

HB 3211 A STAFF MEASURE SUMMARY

Senate Committee On Early Childhood and Behavioral Health

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Meeting Dates: 5/1, 5/6

WHAT THE MEASURE DOES:

The measure requires the Oregon Health Authority (OHA) to develop a nonopioid directive form that is available electronically to the public.

Detailed Summary

- Requires OHA to develop a nonopioid directive form indicating to health care providers and emergency medical services personnel that the executor should not be administered or offered an opioid.
 - Requires the form to include a warning to the patient about pain management.
 - Requires the form to include instructions on how to revoke the directive.
 - Requires OHA to make form available electronically.
- Prohibits the execution of a nonopioid directive form as a condition for health care services.
- Requires health care provider to make form part of patient's medical record if presented to provider by person other than patient.
- Specifies methods of revocation.
- Specifies situations where opioid may be administered despite execution of nonopioid directive form.
- Grants specified individuals civil and criminal immunity for failure to administer or prescribe an opioid on the basis of the execution of a nonopioid directive form.

Fiscal Impact: Minimal fiscal impact

Revenue Impact: No revenue impact

House Vote: Ayes, 56; Nays, 0

ISSUES DISCUSSED:

EFFECT OF AMENDMENT:

No amendment.

BACKGROUND:

The United States has been fighting an opioid overdose epidemic for the nearly 30 years, beginning with the increased prescribing of opioids in the late 1990s. Nearly 727,000 people died from an opioid overdose between 1999 and 2022, following periods where heroin and synthetic opioids (e.g. fentanyl) became more prevalent (Centers for Disease Control and Prevention ([CDC](#)), 2024). In 2023, nearly 8.6 million Americans 12 years and older reported misusing prescription opioids in the past year and from 1999 to 2022, approximately 294,000 people died from overdoses involving prescription opioids ([CDC](#), 2025).

Among the approaches some states have used to try and limit exposure to opioids for people at-risk of misusing them is adoption of a nonopioid directive form. These forms help ensure that medical providers consider nonopioid alternatives for pain treatment and enable patients to document their wish not to receive opioid medications. Several states—including [Alaska](#), [Connecticut](#), [Louisiana](#), [Massachusetts](#), [Michigan](#), [Pennsylvania](#), and [West Virginia](#)—have adopted nonopioid directive policies. Proposals for nonopioid directives have been introduced in both the U.S. [House of Representatives](#) and the [Senate](#).

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PRELIMINARY