

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 2090 Session of 2014

INTRODUCED BY FRANKEL, DIGIROLAMO, CRUZ, BAKER, FABRIZIO, DEAN, BROWNLEE, READSHAW, KILLION, BISHOP, MCGEEHAN, THOMAS, KIM, HAGGERTY, MILLARD, D. COSTA, HARKINS, YOUNGBLOOD, SCHLOSSBERG, ROZZI, M. DALEY, DONATUCCI, PAINTER, O'BRIEN, SNYDER, MCNEILL, GODSHALL, CLYMER, MOLCHANY, MASSER, DERMODY, HANNA, GIBBONS, GOODMAN, SIMS, MCCARTER, DAVIS, FREEMAN, ROSS, FARRY, SCHREIBER, P. COSTA, RAVENSTAHL, DEASY, KINSEY, SAINATO, STURLA, HACKETT, KOTIK, COHEN, WATERS, WATSON, MURT, HEFFLEY, FLECK, GAINEY, MARKOSEK, DeLUCA AND ROEBUCK, MARCH 12, 2014

REFERRED TO COMMITTEE ON HUMAN SERVICES, MARCH 12, 2014

AN ACT

1 Amending the act of April 14, 1972 (P.L.221, No.63), entitled,  
 2 as amended, "An act establishing the Pennsylvania Advisory  
 3 Council on Drug and Alcohol Abuse; imposing duties on the  
 4 Department of Health to develop and coordinate the  
 5 implementation of a comprehensive health, education and  
 6 rehabilitation program for the prevention and treatment of  
 7 drug and alcohol abuse and drug and alcohol dependence;  
 8 providing for emergency medical treatment; providing for  
 9 treatment and rehabilitation alternatives to the criminal  
 10 process for drug and alcohol dependence; and making repeals,"  
 11 further providing for definitions; providing for opioid-  
 12 related drug overdose death prevention programs; imposing  
 13 duties on the Department of Drug and Alcohol Programs and the  
 14 Department of Health; and making editorial changes.

15 The General Assembly of the Commonwealth of Pennsylvania  
 16 hereby enacts as follows:

17 Section 1. The title of the act of April 14, 1972 (P.L.221,  
 18 No.63), known as the Pennsylvania Drug and Alcohol Abuse Control  
 19 Act, amended December 20, 1985 (P.L.529, No.119), is amended to

1 read:

2 AN ACT

3 Establishing the Pennsylvania Advisory Council on Drug and  
4 Alcohol Abuse; imposing duties on the Department of [Health]  
5 Drug and Alcohol Programs to develop and coordinate the  
6 implementation of a comprehensive health, education and  
7 rehabilitation program for the prevention and treatment of  
8 drug and alcohol abuse and drug and alcohol dependence;  
9 providing for emergency medical treatment; providing for  
10 treatment and rehabilitation alternatives to the criminal  
11 process for drug and alcohol dependence; and making repeals.

12 Section 2. The definition of "department" in section 2(b) of  
13 the act, amended December 20, 1985 (P.L.529, No.119), is amended  
14 and subsection (b) is amended by adding definitions to read:

15 Section 2. Definitions:

16 \* \* \*

17 (b) As used in this act:

18 \* \* \*

19 "Department" means the Department of [Health] Drug and  
20 Alcohol Programs.

21 \* \* \*

22 "Drug overdose" means a condition that:

23 (1) may include, but is not limited to, extreme physical  
24 illness, decreased level of consciousness, respiratory  
25 depression, coma, mania, hysteria or death resulting from the  
26 consumption or use of a drug or controlled substance, or  
27 another substance with which a drug or controlled substance  
28 is combined; or

29 (2) a layperson would reasonably believe to be a drug  
30 overdose that requires medical assistance.

1 \* \* \*

2 "Emergency medical services agency" means any emergency  
3 medical services agency as defined in 35 Pa.C.S. § 8103  
4 (relating to definitions).

5 "Emergency medical services provider" means any emergency  
6 medical services provider as defined in 35 Pa.C.S. § 8103  
7 (relating to definitions).

8 "Fire company" means a fire company as defined in 35 Pa.C.S.  
9 § 7802 (relating to definitions).

10 "Firefighter" means a person who is a member of:

11 (1) a fire company organized and existing under the laws of  
12 this Commonwealth;

13 (2) a fire police unit, rescue squad, ambulance corps or  
14 other like organization affiliated with one or more fire  
15 companies; or

16 (3) a fire company or affiliated organization which  
17 participates in the fire service but does not look to that  
18 service as the person's primary means of livelihood.

19 \* \* \*

20 "Law enforcement agency" means an agency or office that  
21 employs a law enforcement officer.

22 "Law enforcement officer" means a peace officer or any other  
23 person who by virtue of the person's office or public employment  
24 is vested by law with a duty to maintain public order or to make  
25 arrests for offenses, whether that duty extends to all offenses  
26 or is limited to specific offenses. The term includes a sheriff  
27 and deputy sheriff.

