A-Engrossed House Bill 4081

Ordered by the House February 16 Including House Amendments dated February 16

Sponsored by Representative PRUSAK, Senator KENNEMER; Representatives ALONSO LEON, CAMPOS, DEXTER, GRAYBER, HOY, MARSH, NERON, PHAM, REYNOLDS, SCHOUTEN, SMITH WARNER, WEBER, WILLIAMS, Senators GOLDEN, GORSEK, STEINER HAYWARD (Presession filed.)

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure.

Requires pharmacist who dispenses opioid prescription to offer prescription for naloxone, or similar drug, and information about naloxone under specified circumstances. Creates exceptions to requirement to offer prescription for naloxone or similar drug. Allows pharmacy, health care professional or pharmacist to distribute and administer drug similar to naloxone. Allows certain persons to administer, to individual experiencing opioid overdose, drug similar to naloxone that was not distributed to individual. Requires pharmacies to provide written notice that drug similar to naloxone is available at pharmacy. Requires health benefit plan to provide payment or reimbursement for naloxone prescription and dispensation by pharmacist.

Becomes operative January 1, 2023.

Takes effect on 91st day following adjournment sine die.

| 1 | A BILL FOR AN ACT |
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| 2 | Relating to naloxone; creating new provisions; amending ORS 689.681, 689.682, 689.684, 689.686 and |
| 3 | 743A.051; and prescribing an effective date. |
| 4 | Be It Enacted by the People of the State of Oregon: |
| 5 | SECTION 1. ORS 689.681 is amended to read: |
| 6 | 689.681. (1) As used in this section: |
| 7 | (a) "Kit" means a dose of naloxone or any other drug approved by the United States Food |
| 8 | and Drug Administration for the complete or partial reversal of opioid overdose and the nec- |
| 9 | essary medical supplies to administer the naloxone or other drug described in this paragraph. |
| 10 | [(b) "Opiate" means a narcotic drug that contains:] |
| 11 | [(A) Opium;] |
| 12 | [(B) Any chemical derivative of opium; or] |
| 13 | [(C) Any synthetic or semisynthetic drug with opium-like effects.] |
| 14 | [(c) "Opiate overdose" means a medical condition that causes depressed consciousness and mental |
| 15 | functioning, decreased movement, depressed respiratory function and the impairment of the vital func- |
| | |

(b) "Opioid" means a natural, synthetic or semisynthetic chemical that interacts with opioid receptors on nerve cells in the body and brain to reduce the intensity of pain signals and feelings of pain.

tions as a result of ingesting opiates in an amount larger than can be physically tolerated.]

(c) "Opioid overdose" means a medical condition that causes depressed consciousness and mental functioning, decreased movement, depressed respiratory function and the impairment of vital functions as a result of ingesting opioids in an amount larger than can be physically

NOTE: Matter in **boldfaced** type in an amended section is new; matter [*italic and bracketed*] is existing law to be omitted. New sections are in **boldfaced** type.

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tolerated.

- (2) Notwithstanding any other provision of law, a pharmacy, a health care professional or a pharmacist with prescription and dispensing privileges or any other person designated by the State Board of Pharmacy by rule may distribute and administer naloxone or any other drug approved by the United States Food and Drug Administration for the complete or partial reversal of opioid overdose and distribute the necessary medical supplies to administer the naloxone or other drug described in this subsection. The pharmacy, health care professional or pharmacist may also distribute multiple kits to social service agencies under ORS 689.684 or to other persons who work with individuals who have experienced an [opiate] opioid overdose. The social services agencies or other persons may redistribute the kits to individuals likely to experience an [opiate] opioid overdose or to family members of the individuals.
- (3) A person acting in good faith, if the act does not constitute wanton misconduct, is immune from civil liability for any act or omission of an act committed during the course of distributing and administering naloxone or other drug described in subsection (2) of this section and distributing under this section the necessary medical supplies to administer the naloxone or other drug described in subsection (2) of this section [under this section].

SECTION 2. ORS 689.682 is amended to read:

689.682. (1) As used in this section:

- (a) "Opioid" means a natural, synthetic or semisynthetic chemical that interacts with opioid receptors on nerve cells in the body and brain to reduce the intensity of pain signals and feelings of pain.
- (b) "Opioid overdose" means a medical condition that causes depressed consciousness and mental functioning, decreased movement, depressed respiratory function and the impairment of vital functions as a result of ingesting opioids in an amount larger than can be physically tolerated.
- [(1)] (2) In accordance with rules adopted by the State Board of Pharmacy under ORS 689.205, a pharmacist may prescribe and dispense naloxone or any other drug approved by the United States Food and Drug Administration for the complete or partial reversal of opioid overdose and the necessary medical supplies to administer the naloxone or other drug described in this subsection.
- [(2) If a prescription is presented to a pharmacist for dispensing an opiate or opioid in excess of a morphine equivalent dose established by rule by the board, the pharmacist may offer to prescribe and provide, in addition to the prescribed opiate or opioid, a naloxone kit consisting of a dose of naloxone and the necessary medical supplies to administer the naloxone.]
- (3) A pharmacist who dispenses an initial prescription for an opioid shall offer to the patient a prescription for naloxone or any other drug approved by the United States Food and Drug Administration for the complete or partial reversal of opioid overdose, if any of the following conditions are present:
- (a) The patient is prescribed an opioid in a dosage of 90 milligram morphine equivalents per day or higher;
- 41 (b) The patient is concurrently prescribed benzodiazepine and an opioid in any dosage; 42 or
 - (c) The patient has been prescribed benzodiazepine within the last year.
 - (4) A pharmacist who offers a prescription for naloxone or another drug for opioid overdose reversal described in subsection (3) of this section shall inform the patient, or the

