HB 731 2022

1 A bill to be entitled 2 An act relating to drug-related overdose prevention; 3 amending s. 381.887, F.S.; revising the purpose of 4 specified provisions relating to the prescribing, 5 ordering, and dispensing of emergency opioid 6 antagonists to certain persons by authorized health 7 care practitioners; requiring the Florida Public 8 Health Institute, Inc., in consultation with the Department of Health, to educate the public regarding the use of emergency opioid antagonists; authorizing pharmacists to order certain emergency opioid antagonists; providing certain authorized persons immunity from civil or criminal liability for administering emergency opioid antagonists under certain circumstances; authorizing civilian personnel 16 of law enforcement agencies to administer emergency opioid antagonists under certain circumstances; 18 amending s. 395.1041, F.S.; requiring hospital 19 emergency departments and urgent care centers to report incidents involving a suspected or actual overdose to the department under certain 22 circumstances; providing requirements for the report; 23 requiring hospital emergency departments and urgent 24 care centers to use best efforts to report such 25 incidents to the department within a specified

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timeframe; amending s. 401.253, F.S.; requiring, rather than authorizing, basic life support services and advanced life support services to report incidents involving a suspected or actual overdose of a controlled substance within a specified timeframe; providing an effective date.

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

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Section 1. Subsections (2), (3), and (4) of section 381.887, Florida Statutes, are amended to read:

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381.887 Emergency treatment for suspected opioid overdose.—

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(2) (a) The purpose of this section is to provide for the prescribing, ordering, and dispensing prescription of emergency opioid antagonists an emergency opioid antagonist to patients and caregivers and to encourage the prescribing, ordering, and dispensing prescription of emergency opioid antagonists by authorized health care practitioners.

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(b) The Florida Public Health Institute, Inc., in consultation with the Department of Health, shall educate the public regarding the use of emergency opioid antagonists in accordance with s. 381.981(2)(r).

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(3) (a) An authorized health care practitioner may prescribe and dispense an emergency opioid antagonist to, and a

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pharmacist may order an emergency opioid antagonist with an autoinjection delivery system or intranasal application delivery system for, a patient or caregiver for use in accordance with this section., and

- (b) A pharmacist pharmacists may dispense an emergency opioid antagonist pursuant to a prescription by an authorized health care practitioner. A pharmacist may dispense an emergency opioid antagonist with such a prescription or pursuant to a non-patient-specific standing order for an autoinjection delivery system or intranasal application delivery system, which must be appropriately labeled with instructions for use, pursuant to a pharmacist's order or pursuant to a nonpatient-specific standing order.
- (c) A such patient or caregiver is authorized to store and possess approved emergency opioid antagonists and, in an emergency situation when a physician is not immediately available, administer the emergency opioid antagonist to a person believed in good faith to be experiencing an opioid overdose, regardless of whether that person has a prescription for an emergency opioid antagonist.
- (4) The following persons are authorized to possess, store, and administer emergency opioid antagonists as clinically indicated and are immune from any civil liability or criminal liability as a result of administering an emergency opioid antagonist:

(a) Emergency responders, including, but not limited to, law enforcement officers, paramedics, and emergency medical technicians.

- (b) Crime laboratory personnel for the statewide criminal analysis laboratory system as described in s. 943.32, including, but not limited to, analysts, evidence intake personnel, and their supervisors.
- (c) Civilian personnel of a law enforcement agency, including, but not limited to, employees of a sheriff's office authorized to provide child protective investigative services under s. 39.3065 and correctional probation officers who, while acting within the scope or course of employment, come into contact with controlled substances or persons at risk of experiencing an opioid overdose.
- Section 2. Subsection (8) is added to section 395.1041, Florida Statutes, to read:
 - 395.1041 Access to emergency services and care.-
- (8) REPORTING OF CONTROLLED SUBSTANCE OVERDOSES.—A hospital emergency department or urgent care center that treats and releases a person in response to a suspected or actual overdose of a controlled substance must report such incident to the department if the patient was not transported by a basic life support service or an advanced life support service as those terms are defined in s. 401.23. Such reports must be made using an appropriate method with secure access, including, but

not limited to, the Washington/Baltimore High Intensity Drug

Trafficking Overdose Detection Mapping Application Program or
other program identified by department rule. Hospital emergency
departments and urgent care centers shall use best efforts to
make the report to the department within 120 hours after
discovering an incident.

Section 3. Paragraph (a) of subsection (1) of section 401.253, Florida Statutes, is amended to read:

401.253 Reporting of controlled substance overdoses.-

(1)(a) A basic life support service or <u>an</u> advanced life support service <u>that</u> which treats and releases, or transports to a medical facility, <u>a person</u> in response to an emergency call for a suspected or actual overdose of a controlled substance <u>must may</u> report such incidents to the department. Such reports must be made using the Emergency Medical Service Tracking and Reporting System or other appropriate method with secure access, including, but not limited to, the Washington/Baltimore High Intensity Drug Trafficking Overdose Detection Mapping Application Program or other program identified by the department in rule. If a Basic life support <u>services and service</u> or advanced life support <u>services service reports such incidents</u>, it shall <u>use make its</u> best efforts to make the report to the department within 120 hours after <u>responding</u> it responds to <u>an</u> the incident.

Section 4. This act shall take effect July 1, 2022.

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