GREEN SHEET REDIGEST

HB 210 2015 Regular Session Moreno

(KEYWORD, SUMMARY, AND DIGEST as amended by Senate committee amendments)

DRUGS Authorizes the prescribing or dispensing of naloxone to third parties

DIGEST

<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 and administering 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.
 - (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 for this purpose by the U. S. Food and Drug Administration.

<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 <u>proposed law</u>.

<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 <u>proposed law</u>.

<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 original bill:

1. Make a technical change.

The House Floor Amendments to the engrossed bill:

1. Clarify that the prescriber must provide training to the individual who will administer the naloxone or other opioid antagonist.

Summary of Amendments Adopted by Senate

<u>Committee Amendments Proposed by Senate Committee on Health and Welfare to the reengrossed bill</u>

1. Removes the provision that the naloxone or another opioid antagonist be administered by a device approved by the FDA for the intranasal administration of liquid drug.