Washington State House of Representatives Office of Program Research

BILL ANALYSIS

Health Care & Wellness Committee

2SSB 5195

Brief Description: Concerning opioid overdose reversal medication.

Sponsors: Senate Committee on Ways & Means (originally sponsored by Senators Liias, Muzzall, Das, Dhingra, Nguyen and Wilson, C.).

Brief Summary of Second Substitute Bill

- Requires a hospital emergency department to dispense opioid overdose reversal medication to a patient with symptoms of an opioid overdose or opioid use disorder.
- Requires certain community behavioral health agencies and providers to
 prescribe and dispense or assist the client in directly obtaining opioid
 reversal medication to a client with symptoms of an opioid use disorder
 or who reports recent unauthorized opioid use.
- Requires Medicaid managed care organizations and the Health Care Authority to reimburse hospitals for providing opioid overdose reversal medication.

Hearing Date: 3/18/21

Staff: Kim Weidenaar (786-7120).

Background:

Opioid Overdose Reversal Medication.

Opioid overdose reversal medications, such as Narcan, Naloxone, and Evzio, can be administered to an individual experiencing an opioid overdose to rapidly restore normal breathing. These medications may be injected intravenously in muscle or sprayed into the nose. Opioid overdose reversal medication is defined as any drug used to reverse an opioid overdose

House Bill Analysis - 1 - 2SSB 5195

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that binds to opioid receptors and blocks or inhibits the effects of opioids acting on those receptors.

The Secretary of Health, or designee, is authorized to issue a standing order for opioid reversal medication to any person at risk of experiencing an opioid related overdose or any person or entity in a position to assist a person at risk of experiencing an opioid-related overdose. Prescribers and dispensers are authorized to provide opioid overdose reversal medication pursuant to the standing order or a collaborative drug therapy agreement to any person at risk of experiencing an opioid overdose or to any person in a position to assist a person at risk of experiencing an opioid overdose. When a pharmacist dispenses an opioid overdose reversal medication, the pharmacist must provide written instructions on the proper response to an opioid-related overdose, which must include seeking medical attention.

Hospital emergency departments may provide prepackaged opioid overdose reversal medication when the practitioner determines the patient is at risk of an opioid overdose and it is authorized by the hospital's policies and procedures. The prepackaged medications are exempt from the Pharmacy Commission's labeling requirements.

Prescribing Authority.

Opioid treatment programs may order, possess, dispense, and administer opioid overdose reversal medication and medications approved by the United States Food and Drug Administration (FDA) to treat opioid use disorder. Registered nurses and licensed practical nurses may dispense up to a 31-day supply of FDA-approved medications to patients receiving opioid use disorder treatment under an order or prescription.

Summary of Second Substitute Bill:

A hospital emergency department must provide a person with opioid overdose reversal medication upon discharge, unless the provider determines it to be clinically inappropriate to do so, if the person presents with symptoms of an opioid overdose, opioid use disorder, or other adverse event related to opioid use. If the hospital dispenses opioid overdose reversal medication, it must provide directions for use. The medication may be dispensed using technology used to dispense opioid medications. A hospital, its employees, and practitioners are immune from suit in any action, civil or criminal, or from professional or other disciplinary action, for action or inaction in compliance with these requirements.

If the patient is enrolled in a Medicaid program or other insurance coverage, the hospital must bill the patient's Medicaid benefit or insurance for the medication. Medicaid managed care organizations must reimburse hospitals for dispensing opioid overdose reversal medication to patients enrolled in a Medicaid program. For patients not enrolled in a Medicaid program and without any other available insurance coverage, the Health Care Authority (HCA) must reimburse the hospital.

Effective January 1, 2022, a person who is provided opioid overdose reversal medication must be

provided information and resources about medication for opioid use disorder, harm reduction strategies, and services which may be available. The information should be provided in all languages relevant to the community which the hospital serves.

During intake, discharge, or an outpatient treatment plan review, a community mental health agency that provides individual treatment, outpatient substance use disorder provider, residential substance use disorder provider, withdrawal management provider, secure withdrawal management or stabilization facility provider, or opioid treatment program must confirm that each client who presents with symptoms of an opioid use disorder or who reports recent use of opioids outside of legal authority has opioid reversal medication. If the client does not possess opioid overdose reversal medication, the agency or provider must prescribe an opioid reversal medication to the client or use the statewide Naloxone standing order, and assist the client in directly obtaining opioid reversal medication, by directly dispensing (if authorized), partnering with a pharmacy, or other means. The provider must bill the client's insurance to the extent possible. A behavioral health agency and its employees and practitioners are immune from suit in any action, civil or criminal, or from professional or other disciplinary action, for action or inaction in compliance with these requirements.

Opioid overdose reversal medications dispensed or delivered as permitted by this act are exempt from pharmacy labeling requirements for legend drugs.

The HCA, in consultation with the Department of Health and the Office of the Insurance Commissioner, must provide technical assistance to hospitals and community behavioral health agencies to assist them in complying with this act. The HCA must develop written materials in all relevant languages for each hospital, including directions for use of the opioid overdose reversal medication, and provide the instructions to all hospitals by January 1, 2022.

Appropriation: None.

Fiscal Note: Available.

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