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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2025

A N A C T

RELATING TO FOOD AND DRUGS -- AUTHORIZATION FOR THE USE OF
BUPRENORPHINE

Introduced By: Senators Rogers, de la Cruz, Paolino, Raptakis, and Ujifusa

Date Introduced: January 31, 2025

Referred To: Senate Health & Human Services

It is enacted by the General Assembly as follows:

1 SECTION 1. Legislative findings.

2 (1) Bills passed by state legislatures can mandate or encourage state agency action, remove
3 barriers that exist to the use of buprenorphine, in state laws or agency rules, and appropriate money
4 to fund state agencies, providers, or community-based groups. Legislatures can also hold oversight
5 hearings on executive branch activities;

6 (2) States that enact new policies to increase access to buprenorphine should also perform
7 two key actions: collect data on opioid use disorder (OUD) prevalence and treatment rates, and
8 review and consider mitigating any long-standing structural barriers that will dilute efforts to reduce
9 opioid addiction. States need to look at their OUD prevalence rates, use of medications, and
10 treatment retention by age, race/ethnicity, sex, geography, and other important markers. This data
11 collection is the only way to determine which interventions are most needed and which populations
12 (in which geographic areas) to target. States can collect data for services covered by Medicaid,
13 federal block grants, opioid settlement funds (acquired through lawsuits with drug manufacturers
14 and distributors), state discretionary grants, and commercial health insurers;

15 (3) People with OUD often have a range of needs beyond care for their addiction, including
16 treatment for co-occurring mental illness, general medical care, and access to social supports such
17 as housing and employment. Some states are building delivery models that formalize the
18 connections between these service systems and strengthen individual systems, all with the intent of

1 improving patients' prospects for recovery. Medicaid, as the largest payer of OUD care, has been
2 a leader in implementing many of these system reforms.

3 SECTION 2. Section 21-28.2-2 of the General Laws in Chapter 21-28.2 entitled "Drug
4 Abuse Control" is hereby amended to read as follows:

5 **21-28.2-2. Rules and regulations.**

6 The department shall make any rules and regulations, [including rules and regulations that](#)
7 [lead to the more liberal utilization of buprenorphine](#), respecting the care and treatment of patients
8 and persons referred to the department's care and the management of the department's affairs as
9 are deemed necessary to carry out the expressed purposes of this chapter.

10 SECTION 3. This act shall take effect upon passage.

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EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF

A N A C T

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1 This act would encourage and authorize the department of health to adopt rules and
2 regulations that lead to the more liberal utilization of buprenorphine, respecting the care and
3 treatment of patients suffering from opioid abuse.

4 This act would take effect upon passage.

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