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CS/CS/HB 249, Engrossed 1

2017 Legislature

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2 An act relating to drug overdoses; providing
3 legislative findings and intent; creating s. 401.253,
4 F.S.; permitting certain entities to report controlled
5 substance overdoses to the Department of Health;
6 defining the term "overdose"; providing requirements
7 for such reports; providing immunity for persons who
8 make reports in good faith; providing that a failure
9 to report is not a basis for licensure discipline;
10 requiring sharing of data with specified entities;
11 providing for use of such data; amending s. 395.1041,
12 F.S.; requiring a hospital with an emergency
13 department to develop a best practices policy to
14 promote the prevention of unintentional drug
15 overdoses; authorizing the policy to include certain
16 processes, guidelines, and protocols; providing an
17 effective date.

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19 Be It Enacted by the Legislature of the State of Florida:

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21 Section 1. (1) The Legislature finds that substance abuse
22 and drug overdose is a major health problem that affects the
23 lives of many people, multiple service systems, and leads to
24 such profoundly disturbing consequences as permanent injury or
25 death. Heroin, opiates, illegal drug, and accidental overdoses

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26 | are a crisis and stress the financial, health care, and public
27 | safety resources because there are no central databases that can
28 | quickly help address this problem. Quick data collection will
29 | allow all agencies to focus on specific age groups, areas,
30 | criminal behavior, and needed public education and prevention
31 | with the maximum utilization of resources. Further, it is the
32 | intent of the Legislature to require the collaboration of local,
33 | regional, and state agencies, service systems, and program
34 | offices to address the needs of the public; to establish a
35 | comprehensive system addressing the problems associated with
36 | drug overdoses; and to reduce duplicative requirements across
37 | local, county, state, and health care agencies.

38 | (2) It is the goal of the Legislature in this act to:

39 | (a) Discourage substance abuse and accidental or
40 | intentional overdoses by quickly identifying the type of drug
41 | involved, whether prescription or illegal, the age of the
42 | individual involved, and the areas where drug overdoses pose a
43 | potential risk to the public, schools, workplaces, and
44 | communities.

45 | (b) Provide a central data point so that data can be
46 | shared between the health care community and municipal, county,
47 | and state agencies to quickly identify needs and provide short
48 | and long-term solutions while protecting and respecting the
49 | rights of individuals.

50 | (3) It is the intent of the Legislature in this act to

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51 maximize:

52 (a) The efficiency of financial, public education, health
 53 professional, and public safety resources so that these
 54 resources may be concentrated on areas and groups in need.

55 (b) The utilization of funding programs for the
 56 dissemination of available federal, state, and private funds
 57 through contractual agreements with licensed basic life support
 58 service providers, advanced life support service providers,
 59 community-based organizations, or units of state or local
 60 government that deliver local substance abuse services in
 61 accordance with the intent of this act and s. 397.321(4),
 62 Florida Statutes.

63 Section 2. Section 401.253, Florida Statutes, is created
 64 to read:

65 401.253 Reporting of controlled substance overdoses.—

66 (1) (a) A basic life support service or advanced life
 67 support service which treats and releases, or transports to a
 68 medical facility, in response to an emergency call for a
 69 suspected or actual overdose of a controlled substance may
 70 report such incidents to the department. Such reports must be
 71 made using the Emergency Medical Service Tracking and Reporting
 72 System or other appropriate method with secure access,
 73 including, but not limited to, the Washington/Baltimore High
 74 Intensity Drug Trafficking Overdose Detection Mapping
 75 Application Program or other program identified by the

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76 department in rule. If a basic life support service or advanced
 77 life support service reports such incidents, it shall make its
 78 best efforts to make the report to the department within 120
 79 hours after it responds to the incident.

80 (b) The data collected by the department shall be made
 81 available within 120 hours to law enforcement, public health,
 82 fire rescue, and emergency medical service agencies in each
 83 county.

