

By: Sheffield, Zerwas, Price, Moody, Klick

H.B. No. 3285

Substitute the following for H.B. No. 3285:

By: Sheffield

C.S.H.B. No. 3285

A BILL TO BE ENTITLED

AN ACT

relating to programs and initiatives to prevent and respond to  
opioid addiction, misuse, abuse, and overdose and identify and  
treat co-occurring substance use disorders and mental illness.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Subchapter C, Chapter 61, Education Code, is  
amended by adding Section 61.08205 to read as follows:

Sec. 61.08205. RESEARCH ON SUBSTANCE USE DISORDERS AND  
ADDICTION. The board shall encourage health-related institutions,  
as defined by Section 62.161, as added by Chapter 448 (H.B. 7), Acts  
of the 84th Legislature, Regular Session, 2015, and the faculty of  
those institutions to individually or through collaborative effort  
conduct research, for public health purposes, regarding substance  
use disorders and addiction issues involving prescription drugs.

SECTION 2. Subchapter B, Chapter 531, Government Code, is  
amended by adding Section 531.02253 to read as follows:

Sec. 531.02253. TELEHEALTH TREATMENT FOR SUBSTANCE USE  
DISORDERS. The executive commissioner by rule shall establish a  
program to increase opportunities and expand access to telehealth  
treatment for substance use disorders in this state.

SECTION 3. Subchapter A, Chapter 772, Government Code, is  
amended by adding Section 772.0078 to read as follows:

Sec. 772.0078. OPIOID ANTAGONIST GRANT PROGRAM. (a) In  
this section:

1           (1) "Criminal justice division" means the criminal  
2 justice division established under Section 772.006.

3           (2) "Opioid antagonist" and "opioid-related drug  
4 overdose" have the meanings assigned by Section 483.101, Health and  
5 Safety Code.

6           (b) The criminal justice division shall establish and  
7 administer a grant program to provide financial assistance to a law  
8 enforcement agency in this state that seeks to provide opioid  
9 antagonists to peace officers, evidence technicians, and related  
10 personnel who, in the course of performing their duties, are likely  
11 to come into contact with opioids or encounter persons suffering  
12 from an apparent opioid-related drug overdose.

13           (c) A law enforcement agency may apply for a grant under  
14 this section only if the agency first adopts a policy addressing the  
15 usage of an opioid antagonist for a person suffering from an  
16 apparent opioid-related drug overdose.

17           (d) In an application for a grant under this section, the  
18 law enforcement agency shall provide information to the criminal  
19 justice division about the frequency and nature of:

20               (1) interactions between peace officers and persons  
21 suffering from an apparent opioid-related drug overdose;

22               (2) calls for assistance based on an apparent  
23 opioid-related drug overdose; and

24               (3) any exposure of peace officers, evidence  
25 technicians, or related personnel to opioids or suspected opioids  
26 in the course of performing their duties and any reactions by those  
27 persons to those substances.

1       (e) A law enforcement agency receiving a grant under this  
2 section shall, as soon as practicable after receiving the grant,  
3 provide to the criminal justice division proof of purchase of the  
4 opioid antagonists.

5       (f) The criminal justice division may use any money  
6 available for purposes of this section.

7       SECTION 4. Subtitle E, Title 2, Health and Safety Code, is  
8 amended by adding Chapter 109 to read as follows:

9       CHAPTER 109. STATEWIDE BEHAVIORAL HEALTH COORDINATING COUNCIL

10       Sec. 109.001. DEFINITION. In this chapter, "council" means  
11 the Statewide Behavioral Health Coordinating Council.

