AN ACT relating to controlled substances.

Be it enacted by the General Assembly of the Commonwealth of Kentucky:

➔SECTION 1. A NEW SECTION OF KRS CHAPTER 218A IS CREATED TO READ AS FOLLOWS:

(1) When prescribing a controlled substance that contains any salt, compound, derivative, or preparation of an opioid to a human patient, a practitioner shall:

(a) Co-prescribe for the patient a drug approved by the federal Food and Drug Administration for the complete or partial reversal of opioid-induced respiratory depression and document the prescription in the patient's medical record, if one (1) or more of the following conditions are present:

1. The prescription dosage for the patient is fifty (50) or more morphine milligram equivalents of an opioid medication per day;

2. A controlled substance that contains any salt, compound, derivative, or preparation of an opioid is prescribed concurrently with a prescription for benzodiazepine; or

3. The patient presents with an increased risk for overdose as evidenced by but not limited to:

a. A patient history of overdose;

b. A patient history of substance use disorder; or

c. A patient risk for returning to a high dose of a controlled substance that contains any salt, compound, derivative, or preparation of an opioid to which the patient is no longer tolerant;

(b) Consistent with the existing standard of care, provide to a patient receiving a prescription pursuant to paragraph (a) of this subsection, education on overdose prevention and the use of a drug approved by the federal Food and Drug Administration for the complete or partial reversal of opioid-induced

respiratory depression; and

(c) Consistent with the existing standard of care, provide to one (1) or more persons designated by the patient or, for a patient who is a minor, to the minor's parent or guardian, education on overdose prevention and the use of a drug approved by the federal Food and Drug Administration for the complete or partial reversal of opioid-induced respiratory depression.

(2) A practitioner who fails to comply with the requirements established in subsection (1) of this section may be referred to the appropriate licensing board solely for the imposition of administrative sanctions deemed appropriate by that board.

(3) Nothing in this section shall be construed to:

(a) Create a private right of action against a practitioner who fails to comply with the requirements of subsection (1) of this section; or

(b) Limit a practitioner's liability for negligent diagnosis or treatment of a patient, as allowed under applicable state or federal law.