MAINE STATE LEGISLATURE

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128th MAINE LEGISLATURE

FIRST REGULAR SESSION-2017

Legislative Document

No. 114

H.P. 82

House of Representatives, January 17, 2017

An Act To Increase the Number of Suboxone Prescribers

Reference to the Committee on Labor, Commerce, Research and Economic Development suggested and ordered printed.

ROBERT B. HUNT
Clerk

Presented by Representative MADIGAN of Waterville.

Cosponsored by Senator BREEN of Cumberland and Representatives: AUSTIN of Skowhegan, DOORE of Augusta, McCREIGHT of Harpswell, O'NEIL of Saco, RYKERSON of Kittery, SPEAR of South Thomaston, TIPPING of Orono, WARREN of Hallowell.

2 3	Sec. 1. 32 MRSA §2594-E, sub-§5, ¶D, as enacted by PL 2015, c. 242, §3, is amended to read:
4 5	D. Scope of practice for physician assistants, including prescribing of controlled drugs and treating opioid dependency with buprenorphine products;
6	Sec. 2. 32 MRSA §2594-E, sub-§6 is enacted to read:
7 8 9 10 11 12	6. Waiver application for buprenorphine. A physician assistant licensed and registered pursuant to this section whose scope of practice includes prescribing opioid medication and who is authorized under federal law to be eligible for a waiver from the federal Drug Enforcement Administration for treating opioid dependency with buprenorphine products shall apply for the waiver for the purpose of treating opioid dependency with buprenorphine products.
13	Sec. 3. 32 MRSA §2600-D is enacted to read:
14	§2600-D. Waiver application for buprenorphine
15 16 17 18	An individual licensed under this chapter whose scope of practice includes prescribing opioid medication shall obtain a physician waiver from the federal Drug Enforcement Administration for the purpose of treating opioid dependency with buprenorphine products.
19 20	Sec. 4. 32 MRSA §3270-E, sub-§5, ¶D, as enacted by PL 2015, c. 242, §5, is amended to read:
21 22	D. Scope of practice for physician assistants, including prescribing of controlled drugs and treating opioid dependency with buprenorphine products;
23	Sec. 5. 32 MRSA §3270-E, sub-§6 is enacted to read:
24 25 26 27 28 29	6. Waiver application for buprenorphine. A physician assistant licensed and registered pursuant to this section whose scope of practice includes prescribing opioid medication and who is authorized under federal law to be eligible for a waiver from the federal Drug Enforcement Administration for treating opioid dependency with buprenorphine products shall apply for the waiver for the purpose of treating opioid dependency with buprenorphine products.
30	Sec. 6. 32 MRSA §3300-G is enacted to read:
31	§3300-G. Waiver application for buprenorphine
32 33 34 35	An individual licensed under this chapter whose scope of practice includes prescribing opioid medication shall obtain a physician waiver from the federal Drug Enforcement Administration for the purpose of treating opioid dependency with buprenorphine products.

Be it enacted by the People of the State of Maine as follows:

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Sec. 7. MaineCare reimbursement rates for buprenorphine-medication-assisted treatment of substance use disorder. The Department of Health and Human Services shall increase reimbursement rates under the MaineCare program for buprenorphine-medication-assisted treatment, including prescriptions and accompanying behavioral health services, such as case management, counseling and drug testing, by 30% no later than January 1, 2018.

7 SUMMARY

This bill requires osteopathic and allopathic physicians whose scope of practice includes prescribing opioid medication to obtain a physician waiver from the federal Drug Enforcement Administration to treat opioid dependency using buprenorphine products. It also requires physician assistants whose scope of practice includes prescribing opioid medication to apply for a waiver as long as they are authorized under federal law. The bill also requires the Department of Health and Human Services to increase reimbursement rates under the MaineCare program for buprenorphine-medication-assisted treatment including prescriptions and accompanying services by 30% no later than January 1, 2018.