12       Sec. 109.002. STATEWIDE BEHAVIORAL HEALTH STRATEGIC PLAN.  
13 In preparing the statewide behavioral health strategic plan, the  
14 council shall incorporate, as a separate part of that plan,  
15 strategies regarding substance abuse issues that are developed by  
16 the council in cooperation with the Texas Medical Board and the  
17 Texas State Board of Pharmacy, including strategies for:

18               (1) addressing the challenges of existing prevention,  
19 intervention, and treatment programs;

20               (2) evaluating substance use disorder prevalence  
21 involving the abuse of opioids;

22               (3) identifying substance abuse treatment services  
23 availability and gaps; and

24               (4) collaborating with state agencies to expand  
25 substance abuse treatment services capacity in this state.

26       SECTION 5. Subchapter B, Chapter 461A, Health and Safety  
27 Code, is amended by adding Sections 461A.058 and 461A.059 to read as

1 follows:

2 Sec. 461A.058. OPIOID MISUSE PUBLIC AWARENESS CAMPAIGN.

3 (a) The executive commissioner by rule shall develop and the  
4 department shall implement a statewide public awareness campaign to  
5 deliver public service announcements that explain and clarify  
6 certain risks related to opioid misuse, including:

7 (1) the risk of overdose, addiction, respiratory  
8 depression, or over-sedation; and

9 (2) risks involved in mixing opioids with alcohol or  
10 other medications.

11 (b) This section and the statewide public awareness  
12 campaign developed under this section expire August 31, 2023.

13 Sec. 461A.059. OPIOID ANTAGONIST PROGRAM. (a) In this  
14 section, "opioid antagonist" has the meaning assigned by Section  
15 [483.101](#).

16 (b) From funds available for that purpose, the executive  
17 commissioner shall establish a program to provide opioid  
18 antagonists for the prevention of opioid overdoses in a manner  
19 determined by the executive commissioner to best accomplish that  
20 purpose.

21 (c) The executive commissioner may provide opioid  
22 antagonists under the program to emergency medical services  
23 personnel, first responders, public schools, community centers,  
24 and other persons likely to be in a position to respond to an opioid  
25 overdose.

26 (d) The commission may accept gifts, grants, and donations  
27 to be used in administering this section.

1       (e) The executive commissioner shall adopt rules as  
2 necessary to implement this section.

3       SECTION 6. Section 481.0764, Health and Safety Code, is  
4 amended by adding Subsection (f) to read as follows:

5       (f) A prescriber or dispenser whose practice includes the  
6 prescription or dispensation of opioids shall annually attend at  
7 least one hour of continuing education covering best practices,  
8 alternative treatment options, and multi-modal approaches to pain  
9 management that may include physical therapy, psychotherapy, and  
10 other treatments. The board shall adopt rules to establish the  
11 content of continuing education described by this subsection. The  
12 board may collaborate with private and public institutions of  
13 higher education and hospitals in establishing the content of the  
14 continuing education. This subsection expires August 31, 2023.

15       SECTION 7. Chapter 1001, Health and Safety Code, is amended  
16 by adding Subchapter K to read as follows:

17       SUBCHAPTER K. DATA COLLECTION AND ANALYSIS REGARDING OPIOID  
18 OVERDOSE DEATHS AND CO-OCCURRING SUBSTANCE USE DISORDERS

19       Sec. 1001.261. DATA COLLECTION AND ANALYSIS REGARDING  
20 OPIOID OVERDOSE DEATHS AND CO-OCCURRING SUBSTANCE USE DISORDERS.

21       (a) The executive commissioner shall ensure that data is collected  
22 by the department regarding opioid overdose deaths and the  
23 co-occurrence of substance use disorders and mental illness. The  
24 department may use data collected by the vital statistics unit and  
25 any other source available to the department.

26       (b) In analyzing data collected under this section, the  
27 department shall evaluate the capacity in this state for the

treatment of co-occurring substance use disorders and mental illness.

SECTION 8. Subchapter B, Chapter 32, Human Resources Code, is amended by adding Section 32.03115 to read as follows:

Sec. 32.03115. REIMBURSEMENT FOR MEDICATION-ASSISTED TREATMENT FOR OPIOID OR SUBSTANCE USE DISORDER. (a) In this section, "medication-assisted opioid or substance use disorder treatment" means the use of methadone, buprenorphine, oral buprenorphine/naloxone, or naltrexone to treat opioid or substance use disorder.

