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Senate Bill 401 (as introduced 6-11-25)

Sponsor: Senator Sylvia Santana

Committee: Health Policy

Date Completed: 6-17-25

CONTENT

The bill would amend Part 177 (Pharmacy Practice and Drug Control) of the Public Health Code to require a prescriber who issued a prescription to a patient for an opioid to also issue the patient a prescription for an opioid antagonist. The bill would allow a dispensing prescriber or pharmacist to dispense the opioid antagonist to the patient.

"Opioid antagonist" means 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.

MCL 333.17744b Legislative Analyst: Alex Krabill

FISCAL IMPACT

The bill could have an uncertain but potentially significant fiscal impact on the State and local units of government. The bill would require that any prescriber issuing an opioid prescription to a patient also would have to prescribe an opioid antagonist. This requirement would likely lead to an increase in filled prescriptions for opioid antagonists. The resulting additional prescription costs would affect the State's Medicaid program through fee-for-service payments and increases to Medicaid health plan managed care rates, as well as the State's employee and retiree healthcare expenses. Local government units would experience cost increases through public employee and retiree healthcare programs as well as through local jail/correctional health care costs. Data on the exact number of opioid prescriptions filled through State-responsible entities is currently pending.

Fiscal Analysts: Ellyn Ackerman

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This analysis was prepared by nonpartisan Senate staff for use by the Senate in its deliberations and does not constitute an official statement of legislative intent.