HLS 15RS-167 ENGROSSED

2015 Regular Session

HOUSE BILL NO. 210

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BY REPRESENTATIVE MORENO

Prefiled pursuant to Article III, Section 2(A)(4)(b)(i) of the Constitution of Louisiana.

AN ACT

DRUGS: Authorizes the prescribing or dispensing of naloxone to third parties

2	To enact R.S. 40:978.2, relative to the treatment for overdose of controlled dangerous
3	substances; to require pharmacists to dispense naloxone; to limit liability for
4	prescribing or dispensing naloxone; to authorize the receipt and administration of
5	a naloxone prescription by a third party; to limit liability for the administration of
6	naloxone by a third party; to provide for definitions; and to provide for related
7	matters.
8	Be it enacted by the Legislature of Louisiana:
9	Section 1. R.S. 40:978.2 is hereby enacted to read as follows:
10	§978.2. Naloxone; prescription; dispensing; administration by third party; limitation
11	<u>of liability</u>
12	A. A licensed medical practitioner may, directly or by standing order,
13	prescribe or dispense the drug naloxone or another opioid antagonist without having
14	examined the individual to whom it may be administered if both of the following
15	conditions are met:
16	(1) The licensed medical practitioner provides the individual receiving the
17	naloxone or other opioid antagonist all training required by the department for the
18	safe and proper administration of naloxone or another opioid antagonist to
19	individuals who are undergoing or who are believed to be undergoing an
20	opioid-related drug overdose. The training, at a minimum, shall address all of the
21	following:

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CODING: Words in struck through type are deletions from existing law; words <u>underscored</u> are additions.

1	(a) Techniques on how to recognize signs of an opioid-related overdose.
2	(b) Standards and procedures for the storage and administration of naloxone
3	or another opioid antagonist.
4	(c) Emergency follow-up procedures including the requirement to summon
5	emergency services either immediately before or immediately after administering the
6	naloxone or other opioid antagonist to an individual apparently experiencing an
7	opioid-related overdose.
8	(2) The naloxone or other opioid antagonist is prescribed or dispensed in
9	such a manner that it shall be administered through a device approved by the United
10	States Food and Drug Administration for the intranasal administration of liquid
11	drugs.
12	B. A licensed medical practitioner who, in good faith, prescribes or
13	dispenses naloxone or another opioid antagonist pursuant to Subsection A of this
14	Section shall not, as a result of any act or omission, be subject to civil liability,
15	criminal prosecution, or disciplinary or other adverse action under any professional
16	licensing statute.
17	C.(1) A licensed pharmacist shall dispense naloxone or another opioid
18	antagonist prescribed, directly or by standing order, by a licensed medical
19	practitioner pursuant to this Section.
20	(2) A licensed pharmacist who, in good faith, dispenses naloxone or another
21	opioid antagonist pursuant to this Subsection shall not, as a result of any act or
22	omission, be subject to civil liability, criminal prosecution, or disciplinary or other
23	adverse action under any professional licensing statute.
24	D. A person acting in good faith who, pursuant to the provisions of this
25	Section, receives and administers naloxone or another opioid antagonist to a person
26	reasonably believed to be undergoing an opioid-related drug overdose shall be
27	immune from criminal and civil liability for the administration, unless personal
28	injury results from the gross negligence or willful or wanton misconduct in the
29	administration of the drug.

1	E. The department shall develop and promulgate a set of best practices for
2	use by a licensed medical practitioner pursuant to this Section including but not
3	limited to the training necessary to safely and properly administer naloxone or
4	another opioid antagonist to individuals who are undergoing or who are believed to
5	be undergoing an opioid-related drug overdose, the standards and procedures for the
6	storage and administration of naloxone or another opioid antagonist, and emergency
7	follow-up procedures.
8	F. For the purposes of this Section the following definitions apply:
9	(1) "Department" means the Department of Health and Hospitals.
10	(2) "Licensed medical practitioner" means a physician or other healthcare
11	practitioner licensed, certified, registered, or otherwise authorized to perform
12	specified healthcare services consistent with state law.
13	(3) "Opioid-related drug overdose" means a condition including extreme
14	physical illness, decreased level of consciousness, respiratory depression, coma, or
15	the ceasing of respiratory or circulatory function resulting from the consumption or
16	use of an opioid, or another substance with which an opioid was combined.

DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

HB 210 Engrossed

2015 Regular Session

Moreno

Abstract: Authorizes the prescribing and dispensing of naloxone or another opioid antagonist to a third party.

<u>Proposed law</u> authorizes a licensed medical practitioner to, directly or by standing order, prescribe or dispense the drug naloxone or another opioid antagonist without having examined the individual to whom it may be administered if both of the following conditions are met:

- (1) The licensed medical practitioner provides the individual receiving the naloxone or other opioid antagonist all training required by the Dept. of Health and Hospitals (DHH) for the safe and proper administration of naloxone or another opioid antagonist to individuals who are undergoing or who are believed to be undergoing an opioid-related drug overdose. The training, at a minimum, shall address all of the following:
 - (a) Techniques on how to recognize signs of an opioid-related overdose.

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(b) Standards and procedures for the storage and administration of naloxone or another opioid antagonist.

- (c) Emergency follow-up procedures including the requirement to summon emergency services either immediately before or immediately after administering the naloxone or other opioid antagonist to an individual apparently experiencing an opioid-related overdose.
- (2) The naloxone or other opioid antagonist is prescribed or dispensed in such a manner that it shall be administered through a device approved by the U. S. Food and Drug Administration for the intranasal administration of liquid drugs.

<u>Proposed law</u> requires a licensed pharmacist to dispense naloxone or another opioid antagonist prescribed, directly or by standing order, by a licensed medical practitioner pursuant to proposed law.

<u>Proposed law</u> limits civil, criminal, and professional liability for a licensed medical practitioner who, in good faith, prescribes or dispenses or a pharmacist who, in good faith, dispenses naloxone or another opioid antagonist pursuant to proposed law.

<u>Proposed law</u> limits civil and criminal liability for a person acting in good faith who receives and administers naloxone or another opioid antagonist to a person reasonably believed to be undergoing an opioid-related drug overdose unless personal injury results from the gross negligence or willful or wanton misconduct in the administration of the drug.

<u>Proposed law</u> requires DHH to develop and promulgate a set of best practices for use by a licensed medical practitioner including but not limited to the training necessary to safely and properly administer naloxone or another opioid antagonist to individuals who are undergoing or who are believed to be undergoing an opioid-related drug overdose, the standards and procedures for the storage and administration of naloxone or another opioid antagonist, and emergency follow-up procedures.

Proposed law provides definitions.

(Adds R.S. 40:978.2)

Summary of Amendments Adopted by House

The Committee Amendments Proposed by <u>House Committee on Health and Welfare</u> to the <u>original</u> bill:

1. Make a technical change.