Ohio Legislative Service Commission

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Fiscal Note & Local Impact Statement

Bill: H.B. 332 of the 130th G.A. **Date**: November 12, 2013

Status: As Introduced **Sponsor**: Reps. Wachtmann and Antonio

Local Impact Statement Procedure Required: No

Contents: Establishes standards and procedures for opioid treatment and requires professional disciplinary action to be taken for failing to comply with those standards and procedures

State Fiscal Highlights

- The Dental Board, the Board of Nursing, the Medical Board, and the Board of Optometry may experience an increase in costs related to investigations and disciplinary action for licensees who violate the provisions of the bill.
- The state may realize an increase in costs to the Medicaid Program if patients enrolled in the program are referred to pain medicine specialists for additional evaluation or if Medicaid patients are given random drug tests during opioid treatment.

Local Fiscal Highlights

- Public hospitals may experience an increase in costs related to the pain medicine specialist referral requirement, monitoring of treatment, reevaluation of the patient and re-referrals if the patient requests higher opioid dosing, random drug testing, obtaining informed consent, as well as the required opioid agreement to be signed by the patient.

Detailed Fiscal Analysis

The bill establishes standards and procedures for licensed prescribers related to opioid treatment of patients less than 50 years of age with chronic, intractable pain resulting from conditions other than cancer. Prior to considering opioid treatment, prescribers must refer patients to a pain medicine specialist to evaluate the patient for possible treatment options other than opioid treatment. If opioid treatment is necessary, prescribers must monitor the treatment by (1) documenting the diagnosis and the evaluation for the diagnosis, (2) obtaining the patient's informed consent, including an opioid agreement to be signed by the patient, (3) assessing the patient's pain and functional levels before initiating treatment and routinely during treatment,

(4) evaluating the patient's risk of addiction before initiating treatment, and (5) documenting each treatment plan, changes in treatment, and the patient's compliance with the treatment plan.

Additionally, prescribers must regularly obtain information about the patient from the Ohio Automated Rx Reporting System to identify any misuse of opioids or other drugs and must conduct random drug testing of the patient. Prescribers are required to reevaluate the patient and make another referral to a pain medicine specialist when a patient requests a higher opioid dose. Finally, prescribers must consult with an addiction or substance abuse specialist if there is reason to believe the patient is suffering from addiction.

Potential fiscal impact for the state

The State Dental Board, the Board of Nursing, the Board of Optometry, and the Medical Board are each required to take disciplinary action for licensees who violate the provisions of the bill. These boards may realize an increase in costs related to investigations and disciplinary action for licensed prescribers who do not comply. The state may realize an increase in costs to the Medicaid Program if patients enrolled in the program are referred to pain medicine specialists for additional evaluation or are given random drug tests during opioid treatment.

Potential fiscal impact for public hospitals

Public hospitals may experience an increase in costs related to the pain medicine specialist referral requirement, monitoring of treatment, reevaluation of the patient and re-referrals if the patient requests higher opioid dosing, random drug testing, obtaining informed consent, as well as the required opioid agreement to be signed by the patient.

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