

## HB0090S01 compared with HB0090

~~{deleted text}~~ shows text that was in HB0090 but was deleted in HB0090S01.

Inserted text shows text that was not in HB0090 but was inserted into HB0090S01.

**DISCLAIMER:** This document is provided to assist you in your comparison of the two bills. Sometimes this automated comparison will NOT be completely accurate. Therefore, you need to read the actual bills. This automatically generated document could contain inaccuracies caused by: limitations of the compare program; bad input data; or other causes.

Representative Raymond P. Ward proposes the following substitute bill:

### INSURANCE OPIOID REGULATION

2017 GENERAL SESSION

STATE OF UTAH

**Chief Sponsor: Raymond P. Ward**

Senate Sponsor: \_\_\_\_\_

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#### LONG TITLE

##### General Description:

This bill requires commercial insurers, the state Medicaid program, workers' compensation insurers, and public employee insurers to implement policies to minimize the risk of prescribing certain controlled substances.

##### Highlighted Provisions:

This bill:

- ▶ defines terms;
- ▶ requires a health insurance policy, a health plan offered to state employees, the Medicaid program, and workers' compensation insurance to establish policies ~~{for prescribing certain controlled substances}~~ to minimize the risk of opioid addiction and overdose;
- ▶ applies to insurance plans entered into or renewed on or after July 1, 2017;

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- ▶ requires a report to the Health and Human Services Interim Committee; and
- ▶ sunsets the requirement for prescribing policies on July 1, 2022.

### Money Appropriated in this Bill:

None

### Other Special Clauses:

None

### Utah Code Sections Affected:

AMENDS:

**63I-1-231**, as last amended by Laws of Utah 2015, Chapter 50

ENACTS:

**26-18-21**, Utah Code Annotated 1953

**31A-22-615**, Utah Code Annotated 1953

**34A-2-424**, Utah Code Annotated 1953

**49-20-414**, Utah Code Annotated 1953

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*Be it enacted by the Legislature of the state of Utah:*

Section 1. Section **26-18-21** is enacted to read:

**26-18-21. Prescribing policies for opioid prescriptions.**

(1) The department shall implement a prescribing policy for certain opioid prescriptions that is substantially similar to the prescribing policies required in Section 31A-22-615.

(2) The department may amend the state program and apply for waivers for the state program, if necessary, to implement Subsection (1).

Section 2. Section **31A-22-615** is enacted to read:

**31A-22-615. Insurance coverage for opioids -- Policies -- Reports.**

(1) For purposes of this section:

(a) "Health care provider" means an individual, other than a veterinarian, who:

(i) is licensed to prescribe a controlled substance under Title 58, Chapter 37, Utah Controlled Substances Act; and

(ii) possesses the authority, in accordance with the individual's scope of practice, to prescribe Schedule II controlled substances and Schedule III controlled substances that are

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applicable to opioids and benzodiazapines.

(b) "Health insurer" means:

(i) an insurer who offers health care insurance as that term is defined in Section 31A-1-301;

(ii) health benefits offered to state employees under Section 49-20-202; and

(iii) a workers' compensation insurer:

(A) authorized to provide workers' compensation insurance in the state; or

(B) that is a self-insured employer as defined in Section 34A-2-201.

(c) "Opioid" has the same meaning as "opiate," as that term is defined in Section 58-37-2.

(d) "Prescribing policy" means a policy developed by a health insurer that includes evidence based guidelines for prescribing opioids, and may include the 2016 Center for Disease Control Guidelines for Prescribing Opioids for Chronic Pain, or the ~~{2016}~~ Utah ~~{Opioid}~~ Clinical Guidelines on Prescribing ~~{Guidelines}~~ Opioids for the treatment of pain.

(2) A health insurer that provides prescription drug coverage shall enact a ~~{prescribing}~~ policy to minimize the risk of opioid addiction and overdose from:

(a) ~~chronic~~ co-prescription of opioids with benzodiazapines and other sedating substances;

(b) prescription of very high dose opioids in the primary care setting; and

(c) the inadvertent transition of short-term opioids for an acute injury into long-term opioid dependence.

~~(3)~~ A health insurer who chooses to comply with Subsection (2) by implementing a prior authorization process shall include an appeals process for the prior authorization.

~~(3)~~4) A health insurer that provides prescription drug coverage shall enact policies to facilitate:

(a) non-narcotic treatment alternatives for patients who have chronic pain; and

(b) medication-assisted treatment for patients who have opioid dependence disorder.

~~(4)~~5) The requirements of this section apply to insurance plans entered into or renewed on or after July 1, 2017.

~~(5)~~6) A health insurer subject to this section shall on or before October 1, 2018, and before each October 1 thereafter, submit a report to the Health and Human Services Interim

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Committee regarding:

(a) the health insurer's opioid policies as described in Subsections (2) and (3); and

(b) the health insurer's analysis of whether the prescribing policy has been effective in reducing the risk of opioid addictions and overdoses.

~~(5)~~ (7) This section sunsets in accordance with Section 63I-1-231.

Section 3. Section **34A-2-424** is enacted to read:

**34A-2-424. Prescribing policies for certain opioid prescriptions.**

(1) This section applies to a person regulated by this chapter or Chapter 3, Utah

Occupational Disease Act.

(2) A self-insured employer, as that term is defined in Section 34A-2-201.5, an insurance carrier, and a managed health care program under Section 34A-2-111 shall implement a prescribing policy for certain opioid prescriptions in accordance with Section 31A-22-615.

Section 4. Section **49-20-414** is enacted to read:

**49-20-414. Prescribing policies for certain opioid prescriptions.**

A plan offered to state employees under this chapter shall implement a prescribing policy for certain opioid prescriptions in accordance with Section 31A-22-615.

Section 5. Section **63I-1-231** is amended to read:

**63I-1-231. Repeal dates, Title 31A.**

(1) Section 31A-2-217, Coordination with other states, is repealed July 1, 2023.

(2) Section 31A-22-615 is repealed July 1, 2022.

~~[(2)]~~ (3) Section 31A-22-619.6, Coordination of benefits with workers' compensation claim--Health insurer's duty to pay, is repealed on July 1, 2018.

~~[(3) Title 31A, Chapter 29, Comprehensive Health Insurance Pool Act, is repealed July 1, 2015.]~~

(4) Section 31A-22-642, Insurance coverage for autism spectrum disorder, is repealed on January 1, 2019.

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**Legislative Review Note**

**Office of Legislative Research and General Counsel**