

## Prescription Opioid Drug Abuse Laws

### What Are Prescription Opioids and Opioid Antagonists?

Prescription opioid drugs (“opioid analgesics”) are used to treat moderate to severe pain. According to the federal Centers for Disease Control and Prevention (CDC), the most commonly prescribed opioid drugs are methadone, oxycodone, hydrocodone, fentanyl, morphine, and codeine. (Heroin is an illegal opioid drug synthesized from morphine.)

Opioid antagonists (e.g., Narcan) block the effect of opioids and are often used to treat drug overdoses.

### Who Can Prescribe Them?

Connecticut law allows various health care providers to prescribe opioids and opioid antagonists within their professional scope of practice, including physicians, APRNs, dentists, nurse-midwives, optometrists, PAs, podiatrists, and veterinarians. Additionally, pharmacists can prescribe opioid antagonists if they receive a special certification and training to do so.

### Recent Connecticut Legislation

Like many other states, Connecticut continues to face an increase in the number of emergency room visits and drug overdose deaths involving opioid analgesics (see Table 1 below). In recent years, the legislature has responded to this trend by enacting laws to treat, reduce, or prevent opioid drug abuse. The following are a few examples of recent legislation:

#### Limits on Opioid Drug Prescriptions

[PA 16-43](#) and [PA 17-131](#) generally prohibit a prescribing practitioner from prescribing more than a seven-day supply of an opioid drug to an adult for first-time outpatient use and a five-day supply for minors under age 18. There is an exception if the prescriber, in his or her professional judgment, determines a longer prescription is necessary.

#### Sober Living Homes Voluntary Registration Program

[PA 18-171](#) created a voluntary registration program that allows operators of sober living homes certified by the National Alliance for Recovery Residences (NARR) to report the home’s certified status to the Department of Mental Health and Addiction Services.

#### Continuing Medical Education (CME) Requirements

[PA 15-198](#) requires physicians, APRNs, PAs, and dentists to take CME in pain management and prescribing controlled substances.

**Table 1: Connecticut Accidental Drug Intoxication Deaths: 2013-2018**

	2013	2014	2015	2016	2017	2018 <sup>1</sup>
<b>Accidental Drug Intoxication Deaths<sup>2</sup></b>	<b>495</b>	<b>568</b>	<b>729</b>	<b>917</b>	<b>1,038</b>	<b>1,030</b>
<i>Heroin, morphine, and/or codeine detected</i>	286	349	446	541	498	430
<i>Oxycodone in any death</i>	75	107	95	110	95	66
<i>Methadone in any death</i>	48	51	71	84	99	82
<i>Hydrocodone in any death</i>	19	15	20	20	15	20
<i>Fentanyl in any death</i>	37	75	189	483	677	740
<i>Any opioid and benzodiazepine</i>	60	140	221	232	313	254
<i>Hydromorphone</i>	0	12	17	22	16	16

Source: [Connecticut Office of the Chief Medical Examiner](#)

<sup>1</sup>Projected

<sup>2</sup>Data does not include pure alcohol intoxications; some deaths involved multiple drugs and may include alcohol and non-opioid drugs

## Access to Opioid Antagonists

### **Prescriptive Authority for Pharmacists:** [PA 15-198](#)

allows pharmacists to prescribe opioid antagonists if they complete a state-approved training and certification program and train the recipient in how to administer the medication, among other things.

**Standing Order for Pharmacies:** [PA 17-131](#) allows a prescribing practitioner to issue a standing order to a licensed pharmacist for an opioid antagonist that is FDA-approved and administered nasally or by auto-injection.

### **Prescription Drug Monitoring Program**

[PA 16-43](#) and [PA 17-131](#) made various changes to the PDMP, including (1) expanding who can serve as a prescriber's authorized agent, (2) modifying reporting deadlines, and (3) decreasing required prescriber reviews for prolonged treatment with schedule V nonnarcotic drugs.

The PDMP collects prescription information from pharmacies and dispensing practitioners on schedules II through V controlled substances to prevent improper drug use or prescriptions.

## Opioid Antagonist Good Samaritan Law

[PA 16-43](#) provides civil and criminal immunity to any licensed health care professional who administers an opioid antagonist to treat or prevent a drug overdose, instead of only those who prescribe the medication.



## Health Insurance

[PA 16-43](#) prohibits certain health insurance policies from requiring prior authorization for coverage of opioid antagonists. [PA 17-131](#) also requires these plans to cover certain medically necessary inpatient detoxification services.

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More**

“Connecticut’s Opioid Drug Abuse Laws,” OLR Report [2018-R-0129](#)

“Sober Living Homes,” OLR Report [2018-R-0130](#)

“Prescription Drug Abuse,” OLR Report [2014-R-0233](#)

“State Strategies for Addressing Prescription Drug Abuse,” OLR Report [2014-R-0236](#)

