Fiscal Note

State of Alaska 2017 Legislative Session

Bill Version: SB 79
Fiscal Note Number: 2

(S) Publish Date: 3/6/2017

Identifier: DHSS-PHAS-2-24-17 Department: Department of Health and Social Services

Title: OPIOIDS;PRESCRIPTIONS;DATABASE;LICENSE Appropriation: Public Health

S Allocation: Public Health Administrative Services

Sponsor: RLS BY REQUEST OF THE GOVERNOR OMB Component Number: 292

Requester: Governor

Expenditures/Revenues

Note: Amounts do not include in	oflation unless of	otherwise noted	l below.			(Thousar	ids of Dollars)
		Included in					
	FY2018	Governor's					
	Appropriation	FY2018		Out-Y	ear Cost Estim	nates	
	Requested	Request					
OPERATING EXPENDITURES	FY 2018	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023
Personal Services							
Travel							
Services							
Commodities							
Capital Outlay							
Grants & Benefits							
Miscellaneous							
Total Operating	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Fund Source (Operating Only)

Total	0.0	0.0	0.0	0.0	0.0	0.0	0.0
None							

Positions

· comens				
Full-time				
Part-time				
Temporary				

Change in Revenues

None							
Total	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Estimated SUPPLEMENTAL (FY2017) cost: 0.0 (separate supplemental appropriation required)

(discuss reasons and fund source(s) in analysis section)

Estimated CAPITAL (FY2018) cost: 0.0 (separate capital appropriation required)

(discuss reasons and fund source(s) in analysis section)

ASSOCIATED REGULATIONS

Does the bill direct, or will the bill result in, regulation changes adopted by your agency? Yes
If yes, by what date are the regulations to be adopted, amended or repealed?

01/01/19

Why this fiscal note differs from previous version:

Not applicable; initial version.

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Division:	Public Health	Date:	02/23/2017 12:00 PM
Approved By:	Shawnda O'Brien, Asst. Commissioner	Date:	02/24/17

Agency: Health and Social Services

FISCAL NOTE ANALYSIS

STATE OF ALASKA 2017 LEGISLATIVE SESSION

Analysis

This bill addresses the opioid epidemic by improving effective use of the prescription drug monitoring database. The bill influences judicious prescribing of opioids by limiting initial prescriptions and requiring providers to receive minimum training in substance abuse and pain management. This bill also creates a revocable, confidential Voluntary Nonopioid Directive that allows someone in recovery to make clear the person's wishes not to be administered an opioid.
The Department of Health and Social Services would be tasked with implementing the Voluntary Nonopioid Directive Act, establishing regulations, and creating the directive form. A person would provide this confidential information to a health care provider or hospital on a form posted on the Department of Health and Social Services website. No additional appropriation would be required; therefore a zero fiscal note is submitted.

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