

HOUSE BILL REPORT

SB 5974

As Passed House:
April 7, 2005

Title: An act relating to drug use among pregnant women.

Brief Description: Providing information to pregnant women about opiate treatment programs.

Sponsors: By Senators Prentice, Hargrove and Haugen; by request of Lieutenant Governor.

Brief History:

Committee Activity:

Children & Family Services: 3/17/05, 3/23/05 [DP].

Floor Activity:

Passed House: 4/7/05, 91-0.

Brief Summary of Bill

- Requires opiate substitution treatment programs to disseminate information to pregnant clients concerning the impact that opiate substitution treatment may have on their babies.
- Requires the Department of Social and Health Services to develop and disseminate the educational materials to all certified opiate treatment programs.

HOUSE COMMITTEE ON CHILDREN & FAMILY SERVICES

Majority Report: Do pass. Signed by 9 members: Representatives Kagi, Chair; Roberts, Vice Chair; Hinkle, Ranking Minority Member; Walsh, Assistant Ranking Minority Member; Darneille, Dickerson, Dunn, Haler and Pettigrew.

Staff: Cynthia Forland (786-7152).

Background:

The Department of Social and Health Services (DSHS) is responsible for certifying chemical dependency treatment programs in the state. The DSHS is also required to prepare, publish, evaluate, and disseminate educational material dealing with the nature and effects of alcohol and other psychoactive chemicals and the consequences of their use.

The DSHS, in consultation with opiate substitution treatment service providers and counties and cities, is required to establish statewide treatment and operating standards for certified

opiate substitution treatment programs, and to enforce those treatment and operating standards.

Summary of Bill:

All approved opiate substitution treatment programs that provide services to women who are pregnant are required to disseminate up-to-date and accurate health education information to all of their pregnant clients concerning the possible addiction and health risks that their opiate substitution treatment may have on their babies. All pregnant clients must also be advised of the risks to both them and their babies associated with not remaining on the opiate substitute program. The information must be provided to these clients both verbally and in writing. The health education information provided to the pregnant clients must include referral options for addicted babies.

The DSHS must adopt rules that require all opiate treatment programs to educate all pregnant women in their programs on the benefits and risks of methadone treatment to their fetuses before they are provided these medications, as part of their addiction treatment. The DSHS must meet this requirement within the appropriations provided for opiate treatment programs. The DSHS, working with treatment providers and medical experts, is required to develop and disseminate the educational materials to all certified opiate treatment programs.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill takes effect 90 days after adjournment of session in which bill is passed.

Testimony For: None.

Testimony Against: None.

Persons Testifying: None.

Persons Signed In To Testify But Not Testifying: None.