

SENATE BILL REPORT

ESHB 1339

As of March 22, 2017

Title: An act relating to restrictions on prescriptions for opioid drugs.

Brief Description: Concerning restrictions on prescriptions for opioid drugs.

Sponsors: House Committee on Health Care & Wellness (originally sponsored by Representatives Cody, Harris, Jinkins, Johnson, Kagi, Lovick, Ormsby and Slatter).

Brief History: Passed House: 3/07/17, 91-6.

Committee Activity: Health Care: 3/21/17.

Brief Summary of Bill

- Requires practitioners to complete one hour of continuing education regarding best practices in the prescribing of prescription drugs.
- Requires disciplining authorities to adopt rules establishing requirements for prescribing opioid drugs.

SENATE COMMITTEE ON HEALTH CARE

Staff: Kathleen Buchli (786-7488)

Background: Prescriptive Authority. It is unlawful to possess, deliver, or dispense a legend drug except pursuant to a prescription issued by a health care provider who has prescriptive authority under Washington law. Providers with prescriptive authority include allopathic and osteopathic physicians and physician assistants, advanced registered nurse practitioners, dentists, naturopaths, optometrists, podiatric physicians, and veterinarians.

Pain Management Rules and Guidelines. In 2011, the Medical Quality Assurance Commission, the Board of Osteopathic Medicine and Surgery, the Podiatric Medical Board, the Dental Quality Assurance Commission, and the Nursing Care Quality Assurance Commission were required to adopt rules on chronic, noncancer pain management. The rules do not apply to palliative, hospice, or end-of-life care, or to the management of acute pain caused by an injury or surgical procedure. The rules contain:

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- dosing criteria, including a dosage amount that may not be exceeded without consultation with a pain management specialist, and special circumstances under which the dosage may be exceeded without a consultation;
- guidance on when to seek specialty consultation and ways in which electronic specialty consultation may be sought;
- guidance on tracking clinical progress by using assessment tools; and
- guidance on tracking the use of opioids.

Separately, the Agency Medical Directors' Group has adopted guidelines on prescribing opioids for pain. The guidelines contain recommendations applicable to all pain phases, as well as recommendations specific to different types or phases of pain. Generally, they recommend prescribing opioids at the lowest possible effective dose.

Summary of Bill: To prescribe an opioid drug, a practitioner must complete one hour of continuing education regarding best practices in the prescribing of opioid drugs. A disciplining authority may adopt additional continuing education requirements related to prescribing opioid drugs.

By July 1, 2018, disciplining authorities must adopt rules establishing requirements for prescribing opioid drugs. The rules must be consistent with the Interagency Guideline for Prescribing Opioids for Pain developed by the Washington State Agency Medical Directors' Group. A practitioner who violates the rules commits unprofessional conduct under the Uniform Disciplinary Act.

Appropriation: None.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

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

Staff Summary of Public Testimony: PRO: The prescription limits in the bill as introduced is the preferred approach. Over-prescribing must be stopped and we are worried about the increased use of drugs. This is a positive move in the right direction. The continuing medical education requirement will help practitioners learn and share best practices.

CON: This is not the Washington State Medical Association's preferred approach. We ask that you look at SB 5248, which allows the commissions to look beyond the Agency Medical Directors' Group guidelines. We oppose the continuing medical education requirement and believe physicians need to make decisions on their practices. The prescription monitoring program can be used to address educating providers. The best way to change prescriber behavior is to learn through the peer review process and through the data provided in SB 5248.

Persons Testifying: PRO: Representative Eileen Cody, Prime Sponsor; Rita Ireland, League of Women Voters, Edmonds.

CON: Kathryn Kolan, Washington State Medical Association.

Persons Signed In To Testify But Not Testifying: No one.