

BILL ANALYSIS

C.S.H.B. 3285
By: Sheffield
Public Health
Committee Report (Substituted)

BACKGROUND AND PURPOSE

While Texas has fared better than many other states, the number of deaths in Texas related to prescription drug and opioid abuse has risen dramatically in recent years. In an effort to prevent opioid addiction, misuse, and abuse in Texas, C.S.H.B. 3285 seeks to enact a number of varied programs and initiatives to tackle the opioid epidemic from all sides.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission in SECTIONS 2 and 5 of this bill and to the Texas State Board of Pharmacy in SECTION 6 of this bill.

ANALYSIS

C.S.H.B. 3285 amends the Education Code to require the Texas Higher Education Coordinating Board to encourage health-related institutions, as that term is defined for purposes of the governor's university research initiative, and the faculty of those institutions to individually or through collaborative effort conduct research, for public health purposes, regarding substance use disorders and addiction issues involving prescription drugs.

C.S.H.B. 3285 amends the Government Code to require the executive commissioner of the Health and Human Services Commission (HHSC) to establish by rule a program to increase opportunities and expand access to telehealth treatment for substance use disorders in Texas.

C.S.H.B. 3285 requires the criminal justice division of the governor's office to establish and administer a grant program to provide financial assistance to a law enforcement agency in Texas that seeks to provide opioid antagonists to peace officers, evidence technicians, and related personnel who, in the course of performing their duties, are likely to come into contact with opioids or encounter persons suffering from an apparent opioid-related drug overdose. An agency may apply for a grant only if the agency first adopts a policy addressing the usage of an opioid antagonist for a person suffering from an apparent opioid-related drug overdose. The bill sets out certain application requirements and requires an agency receiving a grant, as soon as practicable after receiving the grant, to provide to the division proof of purchase of the opioid antagonists. The bill authorizes the division to use any money available for purposes of the grant program.

C.S.H.B. 3285 amends the Health and Safety Code to require the Statewide Behavioral Health Coordinating Council, in preparing the statewide behavioral health strategic plan, to incorporate,

as a separate part of that plan, strategies regarding substance abuse issues that are developed by the council in cooperation with the Texas Medical Board and the Texas State Board of Pharmacy (TSBP), including certain specified strategies.

C.S.H.B. 3285 requires the executive commissioner, not later than December 1, 2019, to develop by rule a statewide public awareness campaign to deliver public service announcements that explain and clarify certain risks related to opioid misuse. The bill requires the Department of State Health Services to implement the campaign. These provisions and the campaign expire August 31, 2023.

C.S.H.B. 3285 requires the executive commissioner, not later than December 1, 2019, and from funds available, to establish a program to provide opioid antagonists for the prevention of opioid overdoses in a manner determined by the executive commissioner to best accomplish that purpose. The executive commissioner may provide the antagonists under the program to emergency medical services personnel, first responders, public schools, community centers, and other persons likely to be in a position to respond to an opioid overdose. The bill authorizes HHSC to accept gifts, grants, and donations to be used in administering the program and requires the executive commissioner to adopt rules as necessary to implement the program.

C.S.H.B. 3285 requires a prescriber or dispenser whose practice includes the prescription or dispensation of opioids to attend annually at least one hour of continuing education covering best practices, alternative treatment options, and multi-modal approaches to pain management that may include physical therapy, psychotherapy, and other treatments. The bill requires the TSBP to adopt rules to establish the content of the continuing education and authorizes the TSBP to collaborate with private and public institutions of higher education and hospitals in establishing the content of the continuing education. These provisions expire August 31, 2023.

C.S.H.B. 3285 requires the executive commissioner to ensure that data is collected by the Department of State Health Services (DSHS) regarding opioid overdose deaths and the co-occurrence of substance use disorders and mental illness. The bill authorizes DSHS to use data collected by the vital statistics unit and any other source available to DSHS. The bill requires DSHS, in analyzing the collected data, to evaluate the capacity in Texas for treating co-occurring substance use disorders and mental illness.

C.S.H.B. 3285 amends the Human Resources Code to require HHSC to provide Medicaid reimbursement for medication-assisted opioid or substance use disorder treatment, with certain exceptions, without requiring a recipient of Medicaid or a health care provider to obtain prior authorization or precertification for the treatment. The requirement to provide such reimbursement applies only with respect to treatment prescribed to a Medicaid recipient by a licensed health care provider who is authorized to prescribe methadone, buprenorphine, oral buprenorphine/naloxone, or naltrexone. These provisions expire August 31, 2023.

C.S.H.B. 3285 amends the Occupations Code to make provisions regulating pain management clinics applicable to a clinic owned or operated by an advanced practice nurse licensed in Texas who treats patients in the nurse's area of specialty and who personally uses other forms of treatment with the issuance of a prescription for a majority of the patients. The bill requires the TSBP to encourage pharmacists to participate in a program that provides a comprehensive approach to the delivery of early intervention and treatment services for persons with substance use disorders and persons who are at risk of developing substance use disorders.

EFFECTIVE DATE

September 1, 2019.

COMPARISON OF ORIGINAL AND SUBSTITUTE

While C.S.H.B. 3285 may differ from the original in minor or nonsubstantive ways, the following summarizes the substantial differences between the introduced and committee substitute versions of the bill.

The substitute includes provisions relating to the following:

- research on substance use disorders and addiction issues involving prescription drugs;
- telehealth treatment for substance use disorders;
- an opioid antagonist grant program;
- the statewide behavioral health strategic plan developed by the Statewide Behavioral Health Coordinating Council;
- data collection and analysis regarding opioid overdose deaths and co-occurring substance use disorders;
- Medicaid reimbursement for medication-assisted treatment of opioid or substance use disorder; and
- the encouraged participation of pharmacists in a program that provides a comprehensive substance use disorder early intervention and treatment approach.

The substitute provides for the expiration of the bill's provisions regarding the public awareness campaign on August 31, 2023.

The substitute does not include law enforcement agencies among the entities to which the executive commissioner of HHSC may provide opioid antagonists under the opioid antagonist program.

The substitute does not include provisions requiring a person dispensing a controlled substance under a prescription to provide a certain written notice to the person receiving the controlled substance and requiring the TSBP to maintain a list of locations at which controlled substance prescription drugs are accepted for safe disposal.

The substitute revises the bill provision establishing that a prescriber or dispenser whose practice includes the prescription or dispensation of opioids is encouraged to attend certain related continuing education by requiring such attendance instead, by specifying that the prescriber or dispenser must attend annually at least one hour of related continuing education, by revising the required contents of the continuing education, and by providing for an expiration of the requirement on August 31, 2023.

The substitute does not include provisions establishing an opioid prescription work group.

The substitute makes provisions relating to the regulation of pain management clinics applicable to certain clinics owned or operated by an advanced practice nurse.

The substitute changes the bill's effective date provision.