



Resident team gets legislation changed for the better

“This is why it’s so important to have people in health care involved in politics.” –Laurel Hallock-Koppelman, DNP

By Amber Hollingsworth

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Each year, Family Medicine residents complete a clinic quality improvement project. This year’s is about improving Naloxone prescribing for patients at risk for opioid overdose. Naloxone, an opioid antagonist, can very quickly restore normal respiration to a person whose breathing has slowed or stopped as a result of overdosing with heroin or prescription opioid pain medications.

The resident team was looking to increase their knowledge about Naloxone prescribing and teaching patients how to use it. “So we invited Laurel to show us,” 3rd-year Patty Tran, DO, says. Laurel Hallock-Koppelman is a Doctor of Nursing Practice at the Family Medicine Richmond Clinic who is heavily involved in patient advocacy efforts at the local and national level.

During the training, Laurel covered [Oregon House Bill 2376](#)

(<https://olis.leg.state.or.us/liz/2021R1/Downloads/MeasureDocument/HB2376/Introduced>), which requires that all clinicians prescribe Naloxone for patients at risk of overdose. (The bill is under submission.)

There were a few questions about this bill. For one, Naloxone is expensive for people without Medicaid, and a lot of insurance companies don’t cover it. Secondly, the guidance on who is at risk of overdose is relatively new, so many clinicians are still learning it. Finally, and most importantly, the residents asked “What’s the penalty for accidentally not prescribing Naloxone for a patient at risk?”

Dr. Hallock-Koppelman reached out to the bill’s authors with that last question, and found out that – as with any violation of board rules – the clinician can have their license suspended or revoked. A hefty penalty for a first-time offense on a new process.

Dr. Hallock-Koppelman responded with this concern, and almost immediately the authors amended the bill. “Because of our amazing residents, they are already in the process of rewriting the bill, removing the incredibly punitive penalty,” Dr. Hallock-Koppelman says. “I’m so proud to have been included in their conference today and delighted that we have great residents at OHSU Family Medicine. They *changed* a law today in a two-hour time frame.”

Now, by the time the bill is passed next year, providers hope insurance agencies will reduce the price, and clinicians will be more familiar with the prescribing guidelines. “Now we can tell from the patient’s chart whether they’re at risk,” Dr. Tran explains. “And we have more time to learn about it without risking losing our licenses.”

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