

118TH CONGRESS
2D SESSION

S. 4112

To provide protections from prosecution for drug possession to individuals who seek medical assistance when witnessing or experiencing an overdose, and for other purposes.

IN THE SENATE OF THE UNITED STATES

APRIL 11 (legislative day, APRIL 10), 2024

Mr. BOOKER (for himself, Mr. KENNEDY, Mr. MARKEY, and Mrs. CAPITO) introduced the following bill; which was read twice and referred to the Committee on the Judiciary

A BILL

To provide protections from prosecution for drug possession to individuals who seek medical assistance when witnessing or experiencing an overdose, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Samaritan Efforts to
5 Ensure Key Health Emergency and Life-saving Protec-
6 tions Act” or the “SEEK HELP Act”.

7 **SEC. 2. DEFINITIONS.**

8 In this Act—

1 (1) the term “controlled substance” has the
2 meaning given that term in section 102 of the Con-
3 trolled Substances Act (21 U.S.C. 802);

4 (2) the term “emergency response providers”
5 has the meaning given that term in section 2 of the
6 Homeland Security Act of 2002 (6 U.S.C. 101);

7 (3) the term “opioid overdose reversal drug”
8 means a drug approved under section 505 of the
9 Federal Food, Drug, and Cosmetic Act (21 U.S.C.
10 355) that—

11 (A) is indicated for the partial or complete
12 reversal of the pharmacological effects of an
13 opioid overdose in the human body; and

14 (B) has moved in or affecting interstate or
15 foreign commerce;

16 (4) the term “Secretary” means the Secretary
17 of Health and Human Services; and

18 (5) the term “seek medical assistance”
19 means—

20 (A) reporting a drug overdose or other
21 medical emergency to a law enforcement au-
22 thority, an emergency response provider, the 9-
23 1-1 system, a poison control center, or a med-
24 ical or drug treatment provider; or

1 (B) assisting another individual who is
2 making a report described in subparagraph (A).

3 **SEC. 3. GOOD SAMARITAN PROTECTIONS FOR DRUG OVER-**
4 **DOSE RESPONSES.**

5 (a) CIVIL LIABILITY PROTECTIONS FOR ADMINIS-
6 TRATION OF OPIOID OVERDOSE REVERSAL DRUGS.—

7 (1) IN GENERAL.—Except as provided in para-
8 graph (2), an individual shall not be liable in a civil
9 action in a Federal or State court for harm caused
10 by the emergency administration of an opioid over-
11 dose reversal drug to another individual who is or
12 reasonably appears to be suffering a drug overdose
13 if the individual administers the opioid overdose re-
14 versal drug in good faith.

15 (2) EXCEPTIONS.—Paragraph (1) shall not
16 apply with respect to harm caused by willful or
17 criminal misconduct, gross negligence, reckless mis-
18 conduct, or a conscious, flagrant indifference to the
19 rights or safety of the victim who was harmed.

20 (3) RULE OF CONSTRUCTION.—With respect to
21 a person who administers an opioid overdose reversal
22 drug to another individual, this section supersedes
23 the law of a State only to the extent that the State
24 has no statute or regulation that provides such a
25 person with immunity in a civil action for the use of

1 an opioid overdose reversal drug, as described in
2 paragraph (1).

3 (b) CRIMINAL LIABILITY PROTECTIONS FOR SEEK-
4 ING MEDICAL ASSISTANCE FOR AN OVERDOSE.—

5 (1) DEFINITION.—In this subsection, the term
6 “covered individual” means an individual who—

7 (A) in good faith and a timely manner—

8 (i) seeks medical assistance for an in-
9 dividual experiencing or reasonably ap-
10 pears to be experiencing a drug overdose;

11 or

12 (ii) seeks medical assistance for him-
13 self or herself for a drug overdose; and

14 (B) did not seek the medical assistance
15 during the course of the execution of an arrest
16 warrant, search warrant, or other lawful search
17 or seizure.

18 (2) LIABILITY PROTECTION.—A covered indi-
19 vidual shall not be subject to prosecution, civil asset
20 forfeiture, or revocation of supervised released under
21 section 404 of the Controlled Substances Act (21
22 U.S.C. 844) for possession of a controlled substance
23 if a law enforcement agency, or other government
24 agency, is made aware of the possession solely based
25 on the fact that the covered individual sought med-

1 ical assistance as described in clause (i) or (ii) of
2 paragraph (1)(A).

3 (3) ADMISSIBILITY AND SEIZURE OF EVIDENCE
4 OR CONTRABAND.—Nothing in this subsection shall
5 be construed—

6 (A) to limit the admissibility of evidence in
7 connection with the prosecution of—

8 (i) an offense with regard to an indi-
9 vidual who does not qualify for the protec-
10 tions under paragraph (2); or

11 (ii) an offense not described in para-
12 graph (2) that is committed by an indi-
13 vidual who qualifies for the protections
14 under such paragraph; or

15 (B) to limit any seizure of evidence or con-
16 traband otherwise permitted by law.

17 (c) PUBLIC AWARENESS CAMPAIGN.—The Secretary,
18 in consultation with the Administrator of the Drug En-
19 forcement Administration, shall carry out a public aware-
20 ness campaign regarding the liability protections under
21 this section.

