

SUBJECT: Requiring HHSC to update rules on opioid antagonist prescriptions

COMMITTEE: Human Services — favorable, without amendment

VOTE: 7 ayes — Frank, Hinojosa, Deshotel, Klick, Meza, Miller, Noble

0 nays

2 absent — Clardy, Rose

SENATE VOTE: On final passage, April 3 — 31-0

WITNESSES: For — Lori Holleran; (*Registered, but did not testify:* Anne Dunkelberg, Center for Public Policy Priorities; Chris Masey, Coalition of Texans with Disabilities; Christine Yanas, Methodist Healthcare Ministries of South Texas, Inc.; Greg Hansch, National Alliance on Mental Illness Texas; Will Francis, National Association of Social Workers-Texas Chapter; Cameron Duncan, Texas Hospital Association; Pamela McPeters, TexProtects, Texas Chapter of Prevent Child Abuse America; Alexis Tatum, Travis County Commissioners Court; Rebecca Harkleroad; Maria Person)

Against — None

On — (*Registered, but did not testify:* Sarah Melecki, Texas Health and Human Services Commission)

BACKGROUND: 21 U.S.C. sec. 823(g)(2)(G)(iii) defines "qualified practitioner" to mean a licensed physician with certification in addiction psychiatry or addiction medicine with relevant training and experience. The definition also includes a nurse practitioner or physician assistant who had completed certain training and who was supervised by a qualifying physician.

Concerned parties note that a large number of Texans who have a substance use disorder do not have access to providers who are able to prescribe them the common opioid antagonist buprenorphine.

DIGEST: SB 1564 would require the Health and Human Services Commission to amend the commission's Medicaid Substance Use Disorder Services Medical Policy and any other provider or claims payment policy or manual necessary to authorize Medicaid reimbursement for the prescribing of buprenorphine for the treatment of an opioid use disorder by an advanced practice registered nurse. The nurse would have to be recognized by the Texas Board of Nursing as a clinical nurse specialist, nurse anesthetist, or nurse midwife, and be a qualifying practitioner who had obtained a federal waiver from registration requirements for dispensing narcotic drugs.

This bill would take immediate effect if finally passed by a two-thirds record vote of the membership of each house. Otherwise, it would take effect September 1, 2019.