

BILL ANALYSIS

Senate Research Center
86R28280 GCB-D

H.B. 3285
By: Sheffield et al. (Huffman)
Health & Human Services
5/15/2019
Engrossed

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

H.B. 3285 would enact programs and initiatives to address, comprehensively, the opioid epidemic in Texas, with a focus on preventing opioid addiction, misuse, and abuse.

H.B. 3285 amends current law relating to programs and initiatives to prevent and respond to opioid addiction, misuse, abuse, and overdose and identify and treat co-occurring substance use disorders and mental illness.

RULEMAKING AUTHORITY

Rulemaking authority is expressly granted to the executive commissioner of the Health and Human Services Commission in SECTION 2 (Section 531.02253, Government Code) and SECTION 5 (Sections 461A.058 and 461A.059, Health and Safety Code) of this bill.

Rulemaking authority is expressly granted to the Texas Higher Education Coordinating Board in SECTION 6 (Section 481.0764, Health and Safety Code) of this bill.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Subchapter C, Chapter 61, Education Code, by adding Section 61.08205, as follows:

Sec. 61.08205. RESEARCH ON SUBSTANCE USE DISORDERS AND ADDICTION. (a) Requires the Texas Higher Education Coordinating Board (THECB) to encourage health-related institutions, as defined by Section 62.161 (Definitions), as added by Chapter 448 (H.B. 7), Acts of the 84th Legislature, Regular Session, 2015, 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.

SECTION 2. Amends Subchapter B, Chapter 531, Government Code, by adding Section 531.02253, as follows:

Sec. 531.02253. TELEHEALTH TREATMENT FOR SUBSTANCE USE DISORDERS. Requires the executive commissioner of the Health and Human Services Commission (executive commissioner) by rule to establish a program to increase opportunities and expand access to telehealth treatment for substance use disorders in this state.

SECTION 3. Amends Subchapter A, Chapter 772, Government Code, by adding Section 772.0078, as follows:

Sec. 772.0078. OPIOID ANTAGONIST GRANT PROGRAM. (a) Defines "criminal justice division," "opioid antagonist," and "opioid-related drug overdose" for purposes of this section.

(b) Requires the criminal justice division to establish and administer a grant program to provide financial assistance to a law enforcement agency in this state 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.

(c) Authorizes a law enforcement agency to apply for a grant under this section 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.

(d) Requires the law enforcement agency, in an application for a grant under this section, to provide information to the criminal justice division about the frequency and nature of:

(1) interactions between peace officers and persons suffering from an apparent opioid-related drug overdose;

(2) calls for assistance based on an apparent opioid-related drug overdose; and

(3) any exposure of peace officers, evidence technicians, or related personnel to opioids or suspected opioids in the course of performing their duties and any reactions by those persons to those substances.

(e) Requires a law enforcement agency receiving a grant under this section, as soon as practicable after receiving the grant, to provide to the criminal justice division proof of purchase of the opioid antagonists.

(f) Authorizes the criminal justice division to use any money available for purposes of this section.

SECTION 4. Amends Subtitle E, Title 2, Health and Safety Code, by adding Chapter 109, as follows:

CHAPTER 109. STATEWIDE BEHAVIORAL HEALTH COORDINATING COUNCIL

Sec. 109.001. DEFINITION. Defines "council" as the Statewide Behavioral Health Coordinating Council (council), for purposes of this chapter.

Sec. 109.002. STATEWIDE BEHAVIORAL HEALTH STRATEGIC PLAN. Requires the 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 (TMB) and the Texas State Board of Pharmacy (TSBP), including strategies for:

(1) addressing the challenges of existing prevention, intervention, and treatment programs;

(2) evaluating substance use disorder prevalence involving the abuse of opioids;

(3) identifying substance abuse treatment services availability and gaps; and

(4) collaborating with state agencies to expand substance abuse treatment services capacity in this state.

SECTION 5. Amends Subchapter B, Chapter 461A, Health and Safety Code, by adding Sections 461A.058 and 461A.059, as follows:

Sec. 461A.058. OPIOID MISUSE PUBLIC AWARENESS CAMPAIGN. (a) Requires the executive commissioner by rule to develop and the Department of State Health

Services (DSHS) to implement a statewide public awareness campaign to deliver public service announcements that explain and clarify certain risks related to opioid misuse, including:

(1) the risk of overdose, addiction, respiratory depression, or over-sedation; and

(2) risks involved in mixing opioids with alcohol or other medications.

(b) Provides that this section and the statewide public awareness campaign developed under this section expire August 31, 2023.

Sec. 461A.059. OPIOID ANTAGONIST PROGRAM. (a) Defines "opioid antagonist" for purposes of this section.

(b) Requires the executive commissioner, from funds available for that purpose, 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.

