By: Representatives Nelson, Gibbs (72nd), To: Public Health and Human Holloway (27th), James-Jones, Anthony, Butler-Washington, Yates, Mickens

Services

HOUSE BILL NO. 1137 (As Sent to Governor)

AN ACT TO AMEND SECTION 41-29-319, MISSISSIPPI CODE OF 1972, TO DEFINE THE TERMS "COMMUNITY ORGANIZATION" AND "HIGH-RISK OPIOID OVERDOSE TOUCHPOINT" FOR THE PURPOSE OF THE EMERGENCY RESPONSE AND OVERDOSE PREVENTION ACT; TO AUTHORIZE A PRACTITIONER ACTING IN 5 GOOD FAITH TO DIRECTLY, OR BY STANDING ORDER, PRESCRIBE AN OPIOID ANTAGONIST TO A COMMUNITY ORGANIZATION; TO AUTHORIZE A PERSON 7 ACTING IN GOOD FAITH AND WITH REASONABLE CARE TO ADMINISTER AN OPIOID ANTAGONIST THAT WAS DISTRIBUTED BY A COMMUNITY ORGANIZATION 8 9 OR HIGH-RISK OPIOID OVERDOSE TOUCHPOINT TO ANOTHER PERSON WHOM HE 10 OR SHE BELIEVES TO BE EXPERIENCING AN OPIOID-RELATED OVERDOSE; TO 11 AUTHORIZE A COMMUNITY ORGANIZATION OR HIGH-RISK OPIOID OVERDOSE 12 TOUCHPOINT TO STORE AND DISTRIBUTE AN OPIOID ANTAGONIST; TO AUTHORIZE A MEMBER OF A COMMUNITY ORGANIZATION OR HIGH-RISK OPIOID OVERDOSE TOUCHPOINT TO ADMINISTER AN OPIOID ANTAGONIST TO ANOTHER 14 15 PERSON; TO AUTHORIZE THE DEPARTMENT OF HEALTH TO DISTRIBUTE AN 16 OPIOID ANTAGONIST TO ANY MEMBER OF A COMMUNITY ORGANIZATION OR 17 HIGH-RISK OPIOID OVERDOSE TOUCHPOINT UPON A REQUEST MADE IN 18 WRITING BY THE COMMUNITY ORGANIZATION OR HIGH-RISK OPIOID OVERDOSE 19 TOUCHPOINT; TO AUTHORIZE A PERSON TO STORE AN OPIOID ANTAGONIST 20 THAT IS DISTRIBUTED BY A COMMUNITY ORGANIZATION OR HIGH-RISK 21 OPIOID OVERDOSE TOUCHPOINT; TO PROVIDE CERTAIN CRIMINAL AND CIVIL 22 LIABILITY PROTECTION TO A COMMUNITY ORGANIZATION OR HIGH-RISK 23 OPIOID OVERDOSE TOUCHPOINT AND MEMBERS AND PERSONNEL OF SUCH 24 ORGANIZATION; AND FOR RELATED PURPOSES. 2.5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

SECTION 1. Section 41-29-319, Mississippi Code of 1972, is

28 41-29-319. (1) This section shall be known as the

29 "Emergency Response and Overdose Prevention Act."

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amended as follows:

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30	(2)	As	used	in	this	section,	the	following	terms	shall	be
31	defined as	ומ ב	rovide	d i	n thi	s subsect	ion:	:			

- 32 "Administer" means the direct application of a drug to the body of an individual by injection, inhalation, ingestion 33 34 or any other means.
- 35 (b) "Community organization" means an organization aimed at making desired improvements to a community's social 36 health, well-being, and overall functioning. "Community 37 38 organization" may include organizations that participate in social
- 39 work, and that are related to the organized development of community social welfare through coordination of public and 40
- private agencies. Community organizations may exist in 41
- 42 geographically, culturally, spiritually, and digitally bounded
- 43 communities.
- (* * *c) "Distribute" means to deliver an opioid 44 45 antagonist drug or opioid antagonist device by means other than by administering. 46
- (* * *d) "Education employee" means an employee of any 47 48 school district, public charter school, private school, public or 49 private university, community college or junior college.
- 50 "High-risk opioid overdose touchpoint" means a 51 health care entity, public health program, criminal justice system 52 or hospitality industry that may interact with individuals that 53 are considered high risk of experiencing or witnessing an opioid

- 54 <u>overdose</u>, or deliver harm-reduction services, or engage in
- 55 treatment of substance use disorders.
- 56 (* * * \underline{f}) "Possess" means to have physical control or
- 57 custody of an opioid antagonist.
- (* * *g) "Practitioner" means a physician licensed to
- 59 practice medicine in this state or any licensed health care
- 60 provider who is authorized to prescribe an opioid antagonist.
- 61 (* * *h) "Opioid antagonist" means any drug that binds
- 62 to opioid receptors and blocks or inhibits the effects of opioids
- 63 acting on those receptors and that is approved by the federal Food
- 64 and Drug Administration for the treatment of an opioid-related
- 65 overdose.
- (* * *i) "Opioid-related overdose" means an acute
- 67 condition, including, but not limited to, extreme physical
- 68 illness, decreased level of consciousness, respiratory depression,
- 69 coma, mania or death, resulting from the consumption or use of an
- 70 opioid or another substance with which an opioid was combined or
- 71 that a layperson would reasonably believe to be resulting from the
- 72 consumption or use of an opioid or another substance with which an
- 73 opioid was combined for which medical assistance is required.
- 74 (* * *j) "Emergency medical technician" means an
- 75 individual who possesses a valid emergency medical technician's
- 76 certificate issued under Section 41-59-33.

