

SENATE BILL 221

54TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2019

INTRODUCED BY

William P. Soules

Pursuant to House Rule 24-1, this document incorporates amendments that have been adopted prior to consideration of this measure by the House. It is a tool to show the amendments in context and is not to be used for the purpose of amendments.

AN ACT

RELATING TO OPIOID OVERDOSE; REQUIRING HEALTH CARE PROVIDERS,  
UNDER CERTAIN CIRCUMSTANCES, TO SJC→~~GOUNSEL~~←SJC  
SJC→ADVISE←SJC PATIENTS ON THE RISKS OF OVERDOSE AND OPIOID  
OVERDOSE REVERSAL MEDICATION AND TO HHHC→OFFER←HHHC  
HHHC→CO-PRESCRIBE AN←HHHC SJC→NALOXONE←SJC SJC→OPIOID  
ANTAGONIST←SJC HHHC→PRESCRIPTIONS←HHHC.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

HHHC→SECTION 1. Section 24-2D-1 NMSA 1978 (being Laws  
1999, Chapter 126, Section 1) is amended to read:

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"24-2D-1. SHORT TITLE.--[This act] Chapter 24, Article 2D

NMSA 1978 may be cited as the "Pain Relief Act"."←HHHC

SECTION HHHC→1. 2.←HHHC Section 24-2D-2 NMSA 1978 (being Laws 1999, Chapter 126, Section 2, as amended) is amended to read:

"24-2D-2. DEFINITIONS.--As used in the Pain Relief Act:

A. "accepted guideline" means the most current clinical pain management guideline developed by the American geriatrics society or the American pain society or a clinical pain management guideline based on evidence and expert opinion that has been accepted by the New Mexico medical board;

B. "acute pain" means the normal, predicted physiological response to a noxious chemical or thermal or mechanical stimulus, typically associated with invasive procedures, trauma or disease and generally time-limited;

C. "board" means the licensing board of a health care provider;

D. "chronic pain" means pain that persists after reasonable medical efforts have been made to relieve the pain or its cause and that continues, either continuously or episodically, for longer than three consecutive months.

"Chronic pain" does not include pain associated with a terminal condition or with a progressive disease that, in the normal course of progression, may reasonably be expected to result in a terminal condition;

E. "clinical expert" means a person who by reason

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of specialized education or substantial relevant experience in pain management has knowledge regarding current standards, practices and guidelines;

F. "disciplinary action" means any formal action taken by a board against a health care provider, upon a finding of probable cause that the health care provider has engaged in conduct that violates the board's practice act;

G. "health care provider" means a person who is licensed or otherwise authorized by law to provide health care in the ordinary course of business or practice of the person's profession and who has prescriptive authority within the limits of the person's license;

H. "opioid analgesic" means buprenorphine, butorphanol, codeine, hydrocodone, hydromorphone, levorphanol, meperidine, methadone, morphine, nalbuphine, oxycodone, oxymorphone, pentazocine and propoxyphene as well as their brand names, isomers and combinations;

I. "opioid antagonist" means a drug approved by the federal food and drug administration that when administered negates or neutralizes in whole or in part the pharmacological effects of an opioid analgesic in the body, including naloxone and such other medications approved by the board of pharmacy for the reversal of opioid analgesic overdoses;

[H.] J. "pain" means acute and chronic pain; and

[I.] K. "therapeutic purpose" means the use of

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pharmaceutical and non-pharmaceutical medical treatment that conforms substantially to accepted guidelines for pain management."

SECTION HHHC→2. 3.←HHHC A new section of the Pain Relief Act is enacted to read:

"[NEW MATERIAL] REQUIREMENTS FOR HEALTH CARE PROVIDERS WHO PRESCRIBE, DISTRIBUTE OR DISPENSE OPIOID ANALGESICS.--

HHHC→Sfl→A.←Sfl←HHHC HHHC→A.←HHHC A health care provider who prescribes, distributes or dispenses an opioid analgesic for the first time to a patient shall

SJC→counsel←SJC SJC→advise←SJC the patient on the risks of overdose and inform the patient of the availability of an opioid antagonist. With respect to a patient to whom an opioid analgesic has previously been prescribed, distributed or dispensed by the health care provider, the health care provider shall SJC→counsel←SJC SJC→advise←SJC the patient on the risks of overdose and inform the patient of the availability of an opioid antagonist on the first occasion that the health care provider prescribes, distributes or dispenses an opioid analgesic each calendar year. HHHC→Sfl→"←Sfl←HHHC

HHHC→Sfl→B.←~~A health care provider who prescribes an opioid analgesic for a patient shall offer the patient a prescription for SJC→naloxone←SJC SJC→an opioid antagonist←SJC, within the scope of the health care provider's authorized practice, unless otherwise indicated in the~~

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~~professional judgment of the health care provider. A prescription for SJC→naloxone←SJC SJC→an opioid antagonist←SJC shall be accompanied by written information regarding the temporary effects of SJC→naloxone←SJC SJC→that opioid antagonist←SJC, techniques for administration of SJC→naloxone←SJC SJC→that opioid antagonist←SJC and a warning that a person administering SJC→naloxone←SJC SJC→an opioid antagonist←SJC should call 911 immediately after administering SJC→naloxone←SJC SJC→an opioid antagonist←SJC."←Sfl←HHHC~~

HHHC→B. A health care provider who prescribes an opioid analgesic for a patient shall←HHHC HHHC→~~offer the patient a prescription for naloxone, within the scope of the health care provider's authorized practice, unless otherwise indicated in the professional judgment of the health care provider. A prescription for naloxone shall be accompanied by written information regarding the temporary effects of naloxone, techniques for administration of naloxone and a warning that a person administering naloxone should call 911 immediately after administering naloxone."~~←HHHC HHHC→co-prescribe an opioid antagonist if the amount of opioid analgesic being prescribed is at least a five-day supply. The prescription for the opioid antagonist shall be accompanied by written information regarding the temporary effects of the opioid antagonist and techniques for administering the opioid antagonist. That

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written information shall contain a warning that a person  
administering the opioid antagonist should call 911 immediately  
after administering the opioid antagonist."←HHHC

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