-prescription ensures opioid reversal medicine is easily accessible for those at risk of overdose.

HB 4081 would:

- Require pharmacists to offer a prescription of an opioid overdose reversal medication with any high-risk opioid prescription and provide education about overdose risk and overdose reversal meds.
- Define a high-risk opioid as 90mme or more per day or an opioid concurrently prescribed with benzodiazepine.
- Clarify that the service provided by the pharmacist is reimbursable.
- Become effective January 1, 2023.

Fourteen other states have co-prescription mandates, and in those with data, prescription overdose deaths have declined as overdose education and naloxone distribution has increased.







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COMMUNITY OUTREACH through RADICAL EMPONERMENT