84 (c) For purposes of this section, the term "overdose"
 85 means a condition, including, but not limited to, extreme
 86 physical illness, decreased level of consciousness, respiratory
 87 depression, coma, or death resulting from the consumption or use
 88 of any controlled substance that requires medical attention,
 89 assistance or treatment, and clinical suspicion for drug
 90 overdose, such as respiratory depression, unconsciousness, or
 91 altered mental status, without other conditions to explain the
 92 clinical condition.

93 (2) (a) A report of an overdose of a controlled substance
 94 under this section shall include:

95 1. The date and time of overdose.

96 2. The approximate address of where the person was picked
 97 up or where the overdose took place.

98 3. Whether an emergency opioid antagonist, as defined in
 99 s. 381.887, was administered.

100 4. Whether the overdose was fatal or nonfatal.

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101 (b) A report of an overdose of a controlled substance
 102 under this section shall also include, if the reporting
 103 mechanism permits:

104 1. The gender and approximate age of the person receiving
 105 attention or treatment.

106 2. The suspected controlled substance involved in the
 107 overdose.

108 (3) A basic life support service or advanced life support
 109 service that reports information to or from the department
 110 pursuant to this section in good faith is not subject to civil
 111 or criminal liability for making the report.

112 (4) Failure to report an overdose under this section is
 113 not grounds for disciplinary action or penalties pursuant to s.
 114 401.411(1)(a).

115 (5) The department shall produce a quarterly report to the
 116 Statewide Drug Policy Advisory Council, the Department of
 117 Children and Families, and the Florida FUSION Center summarizing
 118 the raw data received pursuant to this section. Such reports
 119 shall also be made immediately available to the county-level
 120 agencies described in paragraph (1)(b). The Statewide Drug
 121 Policy Advisory Council, the Department of Children and
 122 Families, and the department may use these reports to maximize
 123 the utilization of funding programs for licensed basic life
 124 support service providers or advanced life support service
 125 providers, and for the dissemination of available federal,

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126 | state, and private funds for local substance abuse services in
 127 | accordance with s. 397.321(4).

128 | Section 3. Subsection (6) of section 395.1041, Florida
 129 | Statutes, is amended to read:

130 | 395.1041 Access to emergency services and care.—

131 | (6) RIGHTS OF PERSONS BEING TREATED.—

132 | (a) A hospital providing emergency services and care to a
 133 | person who is being involuntarily examined under the provisions
 134 | of s. 394.463 shall adhere to the rights of patients specified
 135 | in part I of chapter 394 and the involuntary examination
 136 | procedures provided in s. 394.463, regardless of whether the
 137 | hospital, or any part thereof, is designated as a receiving or
 138 | treatment facility under part I of chapter 394 and regardless of
 139 | whether the person is admitted to the hospital.

140 | (b) Each hospital with an emergency department shall
 141 | develop a best practices policy to promote the prevention of
 142 | unintentional drug overdoses. The policy may include, but is not
 143 | limited to:

144 | 1. A process to obtain the patient's consent to notify the
 145 | patient's next of kin, and each physician or health care
 146 | practitioner who prescribed a controlled substance to the
 147 | patient, regarding the patient's overdose, her or his location,
 148 | and the nature of the substance or controlled substance involved
 149 | in the overdose.

150 | 2. A process for providing the patient or the patient's

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151 next of kin with information about licensed substance abuse
 152 treatment services, voluntary admission procedures under part IV
 153 of chapter 397, involuntary admission procedures under part V of
 154 chapter 397, and involuntary commitment procedures under chapter
 155 394.

156 3. Guidelines for emergency department health care
 157 practitioners authorized to prescribe controlled substances to
 158 reduce the risk of opioid use, misuse, and addiction.

159 4. The use of licensed or certified behavioral health
 160 professionals or peer specialists in the emergency department to
 161 encourage the patient to seek substance abuse treatment.

162 5. The use of Screening, Brief Intervention, and Referral
 163 to Treatment protocols in the emergency department.

164 6. This paragraph may not be construed as creating a cause
 165 of action by any party.

166 Section 4. This act shall take effect October 1, 2017.