

TAADAS 2018 Legislative Session Recap

Background: The 110th General Assembly completed its business on April 25th, 2018 and adjourned sine die, that is without a day to return. The 111th General Assembly will convene on Tuesday, January 8, 2019 in an organizational session, which will include the election and appointment of new legislative leadership and the appointment of new committee membership.

Upcoming Elections: In the next election cycle, there will be three open senate seats with no incumbent and 23 open house seats with no incumbent seeking reelection. Those 23 seats include the ones presently held by Speaker Beth Harwell, Deputy Speaker Steve McDaniel, Finance Committee Chair Charles Sargent, and Democratic Leader Craig Fitzhugh. These departures, along with a new governor in 2019, will create significant changes in the state's leadership.

Parity: With the passage of SB 2165 by Briggs / HB 2355 by McCormick, the General Assembly revised its previously mandated coverage of mental health or alcoholism or drug dependency benefit to create compliance with the 2008 federal Mental Health Parity and Addiction Equity Act.

Effective January 1, 2019, the Tennessee Department of Commerce and Insurance during its market conduct examination of each health insurance company shall review the company's compliance with the parity requirements of this bill.

By January 31, 2020, the Department shall make a report to the General Assembly and post on the Department's website the compliance efforts of the health insurance companies with this bill. Here is a link to the legislation: [HB2355/SB2165](https://legis.tn.gov/bills/2018/2165)

Governor's Budget / TN Together: The budget for Fiscal Year 2018-19 was passed by both the House and Senate and includes more than \$15 million in new state dollars to fund treatment and services in the fight against opioid addiction. The chart below summarizes the allocation of these funds.

Initiative	Recurring	Nonrecurring
Substance Abuse Treatment Services	\$8,250,000	
Lifeline Network	\$750,000	
Naltrexone in Recovery Courts		\$750,000
County Jail Treatment Pilot Program		\$300,000
Data Initiatives and Improvements	\$100,000	\$1,500,000
Health Care Collaborative		\$250,000
Special Commission for Improved Prescriber Training		\$7,500
Zero to 3 Courts		\$175,000
Controlled Substances Schedule Update	\$286,300	
TBI Drug Investigation Special Agents (10)	\$1,300,000	\$855,000
	\$10,686,300	\$3,837,500

The Governor also proposed and passed a legislative package known as **TN Together** to aid in battling the state's opioid crisis. The plan was comprised of two pieces of legislation.

The **first bill** ([HB1831/SB2257](#)) limits the duration and dosage of opioid prescriptions for new patients. With initial opioid prescriptions limited to a 3-day supply, Tennessee will have one of the most strict and aggressive opioid policies in the nation. Prescribers may offer patients a three, five, or 10-day prescription with no more than a 10-day supply subject to a dosage cap. The bill includes exceptions for serious ailments, such as major surgeries and chronic conditions. Although the bill amassed wide support, the Tennessee Medical Association expressed concerns about the possible ramifications on medical provider autonomy.

The **second bill** ([HB1832/SB2258](#)) creates incentives for inmates to complete intensive substance use treatment programs while incarcerated and updates the schedule of controlled substances to better detect and penalize unlawful use and distribution of opioids. It also adds synthetic versions of the drug fentanyl, linked to an alarming number of overdose deaths, to the controlled substance schedules. The bill also includes a prohibition on the sale or distribution of Kratom to anyone under 21 years of age. For more on TN Together visit www.tn.gov/opioids.

Marketing of Alcohol and Drug Treatment Facilities: As introduced, [HB2068/SB2005](#) originally sought to create a criminal penalty for service providers of alcohol and drug services, operators of alcohol and drug treatment facilities (ADTF), or third party marketing services to make false or misleading marketing statements that can be demonstrated as "materially false." Committee amendments stripped the bill of the criminal penalty provision and substituted language which stipulates that agencies engaging in misleading marketing practices as defined in the bill are subject to suspension or revocation of the person or entity's license and the imposition of civil penalties.

Hypodermic Needle Exchange: Sen. Yarbrow and Rep. Fitzhugh passed [HB2675/SB2359](#) allowing county and district health departments to petition for approval from county legislative bodies to create needle and hypodermic syringe exchange programs. The bill also notes that all programs must be funded entirely by the county legislative body making petition to the county or district health department. Sen. Dickerson and Rep. Hazelwood passed [HB2180/SB1977](#) revising the distance parameter for the prohibition on a hypodermic syringe exchange program being operated within 2,000 feet of a school or park to make the parameter 1,000 feet in Nashville/Davidson County and in Chattanooga, Knoxville, and Memphis.

Other Items of Note:

- 1) House Joint Resolution 1189 Memorializing the life of Rod Bragg; and
- 2) House Joint Resolution 1174 Congratulating Jon Jackson for his service as President of the Tennessee Association of Alcohol Drug & other Addiction Services