

## Legislation Aimed at Preventing Overdose Deaths Signed into Law

### *New requirements for health care providers, hospitals, insurers*

PROVIDENCE – On July 12, Gov. Gina M. Raimondo, joined by Senate President M. Teresa Paiva Weed, Senate Health and Human Services Committee Chairman Joshua Miller, Representative David A. Bennett, legislators, advocates and individuals in recovery, signed a broad, aggressive suite of legislation aimed at preventing drug overdose deaths.

Among other measures, the bills will set opioid prescribing parameters for health care providers, require hospitals to connect overdose victims with treatment and recovery resources, and require insurers to cover life-saving overdose medication.

The bill signing, which took place at a recovery house administered by Bridgemark Addiction Recovery Services, follows the passage of several bills, summarized here:

- Require comprehensive discharge planning for patients with substance use disorders and requires insurers to cover expanded medication-assisted treatment.
- Sets out guidelines for opioid prescribing practices by limiting the length of most first-time opioid prescriptions for acute pain. Requires pharmacies to upload dispensing data to the Prescription Drug Monitoring Program (PDMP) within 24 hours.

- Requires all insurers to cover naloxone and related devices, including in cases where the medication is intended for patients other than the insured.
- Allows the PDMP to be electronically connected to electronic medical records systems.
- Adds Schedule V prescriptions to the PDMP.
- Requires DOH to look for federal funding opportunities to improve the PDMP, such as by adding additional analytical functions and incorporating data from similar programs in other states.
- Authorizes BHDDH to develop a process to certify recovery housing facilities for residential substance use disorder treatment.
- Allows patients to synchronize certain drug refills for chronic conditions by requesting a limited supply (less than 30 days), with pro-rata cost sharing applied by the insurer.
- Allows licensed chemical dependency professionals with the proper training to use treatment known as auricular acu-detox. ♦

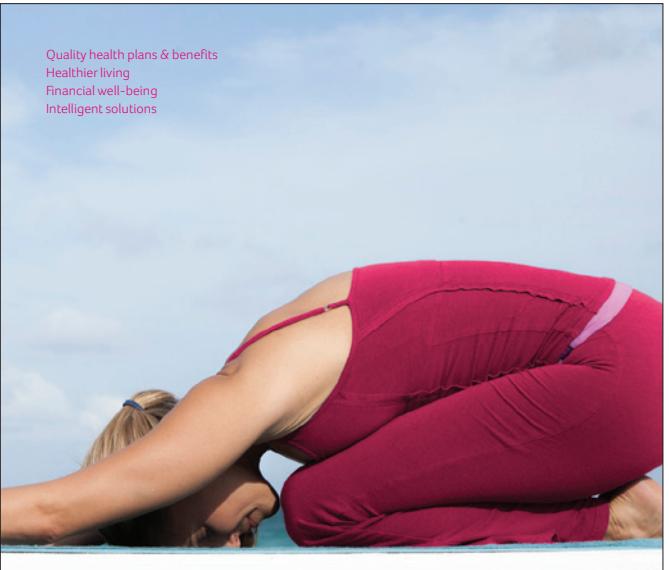
## Legislation Regulating Freestanding Emergency Rooms Signed into Law

PROVIDENCE – Governor Gina Raimondo has signed legislation that makes freestanding emergency care facilities subject to the same regulatory requirements as other health care facilities.

The law (2016-H 7500A, 2016-S 2696aa) defines free-standing emergency care facilities within state law, and makes them subject to the certificate of need process as well as emergency medical transportation regulations, just like all other medical facilities.

Under existing state law, proposals to build or expand other types of health care facilities are required to undergo a public process to get a certificate of need, which involves assessing the need for the proposal and ensuring that it wouldn't be harmful to existing hospitals and medical facilities by offering unnecessarily duplicative services. But since freestanding emergency rooms are not currently addressed in the law, an emergency room is able to apply for a license from the Department of Health without a certificate of need, and has only to demonstrate that it is financially sound and capable of providing the services it proposes. ♦

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