

**House Bill 3285**  
Senate Amendments  
Section-by-Section Analysis

HOUSE VERSION

No equivalent provision.

SENATE VERSION (IE)

CONFERENCE

SECTION \_\_. Subchapter Z, Chapter 51, Education Code, is amended by adding Section 51.9362 to read as follows:

Sec. 51.9362. OVERDOSE AWARENESS TRAINING FOR RESIDENTIAL ADVISORS AND STUDENT ORGANIZATION OFFICERS. (a) In this section:

(1) "Public or private institution of higher education" includes an "institution of higher education" and a "private or independent institution of higher education," as those terms are defined by Section 61.003.

(2) "Residential advisor" means a student who is employed by a public or private institution of higher education to serve in an advisory capacity for students living in a residential facility.

(3) "Residential facility" means a residence used exclusively for housing or boarding students or faculty of a public or private institution of higher education.

(4) "Student organization" includes any organization that is composed mostly of students enrolled at a public or private institution of higher education and that:

(A) is registered with the institution;

(B) receives student organization resource fee revenues or other funding from the institution; or

(C) is otherwise recognized as a student organization by the institution.

(b) A public or private institution of higher education that imposes any mandatory training requirements on residential advisors or officers of student organizations must ensure that overdose awareness and appropriate response training is included with that training. [FA2]

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No equivalent provision.

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:

SENATE VERSION (IE)

SECTION \_\_.Section 51.9362, Education Code, as added by this Act applies beginning with training required for the 2019-2020 academic year. [FA2]

SECTION 1. Same as House version.

SECTION 2. Same as House version.

SECTION 3. Same as House version.

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

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

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

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

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

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

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

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

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

(e) A law enforcement agency receiving a grant under this section shall, as soon as practicable after receiving the grant,

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provide to the criminal justice division proof of purchase of the opioid antagonists.

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

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

CHAPTER 109. STATEWIDE BEHAVIORAL HEALTH COORDINATING COUNCIL

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

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

- (1) addressing the challenges of existing prevention, intervention, and treatment programs;
- (2) evaluating substance use disorder prevalence involving the abuse of opioids;
- (3) identifying substance abuse treatment services availability and gaps; and
- (4) collaborating with state agencies to expand substance abuse treatment services capacity in this state.

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SECTION 4. Same as House version.

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

Sec. 461A.058. OPIOID MISUSE PUBLIC AWARENESS CAMPAIGN. (a) The executive commissioner by rule shall develop and the department shall implement a statewide public awareness campaign to deliver public service announcements that explain and clarify certain risks related to opioid misuse, including:

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

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

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

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

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

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

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

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

Sec. 461A.058. OPIOID MISUSE PUBLIC AWARENESS CAMPAIGN. (a) The executive commissioner by rule shall develop and the department shall operate a statewide public awareness campaign to deliver public service announcements that explain and clarify certain risks related to opioid misuse, including: [FA1(1)]

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

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

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

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

(b) From funds available for that purpose, the executive commissioner shall operate a program to provide opioid antagonists for the prevention of opioid overdoses in a manner determined by the executive commissioner to best accomplish that purpose. [FA1(2)]

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

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

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

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

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

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

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

Sec. 1001.261. DATA COLLECTION AND ANALYSIS REGARDING OPIOID OVERDOSE DEATHS AND CO-OCCURRING SUBSTANCE USE DISORDERS. (a) The executive commissioner shall ensure that data is collected by the department regarding opioid overdose deaths and the co-occurrence of substance use disorders and mental illness.

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

SECTION 6. Same as House version.

SECTION 7. Same as House version.

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The department may use data collected by the vital statistics unit and any other source available to the department.

(b) In analyzing data collected under this section, the 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;

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SECTION 8. Same as House version.

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- (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.
- (d) The commission may provide medical assistance reimbursement for medication-assisted opioid or substance use disorder treatment only if the treatment is prescribed to a recipient of medical assistance by a licensed health care provider who is authorized to prescribe methadone, buprenorphine, oral buprenorphine/naloxone, or naltrexone.
- (e) This section expires August 31, 2023.

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

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

- (1) a medical or dental school or an outpatient clinic associated with a medical or dental school;
- (2) a hospital, including any outpatient facility or clinic of a hospital;
- (3) a hospice established under 40 T.A.C. Section 97.403 or defined by 42 C.F.R. Section 418.3;
- (4) a facility maintained or operated by this state;
- (5) a clinic maintained or operated by the United States;
- (6) a health organization certified by the board under Section 162.001; or
- (7) a clinic owned or operated by a physician who treats patients within the physician's area of specialty and who personally uses other forms of treatment, including surgery,

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with the issuance of a prescription for a majority of the patients]; ~~or~~  
~~[(8) a clinic owned or operated by an advanced practice nurse licensed in this state who treats patients in the nurse's area of specialty and who personally uses other forms of treatment with the issuance of a prescription for a majority of the patients].~~

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

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

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

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

SENATE VERSION (IE)

SECTION 10. Same as House version.

SECTION 11. (a) Not later than December 1, 2019, the executive commissioner of the Health and Human Services Commission shall: [FA1(3)]

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

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

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

No equivalent provision.

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

(b) Notwithstanding Subsection (a) of this section, if an opioid misuse public awareness campaign described by Section 461.058, Health and Safety Code, as added by this Act, is already in operation as of the effective date of this Act, the Health and Human Services Commission and the Department of State Health Services may continue to operate that public awareness campaign to satisfy the requirements of that section.

(c) Notwithstanding Subsection (a) of this section, if an opioid antagonist program described by Section 461A.059, Health and Safety Code, as added by this Act, is already in operation as of the effective date of this Act, the Health and Human Services Commission may continue to operate that program to satisfy the requirements of that section. [FA1(4)]

SECTION 12. Same as House version.

SECTION \_\_. A state agency is required to implement a provision of this Act only if the legislature appropriates money specifically for that purpose. If the legislature does not appropriate money specifically for that purpose, the state agency may, but is not required to, implement a provision of

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CONFERENCE

this Act using other appropriations available for that purpose.  
[FA1(5)]

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

SECTION 13. Same as House version.