Executive Summary: Health Impact Review of SB 6150

Concerning Opioid Use Disorder Treatment, Prevention, and Related Services (2017-2018 Legislative Session)

Evidence indicates that <u>SB 6150</u> has the potential to decrease health complications and deaths from opioid use and decrease health disparities by race/ethnicity.

BILL INFORMATION

Sponsors: Cleveland, Rivers, Carlyle, Kuderer, Fain, Hasegawa, Mullet, Saldaña, Conway, Van De Wege, Chase, Keiser, Liias

By Request: Governor Inslee

Companion Bill: <u>HB 2489</u>

Summary of Bill:

Full details about the provisions of this bill can be found in the bill text linked above. Given the length of the bill and the large number of provisions, the summary below only highlights particularly relevant sections.

- Eliminates barriers and promotes access to evidence-based opioid use disorder treatment services and opioid overdose reversal medication such as naloxone.
- Promotes coordination of services and strengthens partnerships between opioid use disorder treatment providers, the recovery support system, and their allied community partners.
- Establishes a mechanism for the Secretary of Health, or their designee, to issue a standing order for prescribing opioid overdose reversal medications such as naloxone to any person at risk of experiencing or witnessing an overdose.
- Expands the use of Washington State's Prescription Drug Monitoring Program (PDMP) by requiring electronic health record (EHR) vendors to ensure their federal certified systems can integrate with PDMP data.

HEALTH IMPACT REVIEW

Summary of Findings:

This Health Impact Review found the following evidence regarding the provisions in SB 6150:

- Strong evidence that promoting access to and use of opioid overdose reversal medication will likely result in opioid overdose reversal medication being more frequently distributed and administered.
- Very strong evidence that increasing distribution and administration of opioid overdose reversal medication will likely decrease health complications and deaths from opioid use.
- Very strong evidence that promoting access to medication-assisted therapies for opioid dependence will likely decrease health complications and deaths from opioid use.
- Strong evidence that expanding the use of the state PDMP will likely improve clinical decisionmaking and reduce "doctor shopping" and diversion of prescription opioids.
- Strong evidence that improving clinical decision-making and reducing "doctor shopping" and diversion of prescription opioids will likely decrease health complications and deaths from opioid use.
- Strong evidence that decreasing health complications and deaths from opioid use will likely decrease health disparities.

FULL REVIEW

For review methods, logic model, strength-of-evidence analyses, and citations of empirical evidence refer to the full Health Impact Review:

http://sboh.wa.gov/Portals/7/Doc/HealthImpactReviews/HIR-2018-06-SB6150.pdf

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