A BILL FOR AN ACT

RELATING TO OPIOID ANTAGONISTS.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

SECTION 1. The legislature finds that drug overdose deaths in the United States have more than doubled since 1999. According to the most recent data from the federal Centers for Disease Control and Prevention, in 2013, more than 16,000 deaths associated with opioid pain relievers were reported. Deaths involving heroin have also doubled in recent years, with more than 8,000 deaths reported in 2013. According to the Centers for Disease Control and Prevention, overdoses involving prescription painkillers are at epidemic levels. However, deaths caused by opioids are often preventable via timely administration of an opioid antagonist, such as naloxone hydrochloride. Studies have found that providing opioid overdose training and naloxone kits can help people identify signs of an opioid-related drug overdose and can help reduce opioid overdose mortality.

The legislature further finds that naloxone injection has been approved by the federal Food and Drug Administration and
used for more than forty years by emergency medical services personnel to reverse opioid overdose. Naloxone has no psychoactive effects and does not have any potential for abuse, and first responders and family members with no medical training can learn to administer it safely. Furthermore, research has shown that the increased availability of naloxone does not encourage people to use more drugs or engage in riskier behavior.

The legislature additionally finds that over half of the states in the country have enacted some form of a 911 drug immunity law or have implemented a law or developed a pilot program to allow administration of medication, like naloxone hydrochloride, to reverse the effects of an opiate-related overdose. Numerous state and national organizations also support increased access to naloxone, including but not limited to the American Public Health Association, American Medical Association, American Pharmacists Association, Harm Reduction Coalition, American Society of Addiction Medicine, National Governors Association, law enforcement organizations, and organizations representing first responders.

Accordingly, the purpose of this Act is to:
(1) Create immunity for individuals who prescribe, possess, or administer an opioid antagonist such as naloxone hydrochloride during an opioid-related drug overdose;

(2) Authorize emergency personnel to administer naloxone hydrochloride;

(3) Require medicaid coverage for naloxone hydrochloride; and

(4) Exempt pharmacists and pharmacies from licensure and permitting requirements, except for drug storage requirements, for storing and distributing opioid antagonists.

SECTION 2. The Hawaii Revised Statutes is amended by adding a new chapter to be appropriately designated and to read as follows:

"CHAPTER

OVERDOSE PREVENTION AND EMERGENCY RESPONSE ACT

§ -1 Immunity. (a) The following definitions apply throughout this section:

"Health care professional" includes but is not limited to a physician, physician assistant under the authority and
supervision of a physician, or advanced practice registered
nurse who is authorized to prescribe an opioid antagonist.

"Opioid antagonist" means any drug that binds to opioid
receptors and blocks or disinhibits the effects of opioids
acting on those receptors.

"Opioid-related drug overdose" means a condition including
but not limited to extreme physical illness, decreased level of
consciousness, respiratory depression, coma, or death resulting
from the consumption or use of an opioid, or another substance
with which an opioid was combined, or a condition that a
layperson would reasonably believe to be an opioid-related drug
overdose that requires medical assistance.

(b) Notwithstanding any other law or regulation to the
contrary, a health care professional otherwise authorized to
prescribe an opioid antagonist may, directly or by standing
order, prescribe, dispense, and distribute an opioid antagonist
to an individual at risk of experiencing an opioid-related
overdose or to another person in a position to assist an
individual at risk of experiencing an opioid-related overdose.

Any such prescription shall be regarded as being issued for a
legitimate medical purpose in the usual course of professional
practice.

(c) A health care professional who, acting in good faith
and with reasonable care, prescribes, dispenses, or distributes
an opioid antagonist shall not be subject to any criminal or
civil liability or any professional disciplinary action for:

(1) Prescribing, dispensing, or distributing the opioid
antagonist; and

(2) Any outcomes resulting from the eventual
administration of the opioid antagonist.

(d) Notwithstanding any other law or regulation to the
contrary, any person may lawfully possess an opioid antagonist.

(e) A person who, acting in good faith and with reasonable
care, administers an opioid antagonist to another person whom
the person believes to be suffering an opioid-related drug
overdose shall be immune from criminal prosecution, sanction
under any professional licensing statute, and civil liability,
for acts or omissions resulting from the act.

§ 2 Opioid antagonist administration; emergency
personnel. By January 1, 2017, every emergency medical
technician licensed and registered in Hawaii shall be authorized
to administer an opioid antagonist as clinically indicated.

§ -3 Medicaid coverage. The department of human
services shall ensure that naloxone hydrochloride for outpatient
use is covered by the medicaid prescription drug program on the
same basis as other covered drugs.

§ -4 Naloxone hydrochloride; pharmacy exemption. (a)
Prescription orders for naloxone hydrochloride are exempt from
the pharmacy license requirements and pharmacy permit
requirements of chapter 461.

(b) Notwithstanding any other law or regulation to the
 contrary, a person or organization acting under a standing order
issued by a health care professional licensed under chapter 453
or chapter 457 who is otherwise authorized to prescribe an
opioid antagonist may store an opioid antagonist without being
subject to chapter 328 except part VII and may dispense an
opioid antagonist without charge or compensation.

§ -5 Unintentional drug overdose; reporting. The
department of health shall ascertain, document, and publish an
annual report on the number of, trends in, patterns in, and risk
factors related to unintentional drug overdose fatalities
occurring each year within the State. The report shall provide information on interventions that would be effective in reducing the rate of fatal or nonfatal drug overdose.

§ -6 Drug overdose recognition, prevention, and response. The department of health shall provide or establish the following:

(1) Education on drug overdose prevention, recognition, and response, including naloxone hydrochloride administration;

(2) Training on drug overdose prevention, recognition, and response, including naloxone hydrochloride administration, for patients receiving opioids and their families and caregivers;

(3) Naloxone hydrochloride prescription and distribution projects; and

(4) Education and training projects on drug overdose response and treatment, including naloxone hydrochloride administration, for emergency services and law enforcement personnel, including volunteer fire and emergency services personnel."
SECTION 3. There is appropriated out of the general revenues of the State of Hawaii the sum of $ or so much thereof as may be necessary for fiscal year 2016-2017 for drug overdose recognition, prevention, and response, including the distribution and administration of naloxone hydrochloride, as described in section -6, Hawaii Revised Statutes, pursuant to section 2 of this Act.

The sum appropriated shall be expended by the department of health for the purposes of this Act.

SECTION 4. This Act does not affect rights and duties that matured, penalties that were incurred, and proceedings that were begun before its effective date.

SECTION 5. This Act shall take effect on July 1, 2016.

INTRODUCED BY:
Report Title:
Opioid Antagonist; Naloxone Hydrochloride; Drug Overdose
Prevention; Emergency Response; Medical Immunity; Appropriation

Description:
Creates immunity for individuals who prescribe, possess, or
administer an opioid antagonist such as naloxone hydrochloride
during an opioid-related drug overdose. Authorizes emergency
personnel to administer naloxone hydrochloride. Requires
medicaid coverage for naloxone hydrochloride. Exempts
pharmacists and pharmacies from licensure and permitting
requirements, except for drug storage requirements, for storing
and distributing opioid antagonists. Makes an appropriation for
drug overdose recognition, prevention, and response, including
the distribution and administration of naloxone hydrochloride.

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