BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

SECTION 1. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 2-401.2 of Title 43A, unless there is created a duplication in numbering, reads as follows:

A. As used in this section:

1. “Emergency opioid antagonist” means a drug including but not limited to naloxone that blocks the effects of opioids and that is approved by the United States Food and Drug Administration for the treatment of an opioid overdose; and

2. “Health benefit plan” has the same meaning as provided by Section 6060.4 of Title 36 of the Oklahoma Statutes.

B. Subject to allocation of federal funding for the purchase of emergency opioid antagonists, the Department of Mental Health and
Substance Abuse Services shall provide emergency opioid antagonists to hospitals for provision by hospitals of emergency opioid antagonists to patients not covered by the state Medicaid program or by a health benefit plan as described in subsection C of Section 2 of this act.

C. The State Department of Health shall provide necessary technical assistance for the implementation of this section and Section 2 of this act.

SECTION 2. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1-706.21 of Title 63, unless there is created a duplication in numbering, reads as follows:

A. As used in this section:

1. “Emergency opioid antagonist” means a drug including but not limited to naloxone that blocks the effects of opioids and that is approved by the United States Food and Drug Administration for the treatment of an opioid overdose; and

2. “Health benefit plan” has the same meaning as provided by Section 6060.4 of Title 36 of the Oklahoma Statutes.

B. A hospital shall provide a person who presents to an emergency department with symptoms of an opioid overdose, opioid use disorder, or other adverse event related to opioid use with two doses of an emergency opioid antagonist upon discharge, unless:

1. The treating practitioner determines in his or her clinical and professional judgment that dispensing or distributing the
emergency opioid antagonist is not appropriate or the practitioner
has confirmed that the patient already has at least two doses of an
emergency opioid antagonist; or

2. The hospital is not required to provide the emergency opioid
antagonist due to the conditions described in paragraph 2 of
subsection C of this section.

C. 1. The provisions of subsection B of this section shall
apply without exception in cases where a patient is covered by the
state Medicaid program or by a health benefit plan.

2. The provisions of subsection B of this section shall apply
in cases where a patient is not covered by the state Medicaid
program or by a health benefit plan only if the hospital receives a
supply of one or more emergency opioid antagonists from the
Department of Mental Health and Substance Abuse Services under
Section 1 of this act.

D. 1. In cases where a patient who is provided an emergency
opioid antagonist under this section is covered under the state
Medicaid program, the hospital may bill the state Medicaid program
for the emergency opioid antagonist utilizing the appropriate
billing codes established by the Oklahoma Health Care Authority.
The state Medicaid program shall reimburse such claims in accordance
with applicable law, rules, and contract terms. This billing shall
be separate from and in addition to the payment for the other
services provided during the hospital visit.
2. In cases where a patient who is provided an emergency opioid antagonist under this section is covered by a health benefit plan, the hospital may bill the patient’s health benefit plan for the cost of the emergency opioid antagonist, and the health plan shall reimburse such claims.

E. When a hospital dispenses or distributes an emergency opioid antagonist, it shall provide:

1. Directions for use; and
2. Information and resources about medication for opioid use disorder and harm reduction strategies and services which may be available, such as substance use disorder treatment services and substance use disorder peer counselors.

This information shall be available in all languages relevant to the communities that the hospital serves.

F. This section does not prohibit a hospital from dispensing an emergency opioid antagonist to a patient at no cost to the patient and at no cost to a third-party payor out of the hospital’s prepurchased supply.

G. Nothing in this section prohibits or modifies a hospital’s ability or responsibility to bill a patient’s health benefit plan or to provide financial assistance as required by state or federal law.

H. A hospital, its employees, and its practitioners are immune from suit in any action, civil or criminal, or from professional or
other disciplinary action, for action or inaction in compliance with this section.

SECTION 3. This act shall become effective November 1, 2023.

COMMITTEE REPORT BY: COMMITTEE ON APPROPRIATIONS
March 1, 2023 - DO PASS AS AMENDED BY CS