**BILL ANALYSIS**

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| Senate Research Center | H.B. 2576 |
| 86R23773 LHC-D | By: Johnson, Jarvis; Raymond (Miles) |
|  | Health & Human Services |
|  | 5/14/2019 |
|  | Engrossed |

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

According to the Mayo Clinic, periodic episodes of pain, called crises, are a major symptom of sickle cell disease (SCD). Pain develops when sickle-shaped red blood cells block blood flow through capillaries. The lack of blood flow to portions of the chest, abdomen, joints, and bones results in pain that ranges in severity from person to person.

The pain varies in intensity and can last for a few hours to a few weeks. Some people have only a few pain episodes. Others have a dozen or more crises a year. Per the Mayo Clinic, "if a crisis is severe enough, an individual might need to be hospitalized."

Currently, cancer patients or individuals on hospice care are not subject to requirements imposed through the Prescription Monitoring Program (PMP) that might otherwise bar those at high risk of developing Opioid Use Disorder from receiving opioids. The PMP flags frequent opioid users who are not diagnosed with cancer or are on hospice care. Those flags can then be interpreted by doctors or dispensaries as a reason to halt opioid prescriptions. These flags can hinder cancer and hospice care patients ability to manage pain with opioids. Per Section. 2576 of the Health and Safety Code, doctors are not required to check the PMP before prescribing or dispensing opioids to individuals on hospice care or who are diagnosed with cancer.

H.B. 2576 would provide the same protections to individuals who are diagnosed with SCD, helping them to access opioids in order to combat crises with greater ease.

H.B. 2576 amends current law relating to prescribing and dispensing certain controlled substances to patients diagnosed with sickle cell disease.

**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 Sections 481.0765(a) and (b), Health and Safety Code, as follows:

(a) Provides that a prescriber is not subject to the requirements of Section 481.0764(a) if:

(1) the patient has been diagnosed with cancer or sickle cell disease or the patient is receiving hospice care; and

(2) makes a conforming change.

(b) Makes a conforming change.

SECTION 2. Makes application of this Act prospective.

SECTION 3. Effective date: September 1, 2019.