**BILL ANALYSIS**

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| Senate Research Center | H.B. 1710 |
| 86R11009 JSC-D | By: Ramos (Menéndez) |
|  | Health & Human Services |
|  | 4/22/2019 |
|  | Engrossed |

**AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

Texans are concerned about the rising threat of the so-called "opioid epidemic" on the State of Texas. The Texas attorney general found it necessary to establish a public awareness campaign to protect individuals from opioid addiction by educating about the dangers of misusing prescription painkillers via a website ("Dose of Reality"). Further steps can be taken to ensure individuals are made aware of the dangers of opioid addiction and overdose at the point of prescription directly from the doctor.

Requiring physicians to deliver a disclaimer upon the prescription of an opioid to address the severity of the risks associated with the drug is an important step in ensuring every patient and parent of a minor patient is prepared to avoid opioid addiction.

H.B. 1710 does not require physicians to offer alternative treatments to the prescription, but it opens the door for the patient to understand the potential consequences of the prescription and to exercise their right as a patient to ask for information about alternative treatments.

This bill states that prior to issuing the initial prescription of a Schedule II controlled dangerous substance or any other opioid drug which is a prescription drug, a practitioner shall discuss with the patient or the patient's parent or guardian if the patient is under 18 years of age the risks of addiction and overdose associated with opioid drugs. The practitioner shall include a note in the patient's medical record that the patient or the patient' parent or guardian, as applicable, has discussed with the practitioner the risks of developing physical or psychological dependence.

Brief Summary

H.B. 1710 will:

Require practitioners to discuss the risks of addiction, the risk of overdose, and the risk of mixing with alcohol and other drugs upon the prescription of a Schedule II controlled substance or opioid. A note shall be made in the patient's file once the conversation is completed.

That disclosure is to be given to the parent or guardian if the patient is under 18 years of age.

H.B. 1710 amends current law relating to discussing with a patient the risks of certain controlled substance prescriptions.

**RULEMAKING AUTHORITY**

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

**SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Section 481.0764, Health and Safety Code, by adding Subsections (f) and (g), as follows:

(f) Requires a prescriber, other than a veterinarian, on issuance of the initial prescription for a Schedule II controlled substance or an opioid, to discuss with the patient and, if the patient is a minor, the patient's parent, conservator, or guardian, or other person authorized to consent to the minor's medical treatment:

(1) the risk of addiction associated with the drug prescribed, including any risk of developing a physical or psychological dependence on the drug;

(2) the risk of overdose associated with the drug prescribed; and

(3) the danger of taking the drug with benzodiazepines, alcohol, or other central nervous system depressants.

(g) Requires a prescriber who discusses the risks of a controlled substance prescription under Subsection (f) to note the discussion in the patient's medical record.

SECTION 2. Makes application of this Act prospective.

SECTION 3. Effective date: September 1, 2019.