**South Carolina General Assembly**

124th Session, 2021-2022

**H. 3362**

**STATUS INFORMATION**

General Bill

Sponsors: Reps. Fry, Huggins, Dillard, Hewitt, Pendarvis, Trantham, Alexander, Robinson, Wooten, Pope, Caskey and Stavrinakis

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Introduced in the House on January 12, 2021

Currently residing in the House Committee on **Labor, Commerce and Industry**

Summary: Medicaid

**HISTORY OF LEGISLATIVE ACTIONS**

Date Body Action Description with journal page number

12/9/2020 House Prefiled

12/9/2020 House Referred to Committee on **Labor, Commerce and Industry**

1/12/2021 House Introduced and read first time ([House Journal‑page 171](file:///h:\hj\20210112.docx))

1/12/2021 House Referred to Committee on **Labor, Commerce and Industry** ([House Journal‑page 171](file:///h:\hj\20210112.docx))

2/9/2021 House Member(s) request name added as sponsor: Caskey

3/16/2021 House Member(s) request name added as sponsor: Stavrinakis

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**VERSIONS OF THIS BILL**

[12/9/2020](file:///p:\pprever\2021-22\3362_20201209.docx)

**A** **BILL**

TO AMEND THE CODE OF LAWS OF SOUTH CAROLINA, 1976, BY ADDING SECTION 44‑6‑115 SO AS TO REQUIRE MEDICAID HEALTH PLANS TO ENSURE ACCESS TO APPROPRIATE CLINICAL SERVICES FOR THE EFFECTIVE TREATMENT OF OPIOID USE DISORDERS, INCLUDING ACCESS TO MEDICATIONS.

Whereas, addiction is a chronic disease of brain reward, motivation, memory, and related circuity; and

Whereas, without treatment or engagement in recovery activities, addiction is progressive and can result in disability or premature death; and

Whereas, like other chronic diseases, such as type two diabetes or hypertension, opioid addiction cannot be cured but can be treated and managed; and

Whereas, evidence‑based best practice for treatment of opioid disorders underscores the importance of patient access to appropriate medications without unnecessary barriers. Now, therefore,

Be it enacted by the General Assembly of the State of South Carolina:

SECTION 1. Article 1, Chapter 6, Title 44 of the 1976 Code is amended by adding:

“Section 44‑6‑115. The department shall prohibit Medicaid health plans from limiting patient access to medications that treat opioid addiction including, but not limited to, through dosage limitations, duration of treatment limitations, extensive prior authorization requirements, and fail‑first or step therapy requirements, and shall guarantee unrestricted access to any FDA‑approved treatment options available for individuals who have completed a detoxification program. Medicaid health plans must offer accessibility to the full range of appropriate clinical services for the effective treatment of opioid use disorders, including medications, psychosocial therapy, and recovery support services.”

SECTION 2. This act takes effect upon approval by the Governor.

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