(b) Notwithstanding Sections 531.072 and 531.073, Government Code, or any other law and subject to Subsections (c) and (d), the commission shall provide medical assistance reimbursement for medication-assisted opioid or substance use disorder treatment without requiring a recipient of medical assistance or health care provider to obtain prior authorization or precertification for the treatment.

(c) The duty to provide medical assistance reimbursement for medication-assisted opioid or substance use disorder treatment under Subsection (b) does not apply with respect to:

(1) a prescription for methadone;  
(2) a recipient for whom medication-assisted opioid or substance use disorder treatment is determined to be medically contraindicated by the recipient's physician; or

(3) a recipient who is subject to an age-related restriction applicable to medication-assisted opioid or substance abuse disorder treatment.

1        (d) The commission may provide medical assistance  
2 reimbursement for medication-assisted opioid or substance use  
3 disorder treatment only if the treatment is prescribed to a  
4 recipient of medical assistance by a licensed health care provider  
5 who is authorized to prescribe methadone, buprenorphine, oral  
6 buprenorphine/naloxone, or naltrexone.

7        (e) This section expires August 31, 2023.

8        SECTION 9. Section 168.002, Occupations Code, is amended to  
9 read as follows:

10        Sec. 168.002. EXEMPTIONS. This chapter does not apply to:

11                (1) a medical or dental school or an outpatient clinic  
12 associated with a medical or dental school;

13                (2) a hospital, including any outpatient facility or  
14 clinic of a hospital;

15                (3) a hospice established under 40 T.A.C. Section  
16 97.403 or defined by 42 C.F.R. Section 418.3;

17                (4) a facility maintained or operated by this state;

18                (5) a clinic maintained or operated by the United  
19 States;

20                (6) a health organization certified by the board under  
21 Section 162.001; or

22                (7) a clinic owned or operated by a physician who  
23 treats patients within the physician's area of specialty and who  
24 personally uses other forms of treatment, including surgery, with  
25 the issuance of a prescription for a majority of the patients[~~, or~~

26                [~~(8) a clinic owned or operated by an advanced~~  
27 ~~practice nurse licensed in this state who treats patients in the~~

1 ~~nurse's area of specialty and who personally uses other forms of~~  
2 ~~treatment with the issuance of a prescription for a majority of the~~  
3 ~~patients].~~

4 SECTION 10. Subchapter A, Chapter 554, Occupations Code, is  
5 amended by adding Section 554.018 to read as follows:

6 Sec. 554.018. COMPREHENSIVE SUBSTANCE USE DISORDER  
7 APPROACH. The board shall encourage pharmacists to participate in  
8 a program that provides a comprehensive approach to the delivery of  
9 early intervention and treatment services for persons with  
10 substance use disorders and persons who are at risk of developing  
11 substance use disorders, such as a program promoted by the  
12 Substance Abuse and Mental Health Services Administration within  
13 the United States Department of Health and Human Services.

14 SECTION 11. Not later than December 1, 2019, the executive  
15 commissioner of the Health and Human Services Commission shall:

16 (1) develop the opioid misuse public awareness  
17 campaign required by Section 461A.058, Health and Safety Code, as  
18 added by this Act; and

19 (2) establish the opioid antagonist program required  
20 by Section 461A.059, Health and Safety Code, as added by this Act.

21 SECTION 12. If before implementing any provision of this  
22 Act a state agency determines that a waiver or authorization from a  
23 federal agency is necessary for implementation of that provision,  
24 the agency affected by the provision shall request the waiver or  
25 authorization and may delay implementing that provision until the  
26 waiver or authorization is granted.

27 SECTION 13. This Act takes effect September 1, 2019.