
Health Care & Wellness Committee

HB 1427

Brief Description: Concerning opioid treatment programs.

Sponsors: Representatives Cody, Jenkins, Peterson and Pollet.

<p style="text-align: center;">Brief Summary of Bill</p> <ul style="list-style-type: none">• Modifies the standards for certifying opioid treatment programs.• Modifies terminology and declarations regarding medication assisted treatment.

Hearing Date: 1/24/17

Staff: Alexa Silver (786-7190).

Background:

In the Community Mental Health Services Act, the state declares the following: (1) There is no fundamental right to opiate substitution treatment. (2) While opiate substitution drugs are addictive substances, they also have important and justified uses, including treatment of persons addicted to opioids. Opiate substitution treatment should be used only for participants who are deemed appropriate for this level of intervention and should not be the first treatment intervention. (3) The state has authority to control and carefully regulate the clinical uses of opiate substitution drugs in consultation with counties and cities. (4) The primary goal of opiate substitution treatment is total abstinence from substance use. (5) A small percentage of participants will require treatment for an extended period of time.

The Department of Social and Health Services (Department) certifies opiate substitution treatment programs and is required to establish treatment and operating standards for the programs in consultation with treatment providers, counties, and cities.

In making a decision on a program's application for certification, the Department must, among other things:

- Consult with the county and city in which the applicant proposes to locate a program;

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- Certify only programs that will be sited in accordance with county or city land use ordinances;
- Consider the population in need of treatment in the area in which the program would be located;
- Demonstrate a need in the community for opiate substitution treatment, and not certify more program slots than justified by the need. No program may exceed 350 participants unless authorized by the county; and
- Hold at least one public hearing in the county where the facility is proposed to be located, as well as a hearing in the area where the facility is proposed to be located.

The Department must adopt rules requiring opiate treatment programs to educate pregnant women on the benefits and risks of methadone treatment to the fetus before they are provided these medications.

To maintain certification, opiate substitution programs must submit an annual report to the Department and county legislative authority, including data necessary for outcome analysis. The Department must evaluate the data and take corrective action where necessary.

"Opiate substitution treatment" is defined as: (1) dispensing an opiate substitution drug approved by the Food and Drug Administration for the treatment of opiate addiction; and (2) providing a comprehensive range of medical and rehabilitative services.

Summary of Bill:

Terms used in the Community Mental Health Services Act (Act) are changed to "opioid treatment program," "medication assisted treatment," and "opioid use disorder" instead of "opiate substitution treatment programs," "methadone treatment," and "opiate addiction." Declarations in the Act are modified to provide that: (1) The state recognizes as evidence-based for the management of opioid use disorders the treatment approaches acknowledged by the University of Washington Alcohol and Drug Abuse Institute, as well as medications approved by the Food and Drug Administration for the treatment of opioid use disorder. (2) Because some such medications are controlled substances, the state maintains the legal obligation to regulate the clinical uses of these medications in the treatment of opioid use disorder. (3) The choice between recognized treatment options should be patient-centered and determined by shared decision-making between patients and providers. (4) The primary goals of treatment for persons with opioid use disorder are cessation of unprescribed opioid use, reduced morbidity, and restoration of the ability to lead a productive and fulfilling life.

In making a decision on an application for certification of an opioid treatment program, the Department of Social and Health Services (Department) is not required to: demonstrate a need in the community for opiate substitution treatment; certify only the number of program slots justified by community need; hold a public meeting in the area where the facility is to be located; or consider whether the applicant has demonstrated the capability to assist persons in the program with meeting abstinence goals.

Opioid treatment programs are no longer required to submit an annual report with data to the Department and the county legislative authority. Opioid treatment programs are subject to the same oversight as other substance use disorder treatment programs.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.