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MEMORANDUM IN SUPPORT

FOR IMMEDIATE RELEASE: MAY 15, 2018

Re: S.4374-B (Amedore)/A.2810-B (McDonald) – An act to amend the public health law, in relation to requiring practitioners who administer naloxone or another overdose reversal agent to a patient in the case of a suspected or confirmed overdose to report the administration of the agent to the prescription monitoring program registry.

The New York Health Plan Association (HPA) supports S.4374-B/A.2810-B, which would require health care practitioners to report a suspected or confirmed opioid overdose to the prescription monitoring program (PMP) registry when they administer naloxone or another overdose reversal agent.

This legislation requires any health care practitioner who administers an overdose reversal agent when treating a patient for an opioid overdose to report the event in the PMP within seventy-two hours of administration. By reporting that the patient has been treated for an opioid overdose to the PMP will provide valuable information for other practitioners who may prescribe an opioid to the patient that an overdose has occurred.

This common sense approach to treatment for overdose, and possible addiction, clearly enhances the effectiveness of the PMP. When health care practitioners prescribe controlled substances, they need to know if their patient has experienced an overdose and they cannot rely on their patients to share the information for a variety of reasons.

The PMP is a valuable tool in mitigating the abuse and diversion of legally prescribed opiates and other controlled substances from legitimate medical use. A July 1, 2014 report by the Centers for Disease Control and Prevention highlighted the problem of overprescribing opioids, urging states to identify physicians who may overprescribe opioids by using prescription drug monitoring programs. S.4374-B/A.2810-B would allow physicians to track a patient's past prescriptions, as well as treatments for opioid overdose, and to identify those who are abusing them. This language would help to expand the PMP program, ensuring that vital medical information is shared among health care practitioners.

For these reasons, HPA supports S.4374-B/A.2810-B.