



March 18, 2015

**SUMMARY OF ORIGINAL BILL:** Requires all nonresidential substitution-based treatment centers for opiate addiction to obtain a certificate of need by July 1, 2016. Redefines “nonresidential substitution-based treatment center for opiate addiction” as a facility or premises occupied as the professional practice office of a licensed physician that offers methadone for addiction or offers products containing buprenorphine or a formulation of controlled substances designed to treat opiate addiction by preventing symptoms of withdrawal to at least 150 patients.

FISCAL IMPACT OF ORIGINAL BILL:

NOT SIGNIFICANT

**SUMMARY OF AMENDMENT (004470):** Deletes all language after the enacting clause and rewrites the bill to specifically include stand-alone clinics and treatment resources and to define “physical location” as real property on which a physical structure, whether or not that structure is attached, is located containing one or more units if used as a site for prescribing or dispensing methadone, products containing buprenorphine, or products containing other controlled substances designed to treat opiate addiction. Specifies that the private practitioner exemption for licensure by the Department of Mental Health and Substance Abuse Services does not apply to a private practitioner, prescriber, or prescribers operating a nonresidential substitution-based treatment center for opiate addiction.

**FISCAL IMPACT OF BILL WITH PROPOSED AMENDMENT:**

**Unchanged from the original fiscal note.**

Assumptions for the bill as amended:

- The provisions of the bill will require any newly defined nonresidential substitution-based treatment centers for opiate addiction to obtain a certificate of need by July 1, 2016. The new definition includes certain physician offices that provide opiate addiction treatment.
- Under current law, facilities that initiate health care services for opiate addiction treatment provided through nonresidential substitution-based treatment centers for opiate addiction are required to obtaining a certificate of need. It is unknown how many additional facilities the proposed legislation will require to submit an application for a certificate of need.

- The Health Services and Development Agency does not believe there will be a significant increase in the number of certificate need applications; therefore, it is assumed that any increase expenditures to process the applications will not be significant.
- Application fees will be collected resulting in increased revenue per each application. The net impact is estimated to be not significant.
- The provisions of the bill as amended are not expected to have a significant effect on the licensure responsibilities of the Department of Mental Health and Substance Abuse Services.

**CERTIFICATION:**

The information contained herein is true and correct to the best of my knowledge.



Jeffrey L. Spalding, Executive Director

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