



Ohio Legislative Service Commission

Synopsis of Senate Committee Amendments*

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Sub. H.B. 4

131st General Assembly
(S. Health & Human Services)

Naloxone

Removes the following House-passed provisions regarding the protocols that a pharmacist or pharmacy intern must follow to be authorized under the bill to dispense naloxone without a prescription to a person at risk of an opioid-related overdose or to another person in a position to assist that person:

--Procedures for the establishment of a protocol by a physician;

--Procedures for the establishment of protocol by a board of health; and

--A requirement that the Ohio Department of Health develop a model protocol that sets minimum standards for a protocol established by a board of health.

In place of the removed provisions, adds provisions that:

--Authorize a physician to permit pharmacists and pharmacy interns, or a board of health to permit pharmacists and pharmacy interns working in the board's jurisdiction, to use a State Board of Pharmacy protocol to dispense naloxone without a prescription; and

--Require the Pharmacy Board, after consulting with the State Medical Board and Ohio Department of Health, to adopt rules to implement the bill's provisions on dispensing naloxone, including rules specifying a protocol under which pharmacists and pharmacy interns may dispense naloxone without a prescription.

Adds a provision clarifying that a wholesale distributor of dangerous drugs does not need proof of terminal distributor of dangerous drugs licensure from a law enforcement agency or its peace officers before selling naloxone to them.

* This synopsis does not address amendments that may have been adopted on the House Floor.

Adds a provision specifying, for purposes of law governing when naloxone is prescribed or dispensed to a person other than the ultimate user, that the existing law definition of "prescription" includes a written, electronic, or oral order for naloxone issued to and in the name of a family member, friend, or other individual in a position to assist an individual who there is reason to believe is at risk of experiencing an opioid-related overdose.

Opioid treatment programs

Adds the following provisions regarding opioid treatment programs in which buprenorphine (but not methadone) is personally furnished to patients:

--Specifies that a physician who personally furnishes buprenorphine to a patient participating in such an opioid treatment program may be excluded from current law limits on the amount of controlled substances the physician may personally furnish, but only if the program meets certain requirements, including (1) licensure as a terminal distributor of dangerous drugs, (2) certification from the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA), (3) accreditation from a national organization approved by SAMHSA, and (4) certification by the Ohio Department of Mental Health and Addiction Services (ODMHAS) of the service of personally furnishing buprenorphine.

--Requires the Pharmacy Board and ODMHAS to conduct annual on-site inspections of such opioid treatment programs.

Requires such opioid treatment programs to make their records available to ODMHAS staff during annual inspections.

Emergency clause

Adds a provision declaring the bill to be an emergency measure.