

CS/CS/HB 249, Engrossed 1

1	A bill to be entitled
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, regional, and state agencies, service systems, and program 33 offices to address the needs of the public; to establish a 34 35 comprehensive system addressing the problems associated with drug overdoses; and to reduce duplicative requirements across 36 37 local, county, state, and health care agencies. 38 It is the goal of the Legislature in this act to: (2) (a) 39 Discourage substance abuse and accidental or intentional overdoses by quickly identifying the type of drug 40 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 It is the intent of the Legislature in this act to (3)

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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	<u>394.</u>
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.
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