



MEDICAL BOARD OF CALIFORNIA

Protecting consumers by advancing high quality, safe medical care.

Executive Office

2005 Evergreen Street, Suite 1200
Sacramento, CA 95815-5401
Phone: (916) 263-2382
Fax: (916) 263-2944
www.mbc.ca.gov

Gavin Newsom, Governor, State of California | Business, Consumer Services and Housing Agency | Department of Consumer Affairs

AB 714 (Wood) – Effective September 5, 2019

AB 714 is a clarifying bill for AB 2760 (Wood, Chapter 324, Statutes of 2018). AB 2760 required a prescriber to offer a prescription for naloxone or another drug approved by the U.S. Food and Drug Administration (FDA) for the complete or partial reversal of opioid depression, when: the prescription dosage for the patient is 90 or more morphine milligram equivalents of an opioid medication per day; or an opioid medication is prescribed concurrently with a prescription for a benzodiazepine; or the patient presents with an increased risk for overdose, including a patient history of overdose, a patient with a history of substance use disorder, or a patient at risk for returning to a high dose of opioid medication to which the patient is no longer tolerant. This bill also required a prescriber, consistent with the existing standard of care, to provide education to a patient, or the patient's parent or guardian, or designee, on overdose prevention and the use of naloxone or other similar drug approved by the FDA.

Since the passage of AB 2760, the Board has received many calls from stakeholders raising questions regarding when a requirement to offer naloxone is required, specifically around the co-prescribing of a benzodiazepine and the increased risk for overdose, as the bill did not specify if it was related to opioid overdose. Concerns were also raised regarding inpatient facilities and hospice care, as no exemption was included in AB 2760.

AB 714 does the following:

- Defines the term “administer” for purposes of this section of law to mean the direct application of a drug or device to the body of a patient by injection, inhalation, ingestion, or other means.
- Defines the term “order” for purposes of this section of law to mean an order entered on the chart or medical record of a patient registered in an inpatient health facility by or on the order of a prescriber.
- Clarifies the existing requirement for a prescriber to offer naloxone or other FDA approved drug for the complete or partial reversal of opioid-induced respiratory depression is only required when the prescriber is prescribing an opioid or benzodiazepine medication and one or more of the specified at-risk conditions are present.
- Clarifies that a concurrent prescription of an opioid medication and benzodiazepine means that the benzodiazepine medication was dispensed to the patient within the last year.
- Clarifies that the condition related to increased risk for overdose is related to an opioid overdose, not any kind of substance use overdose.
- Clarifies that the requirement to provide education on opioid prevention and the use of naloxone is required when a prescriber is prescribing an opioid or benzodiazepine medication. This bill provides that a prescriber need not provide the education if the patient declines the education or has received the education within the past 24 months.
- Exempts prescribers from the requirements in AB 2760 when ordering medications to be administered to a patient while the patient is in an inpatient or outpatient setting and when prescribing medications to a terminally ill patient as defined in subdivision (c) of Section 11159.2 of the Health and Safety Code.