REQUESTING THE HOUSE COMMITTEE ON PUBLIC HEALTH, WELFARE, AND LABOR TO STUDY THE EFFECTS AND IMPACTS OF ACTS 2021, NO. 651 WHICH MANDATES THE COPRESRIPTION OF AN OPIOID ANTAGONIST UNDER CERTAIN CONDITIONS.

WHEREAS, Acts 2021, No. 651, sponsored by Senator Bledsoe and Representative Johnson, mandated the coprescription of an opioid antagonist to a patient who does not have an existing prescription for an opioid antagonist when prescribing or dispensing an opioid if:

(1) The opioid dosage prescribed or dispensed is equal to or in excess of fifty morphine milligram equivalents (50 MME) per day;

(2) A benzodiazepine has been prescribed or dispensed for the patient in the past or will be prescribed or dispensed at the same time as the opioid; or

(3) The patient has a history of opioid use disorder or drug overdose; and

WHEREAS, a healthcare professional who coprescribes an opioid antagonist is required under Acts 2021, No. 651 to provide counseling and patient education to the patient, or a patient’s parent or guardian if the patient is under eighteen (18) years of age, as provided in guidance or rules of the appropriate licensing entity; and

WHEREAS, Acts 2021, No. 651 required, no later than six (6) months after the effective date of the act, the Arkansas State Medical Board and the Arkansas State Board of Pharmacy to jointly develop and publish guidance or rules that address the circumstances in which a healthcare professional is required to prescribe or dispense, or both, an opioid antagonist to a patient when prescribing or dispensing an opioid; and

WHEREAS, Acts 2021, No. 651 did not contain an emergency clause or effective date clause; and
WHEREAS, in 2017, Arkansas ranked second among the states for the quantity of opioids prescribed, with one hundred five and four-tenths (105.4) opioid prescriptions for every one hundred (100) persons; and

WHEREAS, the number of drug overdose deaths in Arkansas, a majority of which are due to the misuse of prescription drugs, has more than doubled since 1999 when the rate was four and four-tenths (4.4) per one hundred thousand (100,000) people; and

WHEREAS, in 2017, four hundred and forty-six (446) deaths occurred in Arkansas as a result of all types of drug overdoses; and

WHEREAS, the General Assembly has a duty to ensure the safety of the citizens of this state, promote responsible prescribing and dispensing of prescription drugs, and help those struggling to overcome prescription drug addictions,

NOW THEREFORE,

BE IT PROPOSED BY THE HOUSE COMMITTEE ON PUBLIC HEALTH, WELFARE, AND LABOR OF THE NINETY-THIRD GENERAL ASSEMBLY:

THAT the House Committee on Public Health, Welfare, and Labor of the Ninety-Third General Assembly study the effect and impact of Acts 2021, No. 651 which mandates the coprescription of an opioid antagonist under certain circumstances, including without limitation:

(1) The guidance or rules adopted by the Arkansas State Medical Board, the Arkansas State Board of Pharmacy, and any relevant licensing board;

(2) The numbers of opioid prescriptions prescribed and dispensed;

(3) The number of opioid overdoses in Arkansas; and

(4) Any other effects or impacts related to Acts 2021, No. 651.

BE IT FURTHER PROPOSED THAT, upon request, the Department of Health, the Arkansas State Medical Board, the Arkansas State Board of Pharmacy, and any relevant licensing board may assist the House Committee on Public Health,
Welfare, and Labor to study the effect and impact of Acts 2021, No. 651 which mandates the coprescription of an opioid antagonist under certain circumstances.

Respectfully submitted,

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