(c) Authorizes the executive commissioner to provide opioid 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.

(d) Authorizes the Health and Human Services Commission (HHSC) to accept gifts, grants, and donations to be used in administering this section.

(e) Requires the executive commissioner to adopt rules as necessary to implement this section.

SECTION 6. Amends Section 481.0764, Health and Safety Code, by adding Subsection (f), as follows:

(f) Requires a prescriber or dispenser whose practice includes the prescription or dispensation of opioids to annually attend at least one hour of continuing education covering best practices, alternative treatment options, and multi-modal approaches to pain management that are authorized to include physical therapy, psychotherapy, and other treatments. Requires THECB to adopt rules to establish the content of continuing education described by this subsection. Authorizes THECB to collaborate with private and public institutions of higher education and hospitals in establishing the content of the continuing education. Provides that this subsection expires August 31, 2023.

SECTION 7. Amends Chapter 1001, Health and Safety Code, by adding Subchapter K, as follows:

SUBCHAPTER K. DATA COLLECTION AND ANALYSIS REGARDING OPIOID OVERDOSE DEATHS AND CO-OCCURRING SUBSTANCE ABUSE DISORDERS

Sec. 1001.261. DATA COLLECTION AND ANALYSIS REGARDING OPIOID OVERDOSE DEATHS AND CO-OCCURRING SUBSTANCE ABUSE DISORDERS.

(a) Requires the executive commissioner to ensure that data is collected by DSHS regarding opioid overdose deaths and the co-occurrence of substance use disorders and mental illness. Authorizes DSHS to use data collected by the vital statistics unit and any other source available to DSHS.

(b) Requires DSHS, in analyzing data collected under this section, to evaluate the capacity in this state for the treatment of co-occurring substance use disorders and mental illness.

SECTION 8. Amends Subchapter B, Chapter 32, Human Resources Code, by adding Section 32.03115, as follows:

Sec. 32.03115. REIMBURSEMENT FOR MEDICATION-ASSISTED TREATMENT FOR OPIOID OR SUBSTANCE USE DISORDERS. (a) Defines "medication-assisted opioid or substance use disorder treatment" for purposes of this section.

(b) Requires HHSC, notwithstanding Sections 531.072 (Preferred Drug Lists) and 531.073 (Prior Authorization For Certain Prescription Drugs), Government Code, or any other law and subject to Subsections (c) and (d), to provide medical assistance reimbursement for medication-assisted opioid or substance use disorder treatment without requiring a recipient of medical assistance or health care provider to obtain prior authorization or precertification for the treatment.

(c) Provides that the duty to provide medical assistance reimbursement for medication-assisted opioid or substance use disorder treatment under Subsection (b) does not apply with respect to:

(1) a prescription for methadone;

(2) a recipient for whom medication-assisted opioid or substance use disorder treatment is determined to be medically contraindicated by the recipient's physician; or

(3) a recipient who is subject to an age-related restriction applicable to medication-assisted opioid or substance abuse disorder treatment.

(d) Authorizes HHSC to provide medical assistance reimbursement for medication-assisted opioid or substance use disorder treatment only if the treatment is prescribed to a recipient of medical assistance by a licensed health care provider who is authorized to prescribe methadone, buprenorphine, oral buprenorphine/naloxone, or naltrexone.

(e) Provides that this section expires August 31, 2023.

SECTION 9. Amends Section 168.002, Occupations Code, as follows:

Sec. 168.002. EXEMPTIONS. Deletes existing Subdivision (8) and existing text referring to a clinic owned or operated by an advanced practice nurse licensed in this state 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. Provides that this chapter (Regulation of Pain Management Clinics) does not apply to:

(1)–(5) makes no changes to these subdivisions;

(6)–(7) makes nonsubstantive changes to these subdivisions.

SECTION 10. Amends Subchapter A, Chapter 554, Occupations Code, by adding Section 554.018, as follows:

Sec. 554.018. COMPREHENSIVE SUBSTANCE USE DISORDER APPROACH. Requires THECB 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, such as a program promoted by the Substance Abuse and Mental Health Services Administration within the United States Department of Health and Human Services.

SECTION 11. Requires the executive commissioner, not later than December 1, 2019, to:

(1) develop the opioid misuse public awareness campaign required by Section 461A.058, Health and Safety Code, as added by this Act; and

(2) establish the opioid antagonist program required by Section 461A.059, Health and Safety Code, as added by this Act.

SECTION 12. Requires the agency affected by the provision, if before implementing any provision of this Act a state agency determines that a waiver or authorization from a federal agency is necessary for implementation of that provision, to request the waiver or authorization and authorizes the agency to delay implementing that provision until the waiver or authorization is granted.

SECTION 13. Effective date: September 1, 2019.