

AB 1963 (WALDRON): OPIOID TREATMENT CERTIFICATION INCENTIVE ACT

POSITION: The Chamber's Healthcare Committee voted to SUPPORT AB 1963 on May 9, 2018. The Public Policy Committee voted to SUPPORT AB 1963 on June 12, 2018.

RATIONALE: The lack of providers certified to prescribe life-saving medication presents a challenge in effectively tackling the opioid crisis. Furthermore, certification should be supported by appropriate reimbursement rates.

STATUS: Assemblymember Marie Waldron introduced AB 1963 on January 30, 2018. It passed out of the Assembly Committee on Health and was held in Appropriations Committee.

SUMMARY

This bill would increase access to medication-assisted treatment for opioid addiction by increasing Medi-Cal provider reimbursement rates for opioid addiction treatment, thereby incentivizing medical providers to become certified prescribers of medication that includes buprenorphine/naloxone, naltrexone, and other similar prescription based drugs. This bill is intended to provide a financial incentive sufficient to increase the number of providers who are certified to prescribe medication-assisted treatment drugs. Treatment for opioid addiction would become more readily available.

INDUSTRY/IES IMPACTED

Physicians and medical providers practicing in California will be incentivized to become certified prescribers of medication to treat opioid addiction. Counties are responsible for providing drug treatment to eligible Medi-Cal beneficiaries. For counties not participating in the waiver, the state administers the Drug Medi-Cal program and pays at the state-established rate.

SUPPORTERS

County Behavioral Health Directors Association
CA Special Districts Association
California Pharmacists Association
California Academy of Family Physicians
Biocom
CA Society of Health-System Pharmacists
California Access Coalition

OPPONENTS

None known

ARGUMENTS IN FAVOR

Currently, less than 2% of California medical providers are certified to prescribe and administer buprenorphine/naloxone, which are medications proven to treat substance abuse disorders. Increasing access to these medications across the state is pivotal in managing the opioid epidemic, especially in places with limited access to treatment such as rural California.

ARGUMENTS IN OPPOSITION

It is unclear that this bill applies only to services provided directly through the state Medi-Cal program. Though financial incentives may help, it is also unclear if simply increasing rates somewhat is the most cost-efficient means to further the goal of increasing the number of providers. A number of barriers still exist to getting more providers certified and trained to prescribe medication-assisted treatments.