

By: Menéndez

S.B. No. 2448

A BILL TO BE ENTITLED

AN ACT

relating to the use of funds appropriated by the Department of State Health Services to deliver low-dose, at-home racemic ketamine via telehealth to improve healthcare access and mental health outcomes across rural and high-risk populations.

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

SECTION 1. Section 1001.203, Health and Safety Code is amended by adding Section 1001.2032 to read as follows:

(1) The purpose of this Act is to provide for expanded healthcare access, reduced care costs, improved mental health, reduced chronic pain, increased workforce productivity, improved trauma management for first responders and active military, and improved health rankings for rural and high-risk populations across Texas by authorizing the Department of State Health Services to fund low-dose, at-home ketamine using medical technology in the form of targeted intranasal delivery that can optimize the effectiveness of and reduce the potential side effects related to racemic ketamine treatments.

(2) The Department of State Health Services shall direct funding to treat rural health population, first responders, veterans, and active military with a clinical diagnosis of depression, post-traumatic stress disorder, anxiety, and chronic pain. The Department of State Health Services shall allocate a total of \$55,000,000 for the purpose of providing funding during

1 the state fiscal years ending August 31, 2024 and August 31, 2025
2 for the treatment of at least 15,000 adults that are designated as
3 living in a rural area of Texas, at least 8,000 first responders,
4 and at least 6,000 veterans or active military.

5 (3) The Department of State Health Services shall transfer
6 the appropriations through contracts with low-dose, at-home
7 racemic ketamine service providers that utilize targeted
8 intranasal drug delivery. When treating mental health and
9 neurological conditions, which requires the delivery of
10 pharmaceutical agents to the brain, it is well understood that
11 using oral administration is the least efficient and problematic
12 route and intravenous or intramuscular administration prohibits
13 at-home, self-administration, which is required to maximize access
14 to care. The most optimized route of administration is intranasal,
15 where certain regions of the nasal anatomy provide optimized
16 pathways for drug delivery that can eliminate side effects that can
17 reduce treatment compliance and maximize potential health
18 outcomes. The treatment protocol shall not exceed 30 to 60
19 milligrams of racemic ketamine per individual treatment and shall
20 not exceed a total of 180 to 360 milligrams of racemic ketamine for
21 the entire treatment program, as this sub-anesthetic and low-dose
22 treatment protocol will minimize the potential for side-effects.

23 SECTION 2. This Act takes effect immediately if it receives
24 a vote of two-thirds of all the members elected to each house, as
25 provided by Section 39, Article III, Texas Constitution, and shall
26 expire September 1, 2025.

27 SECTION 3: The Department of State Health Services required

1 to implement this Act only if the legislature appropriates money
2 specifically for the purpose stated in SECTION 1 of this Act. If the
3 legislature does not appropriate money specifically for that
4 purpose, the Department of State Health Services may, but is not
5 required to, implement this Act using other appropriations
6 available for the purpose.

7 SECTION 4. This Act takes effect September 1, 2023.