

WEST VIRGINIA LEGISLATURE

2025 REGULAR SESSION

Introduced

Senate Bill 726

By Senator Helton

[Introduced March 7, 2025; referred
to the Select Committee on Substance Use Disorder
and Mental Health; and then to the Committee on
Finance]

1 A BILL to amend the Code of West Virginia, 1931, as amended, by adding two new sections,
2 designated §16B-13-14 and §16B-13-15, relating to office-based, medication-assisted
3 treatment programs and opioid treatment programs; requiring these facilities to provide
4 basic medical services by October 1, 2025; requiring these facilities to offer
5 comprehensive medical services by April 1, 2026; and requiring auditing of dosage levels
6 for patients on a tapering protocol.

Be it enacted by the Legislature of West Virginia:

ARTICLE 13. MEDICATION-ASSISTED TREATMENT PROGRAM LICENSING ACT.

§16B-13-14. Basic and comprehensive medical services.

1 (a) By October 1, 2025, all medication-assisted treatment centers registered with the state
2 pursuant to §16B-13-3 or §16B-13-4 of this code shall offer patients the following basic medical
3 services onsite at the facility:

4 (1) Routine health screenings, including blood pressure and cholesterol screenings;

5 (2) HIV, hepatitis, and sexually transmitted diseases screenings;

6 (3) Birth control and voluntary long-acting reversible contraceptives;

7 (4) Vaccinations;

8 (5) Basic diagnostic services, such as, but not limited to:

9 (A) Blood tests, and

10 (B) Urinalysis;

11 (6) Treatment of common illnesses and injuries, such as, but not limited to:

12 (A) Cold,

13 (B) Flu,

14 (C) Minor infections, and

15 (D) Minor strains;

16 (7) Overdose prevention supplies and education.

17 (b) By April 1, 2026, all medication-assisted treatment centers registered with the state

pursuant to §16B-13-3 or §16B-13-4 of this code shall convert to physicians' offices that provide comprehensive medical services to patients onsite, including, but not limited to:

(1) All medical services provided in §16B-13-14(a) of this code;

(2) All medical services provided in West Virginia Code of State Rules §69-11-25 or §69-12-22;

(3) Advanced diagnostics;

(4) Behavioral health services;

(5) Comprehensive chronic condition management; and

(6) Health education and counseling, such as, but not limited to:

(A) Nutritional counseling.

(B) Weight management, and

(C) Other health improvement strategies.

(c) Nothing in subsection (a) or (b) of this section should be construed as limiting or narrowing the services medication-assisted treatment centers are required to provide to patients under West Virginia Code of State Rules §69-11-25 or §69-12-22.

§16B-13-15. Tapering schedules; audit.

(a) By July 1, 2025, all medication-assisted treatment centers registered with the state pursuant to §16B-13-3 or §16B-13-4 of this code shall conduct a mandatory audit of each patient's medical record to determine whether the recommended tapering schedule is being followed.

(b) The medication-assisted treatment center shall provide the results of the audit to the director.

(c) The director, or his or her designee, shall investigate the medication-assisted treatment centers where 50% of the center's patients are not following the recommended tapering schedule.

(d) When the director, or his or her designee, acts pursuant to §16B-13-15(c) of this code, the medication-assisted treatment center shall provide a bi-weekly report to the director, or his or her designee, detailing:

- 11 (1) The patient's recommended tapering schedule,
12 (2) The center's clinical reasoning why the schedule was not followed, and
13 (3) The center's plan to return the patient to the recommended tapering schedule.
14 (e) If the medication-assisted treatment center has not returned to the patient's
15 recommended tapering schedule after six weeks, the center will be deemed as violating this
16 section and shall be subject to the penalties in §16B-13-9 of this code.

NOTE: The purpose of this bill is to require medication-assisted treatment centers to provide comprehensive medical services to patients and require auditing of tapering protocols.

Strike-throughs indicate language that would be stricken from a heading or the present law and underscoring indicates new language that would be added.