

SENATE BILL REPORT

ESHB 1298

As Reported By Senate Committee On:
Human Services & Corrections, March 30, 1995

Title: An act relating to methadone treatment.

Brief Description: Enlarging the scope of the methadone treatment program to the opiate substitution treatment program.

Sponsors: House Committee on Children & Family Services (originally sponsored by Representatives Cooke, Tokuda and Patterson; by request of Department of Social and Health Services).

Brief History:

Committee Activity: Human Services & Corrections: 3/28/95, 3/30/95 [DPA].

SENATE COMMITTEE ON HUMAN SERVICES & CORRECTIONS

Majority Report: Do pass as amended.

Signed by Senators Hargrove, Chair; Franklin, Vice Chair; Fairley, Kohl, Long, Palmer, Schow and Strannigan.

Staff: Dennis Martin (786-7403)

Background: Current law provides for the use of methadone treatment services in Washington. New synthetic substitutes have been approved by the federal government in the treatment of heroin and cocaine addiction. The new opiate substitutes allow patients to attend a clinic every 48 to 72 hours for treatment, rather than every 24 hours.

Methadone clinics in Washington are limited to a caseload of no more than 350 patients. A county legislative authority may prohibit the use of methadone treatment within the county.

Summary of Amended Bill: Methadone treatment is expanded to include opiate substitute treatment. This change allows for the use of new synthetic opiate substitutes in the treatment of persons with heroin and other opiate addictions.

Opiate substitute treatment is defined as dispensing opiate substitutes approved by the Federal Drug Administration and providing comprehensive rehabilitative services.

Opiate substitute treatment programs are required to submit an annual report including outcome data to the Department of Social and Health Services. The department is required to analyze and evaluate the data submitted by each program and report annually to the Legislature. County legislative authorities are to evaluate treatment programs in accordance with established goals and standards.

The goal of opiate substitution treatment is to transition participants to total abstinence of chemical dependency. The state also recognizes that a small percentage of participants will require extended opiate substitute treatment.

Amended Bill Compared to Substitute Bill: The substitute bill provides for the use of opiate substitutes. The amended bill adds a definition of opiate substitute treatment, reporting requirements for treatment programs and the Department of Social and Health Services, evaluation criteria for county legislative authorities, and a statement of the goals of opiate substitution treatment programs.

Appropriation: None.

Fiscal Note: Available.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Testimony For: Expanding the program to allow for the use of opiate substitutes will benefit the programs and the persons receiving services.

Testimony Against: None.

Testified: Steven Freng, Association of County Human Services (pro); Ron Jackson, Evergreen treatment Services (pro); Linda Grant, Association of Alcoholism and Addictions Programs (pro); Ken Stark, DASA/DSHS (pro).