Legislative Analysis



STANDING ORDER FOR OPIOID ANTAGONIST; APPROPRIATION FOR MAPS

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House Bill 5326 (proposed substitute H-2)

Analysis available at http://www.legislature.mi.gov

Sponsor: Rep. Anthony G. Forlini

Committee: Health Policy Complete to 4-25-16

SUMMARY:

House Bill 5326 would amend the Public Health Code to allow the state's chief medical executive to issue a standing order that does not identify a particular patient for the purpose of allowing a pharmacist to dispense an opioid antagonist, and also to allow a pharmacist to act upon that order and dispense an opioid antagonist to be used to treat a person for a drug overdose. It also includes an appropriation for fiscal year 2015-2016 of \$2.47 million from the General Fund to the Department of Licensing and Regulatory Affairs (LARA) to modernize the Michigan Automated Prescription System (MAPS).

Standing order for opioid antagonist

In addition to typical prescriptions, ordered for a specific patient, this bill would expand the definition to include a standing order by the state's chief medical executive for the purpose of a pharmacist dispensing an opioid antagonist to an individual suffering from a drug overdose.

The chief medical executive who issues the standing order and the pharmacist who dispenses the opioid antagonist will <u>not be liable</u> in a civil action for a properly stored and dispensed opioid antagonist that was the proximate cause of injury or death to an individual due to the administration of or failure to administer the opioid antagonist. Finally, the bill requires the Department of Health and Human Services to promulgate rules to implement this section.

Chief medical executive: Section 2202 of the Code provides that if the director of the Department of Health and Human Services appointed by the governor is not a physician, the director must appoint a physician to serve as chief medical executive, and be responsible to the director for the medical content of policy and programs. (Sec. 2202 actually refers to the director of the Department of Public Health, but that department is now part of the new DHHS.)

Opioid antagonist: Section 1106 of the Code defines this as naloxone hydrochloride or any other similarly acting and equally safe drug approved by the federal food and drug administration for the treatment of drug overdose.

Appropriation for MAPS

The MAPS system monitors schedule 2, 3, 4, and 5 controlled substances dispensed by veterinarians, pharmacists, and dispensing prescribers, or dispensed by a pharmacy

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licensed in Michigan. According to testimony, the appropriation would allow LARA to make the MAPS system web-based, which would help to detect suspicious activity. For instance, data will be clustered to see if there are numerous prescriptions to the same person. Additionally, the system will send an auto-alert if a person may be doctor- or pharmacy-shopping, based on the amount of controlled substances he or she is being prescribed.

MCL 333.7333a, 333.7422, 333.17708, 333.17757 and proposed 333.17744e

FISCAL IMPACT:

House Bill 5326, as substituted, would likely have a neutral fiscal impact on the state's General Fund given that both the House and Senate Appropriation Committees have included the \$2.5 million GF/GP for the modernization of the MAPS within the LARA budget for FY 2016-17, which this bill would appropriate for FY 2015-16 with the understanding that the appropriation will be removed from the FY 2016-17 budget if this bill in enacted. Consequently, the only fiscal impact would be shifting the General Fund expenditure into FY 2015-16 from FY 2016-17.

Legislative Analyst: Jennifer McInerney Fiscal Analyst: Paul B.A. Holland

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