- 77 (*** \underline{k}) "Storage" means possession of an opioid 78 antagonist with the intent to distribute or administer the opioid 79 antagonist.
- 80 A practitioner acting in good faith and in 81 compliance with the standard of care applicable to that 82 practitioner may directly, or by standing order, prescribe an opioid antagonist to a person at risk of experiencing an 83 84 opioid-related overdose, or to a registered pain management 85 clinic, community organization, family member, friend or other 86 person in a position to assist such person at risk of experiencing 87 an opioid-related overdose.
 - (b) A practitioner acting in good faith and in compliance with the standard of care applicable to that practitioner may issue a standing order to one or more individual pharmacies that authorizes the pharmacy to dispense an opioid antagonist to a person at risk of experiencing an opioid-related overdose or to a community organization, family member, friend or other person in a position to assist such person at risk of experiencing an opioid-related overdose, without the person to whom the opioid antagonist is dispensed needing to have an individual prescription.
- 98 (4) A pharmacist acting in good faith and in compliance with 99 the standard of care applicable to pharmacists may dispense opioid 100 antagonists under a prescription or a standing order issued in 101 accordance with subsection (3) of this section. However, before a

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102	pharmacist may dispense an opioid antagonist under the authority
103	of subsection (3)(b) of this section, the pharmacist must complete
104	a training program approved by the State Board of Pharmacy on
105	opioid antagonists.

- (5) (a) A person acting in good faith and with reasonable care to another person whom he or she believes to be experiencing an opioid-related overdose may administer an opioid antagonist that was prescribed or authorized by a standing order in accordance with subsection (3) of this section.
- A person acting in good faith and with reasonable 111 (b) 112 care to another person whom he or she believes to be experiencing 113 an opioid-related overdose may administer an opioid antagonist 114 that was distributed by an education employee, community organization or high-risk opioid overdose touchpoint. Failure of 115 an education employee, community organization or high-risk opioid 116 117 overdose touchpoint, or a member or personnel of such 118 organization, to act shall not expose such organization, member, or personnel to any criminal or civil liability. 119
- 120 (6) Emergency medical technicians, firefighters and law

 121 enforcement officers acting in good faith shall be authorized and

 122 permitted to administer an opioid antagonist as clinically

 123 indicated. Failure of an emergency medical technician,

 124 firefighter or law enforcement officer to act shall not expose

 125 such person to any criminal or civil liability.

126	(7) (a) An education employee, community organization or
127	high-risk opioid overdose touchpoint may store or distribute an
128	opioid antagonist.
129	(b) An education employee, community organization or
130	high-risk opioid overdose touchpoint may administer an opioid
131	antagonist to another person if the education employee, community
132	organization or high-risk opioid overdose touchpoint:
133	(i) In good faith, believes the other person is
134	experiencing a drug overdose; and
135	(ii) Acts with reasonable care in administering
136	the opioid antagonist to the other person.
137	(c) The Department of Health may distribute an opioid
138	antagonist to any education employee, community organization or
139	high-risk opioid overdose touchpoint upon a request made in
140	writing by the education employee, community organization or
141	high-risk opioid overdose touchpoint.
142	(d) A person may store an opioid antagonist that is
143	distributed by an education employee, community organization or
144	high-risk opioid overdose touchpoint.
145	(e) Failure of an education employee, community
146	organization, high-risk opioid overdose touchpoint or a member or
147	personnel of such organization, to act shall not expose such
148	organization, member, or personnel to any criminal or civil
149	liability.

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151	(* * $*\underline{8}$) The following individuals are immune from any
152	civil or criminal liability or professional licensing sanctions
153	for the following actions authorized by this section:

- 154 (a) Any practitioner who prescribes or issues a 155 standing order for an opioid antagonist in accordance with 156 subsection (3) of this section;
- 157 (b) Any practitioner or pharmacist acting in good faith
 158 and in compliance with the standard of care applicable to that
 159 practitioner or pharmacist who dispenses an opioid antagonist
 160 under a prescription or standing order issued in accordance with
 161 subsection (3) of this section;
- 162 (c) (i) Any person other than a practitioner who

 163 administers an opioid antagonist in accordance with subsection (5)

 164 of this section; and
- (ii) Any person other than a practitioner who stores an opioid antagonist distributed by an education employee, community organization or high-risk opioid overdose touchpoint;
- 168 (d) Any emergency medical technician, firefighters and 169 law enforcement officers who administers an opioid antagonist in 170 accordance with subsection (6) of this section.
- (e) Any education employee, community organization or

 high-risk opioid overdose touchpoint who stores, distributes or

 administers an opioid antagonist under subsection (7) of this

 section.

175 **SECTION 2.** This act shall take effect and be in force from 176 and after its passage.