- patient's guardian if the patient is a minor, either orally or in writing, about opioid overdose and the use of naloxone or another drug for opioid overdose reversal described in subsection (3) of this section.
- (5) If a pharmacist dispenses a subsequent prescription for an opioid to a patient described in subsection (3) of this section, the pharmacist shall offer to the patient a prescription for naloxone or another drug for opioid overdose reversal described in subsection (3) of this section and provide the information described in subsection (4) of this section if either of the following apply:
- (a) The pharmacist has not dispensed to the patient a prescription for naloxone or another drug for opioid overdose reversal described in subsection (3) of this section; or
- (b) One year or more has elapsed since the pharmacist last dispensed to the patient a prescription for naloxone or another drug for opioid overdose reversal described in subsection (3) of this section.
- (6) The requirements of this section do not apply when a pharmacist dispenses a prescription for an opioid for an individual who is:
 - (a) In a hospice program, as defined in ORS 443.850;
 - (b) Receiving palliative care;

- (c) Receiving inpatient care and the opioid prescription is for the duration of the inpatient care; or
- (d) Undergoing an outpatient medical procedure and the opioid prescribed will be administered prior to the patient's discharge.
 - **SECTION 3.** ORS 689.684 is amended to read:
- 689.684. (1) For purposes of this section, "social services agency" includes, but is not limited to, homeless shelters and crisis centers.
- (2) A person may administer to an individual naloxone or any other drug approved by the United States Food and Drug Administration for the complete or partial reversal of opioid overdose that was not distributed to the person if:
- (a) The individual to whom the naloxone or other drug described in this subsection is being administered appears to be experiencing an [opiate] opioid overdose as defined in ORS 689.681; and
- (b) The person who administers the naloxone or other drug described in this subsection is an employee of a social services agency or is trained under rules adopted by the State Board of Education pursuant to ORS 339.869.
- (3) For the purposes of protecting public health and safety, the Oregon Health Authority may adopt rules for the administration of naloxone or other drug described in subsection (2) of this section by employees of a social services agency under this section.
 - **SECTION 4.** ORS 689.686 is amended to read:
- 689.686. (1) A retail or hospital outpatient pharmacy shall provide written notice in a conspicuous manner that naloxone or other drug approved by the United States Food and Drug Administration for the complete or partial reversal of opioid overdose and the necessary medical supplies to administer naloxone or other drug described in this subsection are available at the pharmacy.
 - (2) The State Board of Pharmacy may adopt rules to carry out this section.
- **SECTION 5.** ORS 743A.051 is amended to read:
- 743A.051. Notwithstanding any provisions of a health benefit plan as defined in ORS 743B.005, whenever the plan provides for payment or reimbursement for a service that is within the lawful

- scope of practice of a pharmacist, the insurer:
 - (1) May provide payment or reimbursement for the service when the service is provided by a pharmacist; and
 - (2) Shall provide, in the same manner as would be provided for any other health care provider, payment or reimbursement for:
 - (a)(A) The prescription of emergency refills of insulin and associated insulin-related devices and supplies as described in ORS 689.696; and
 - (B) The service provided by the pharmacist;
 - (b)(A) The prescription, dispensation and administration of preexposure and post-exposure prophylactic antiretroviral therapies pursuant to ORS 689.704 and any rules adopted by the State Board of Pharmacy under ORS 689.645 and 689.704; and
 - (B) The service provided by the pharmacist; [and]
 - (c)(A) The prescription and dispensation of naloxone, or another drug approved by the United States Food and Drug Administration for the complete or partial reversal of opioid overdose, pursuant to ORS 689.682; and
 - (B) The service provided by the pharmacist; and
 - [(c)(A)] (d)(A) The prescription and dispensation of other prescription drugs by a licensed pharmacist if the [State Board of Pharmacy] board or any state law authorizes the drug to be prescribed and dispensed by pharmacists licensed under ORS chapter 689; and
 - (B) The service provided by the pharmacist.
 - (3) This section is exempt from ORS 743A.001.
 - SECTION 6. The amendments to ORS 689.682 and 743A.051 by sections 2 and 5 of this 2022 Act apply to prescriptions for opioids written on or after the operative date specified in section 7 of this 2022 Act.
 - <u>SECTION 7.</u> (1) The amendments to ORS 689.681, 689.682, 689.684, 689.686 and 743A.051 by sections 1 to 5 of this 2022 Act become operative on January 1, 2023.
 - (2) The State Board of Pharmacy may take any action before the operative date specified in subsection (1) of this section that is necessary to enable the board to exercise, on and after the operative date specified in subsection (1) of this section, all of the duties, functions and powers conferred on the board by the amendments to ORS 689.681, 689.682, 689.684, 689.686 and 743A.051 by sections 1 to 5 of this 2022 Act.
 - SECTION 8. This 2022 Act takes effect on the 91st day after the date on which the 2022 regular session of the Eighty-first Legislative Assembly adjourns sine die.