22 (d) USE OF JAG FUNDS.—Section 501(a)(1) of title
23 I of the Omnibus Crime Control and Safe Streets Act of
24 1968 (34 U.S.C. 10152(a)(1)) is amended by adding at
25 the end the following:

1 “(J) Training programs for law enforce-
 2 ment officers of States and units of local gov-
 3 ernment regarding legal protections for individ-
 4 uals seeking medical assistance in connection
 5 with a controlled substance overdose.”.

6 **SEC. 4. USE OF BLOCK GRANT FUNDING FOR PUBLIC**
 7 **AWARENESS CAMPAIGNS AND INITIATIVES.**

8 (a) IN GENERAL.—A State receiving a grant under
 9 section 1921 of the Public Health Service Act (42 U.S.C.
 10 300x–21) may use amounts described in section
 11 1922(a)(1) of such Act (42 U.S.C. 300x–22(a)(1)) to—

12 (1) conduct a public awareness campaign re-
 13 garding the overdose Good Samaritan law of the
 14 State;

15 (2) provide training to criminal justice profes-
 16 sionals, stakeholders (including health care pro-
 17 viders), and the general public on applicable over-
 18 dose Good Samaritan laws; and

19 (3) to the extent possible, share data with the
 20 Secretary regarding the impact of overdose Good Sa-
 21 maritan laws of the State on individuals experi-
 22 encing an overdose, which shall include the number
 23 of calls seeking medical assistance that were received
 24 by a law enforcement agency, the 9–1–1 system, a
 25 poison control center, or a medical or drug treat-

1 ment providers for seeking medical assistance in the
2 event of a drug overdose.

3 (b) DEFINITION.—In this section, the term “overdose
4 Good Samaritan law” means a statute providing protec-
5 tion from liability relating to seeking medical assistance
6 in connection with a controlled substance overdose or ad-
7 ministering an opioid overdose reversal drug.

8 **SEC. 5. GAO REPORT TO STUDY EFFECTIVENESS AND IM-**
9 **PLEMENTATION.**

10 (a) IN GENERAL.—Not later than 2 years after the
11 date of enactment of this Act, the Comptroller General
12 of the United States shall submit to the Committee on
13 the Judiciary of the Senate and the Committee on the Ju-
14 diciary of the House of Representatives a report on evalu-
15 ating the implementation of Good Samaritan laws for drug
16 overdose and the effectiveness of grant funding provided
17 to States and localities for awareness campaigns related
18 to those laws.

19 (b) CONTENTS.—The report required under sub-
20 section (a) shall—

21 (1) assess the extent to which States and local-
22 ities have implemented and enforced Good Samari-
23 tan laws for drug overdose;

24 (2) evaluate the effectiveness of the laws de-
25 scribed in paragraph (1) in encouraging the report-

1 ing of overdoses and the provision of timely medical
2 assistance;

3 (3) an estimate of the number of individuals
4 impacted by the laws described in paragraph (1), in-
5 cluding the number of individuals who have received
6 legal protections or immunities under such laws;

7 (4) analyze the impact of the laws described in
8 paragraph (1), including—

9 (A) an assessment of changes in overdose-
10 related fatalities, emergency department visits,
11 and the use of naloxone or other overdose rever-
12 sal interventions; and

13 (B) data on the number of calls received
14 for overdoses before and after the implementa-
15 tion of such laws;

16 (5) evaluate the effectiveness of grant funding
17 provided to States and localities for the purpose of
18 spreading awareness about the laws described in
19 paragraph (1);

20 (6) assess the reach and impact of educational
21 campaigns, community outreach initiatives, and
22 training programs aimed at informing the public,
23 healthcare providers, law enforcement personnel, and
24 other relevant stakeholders about the protections

1 and benefits provided by the laws described in para-
2 graph (1);

3 (7) identify any barriers or challenges encoun-
4 tered during the implementation of the laws de-
5 scribed in paragraph (1) and associated awareness
6 campaigns, including—

7 (A) examining the legal, logistical, re-
8 source-related, or cultural factors that may im-
9 pede successful adoption and utilization of the
10 laws; and

11 (B) exploring any challenges faced by indi-
12 viduals seeking help or reporting overdoses due
13 to potential legal repercussions;

14 (8) highlight any best practices identified in
15 States and localities that have effectively imple-
16 mented the laws described in paragraph (1) and con-
17 ducted successful awareness campaigns;

18 (9) provide recommendations for improving the
19 implementation and impact of the laws described in
20 paragraph (1) and optimizing the use of grant fund-
21 ing for education and outreach efforts; and

22 (10) if multiple States or localities have imple-
23 mented different variations of the laws described in
24 paragraph (1), include a comparative analysis of
25 their respective approaches identifying variations in

1 outcomes, effectiveness, or challenges faced and pro-
2 viding insights for potential improvements or stand-
3 ardization of the laws.

4 (c) COOPERATION AND ACCESS.—Federal agencies
5 and relevant State and local authorities shall cooperate
6 with the Comptroller General of the United States and
7 provide access to necessary information and data to facili-
8 tate the completion of the report required under sub-
9 section (a).

○