28 \* \* \*

29 "Opioid antagonist" means any drug, including, but not  
30 limited to, naloxone, that binds to opioid receptors and blocks

1 or disinhibits the effects of opioids acting on those receptors.

2 "Opioid-related drug overdose" means a condition that:

3 (1) may include, but is not limited to, extreme physical  
4 illness, decreased level of consciousness, respiratory  
5 depression, coma or death resulting from the consumption or  
6 use of an opioid, or another substance with which an opioid  
7 is combined; or

8 (2) a layperson would reasonably believe to be an  
9 opioid-related drug overdose that requires medical  
10 assistance.

11 \* \* \*

12 "Secretary" means the Secretary of Drug and Alcohol Programs  
13 of the Commonwealth.

14 \* \* \*

15 Section 3. The act is amended by adding a section to read:

16 Section 6.1. Opioid-related Drug Overdose Death Prevention  
17 Programs.--(a) It is the intent of the General Assembly that  
18 the Commonwealth agencies and municipalities shall cooperate and  
19 coordinate with each other to further the purposes of this  
20 section.

21 (b) The department shall include information about the  
22 following as part of the department's preparation of a broad  
23 variety of educational, prevention and intervention material for  
24 use in all media, to reach all segments of the population and  
25 that can be utilized by public and private entities in  
26 educational programs with respect to drug and alcohol abuse and  
27 dependence:

28 (1) The significant threat of opioid-related drug overdose  
29 deaths.

30 (2) Ways that Pennsylvania families can seek drug treatment

1 for their loved ones.

2 (3) Programs under the department's jurisdiction that are  
3 established under this section.

4 (c) The following apply to the development or approval of  
5 training and instructional materials:

6 (1) The department and the Department of Health shall  
7 coordinate in the development or approval of training and  
8 instructional materials for the purposes of:

9 (i) Providing a police officer, law enforcement officer or  
10 firefighter with information on how to:

11 (A) Identify a person who is undergoing or who is believed  
12 to be undergoing an opioid-related drug overdose.

13 (B) Properly administer naloxone to the person undergoing or  
14 believed to be undergoing an opioid-related drug overdose.

15 (C) Promptly seek additional medical assistance for the  
16 person undergoing or believed to be undergoing an opioid-related  
17 drug overdose.

18 (ii) Providing a person at risk of undergoing an opioid-  
19 related overdose or a family member, friend or other person in a  
20 position to assist a person at risk of undergoing an opioid-  
21 related overdose with information on how to:

22 (A) Identify a person who is undergoing or who is believed  
23 to be undergoing an opioid-related drug overdose.

24 (B) Properly administer naloxone to the person undergoing or  
25 believed to be undergoing an opioid-related drug overdose.

26 (C) Promptly seek additional medical assistance for the  
27 person undergoing or believed to be undergoing an opioid-related  
28 drug overdose.

29 (2) Training and instructional materials developed or  
30 approved under paragraph (1) shall be finalized within sixty

1 days of the effective date of this section.

2 (3) Additional training or instructional materials may be  
3 developed or approved after the deadline in paragraph (2).

4 (d) The Department of Health shall amend the Prehospital  
5 Practitioner Scope of Practice, by December 31, 2014, to add  
6 administration of naloxone to the scope of practice of each  
7 emergency medical services provider and, in consultation with  
8 the Pennsylvania Emergency Health Services Council, shall  
9 develop or amend any training, treatment protocols, equipment  
10 lists or other policies as necessary, which may differ by type  
11 of emergency medical services provider.

12 (e) A police department, law enforcement agency or fire  
13 company may enter into a written agreement with an emergency  
14 medical services agency, with the consent of that agency's  
15 medical director or a physician, to:

16 (1) Obtain a supply of naloxone.

17 (2) Authorize a police officer, law enforcement officer or  
18 firefighter who has completed training approved under this  
19 section to administer naloxone to a person undergoing or  
20 believed to be undergoing an opioid-related drug overdose under  
21 the standing order of the medical director or physician.

22 (f) Notwithstanding any other law or regulation, a health  
23 care professional otherwise authorized to prescribe an opioid  
24 antagonist may, directly or by standing order, prescribe,  
25 dispense and distribute an opioid antagonist to an authorized  
26 police officer, authorized law enforcement officer, authorized  
27 firefighter, person at risk of experiencing an opioid-related  
28 overdose or family member, friend or other person in a position  
29 to assist a person at risk of experiencing an opioid-related  
30 overdose. The following apply:

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

5 (i) such prescribing or dispensing; and

6 (ii) any outcomes resulting from the eventual administration  
7 of the opioid antagonist.

8 (2) Notwithstanding any other law, any person or  
9 organization may possess, hold and deliver an opioid antagonist.

10 (3) A person who, acting in good faith and with reasonable  
11 care, administers an opioid antagonist to another person whom  
12 the person believes to be suffering an opioid-related drug  
13 overdose:

14 (i) Shall be immune from criminal prosecution, sanction  
15 under any professional licensing statute and civil liability for  
16 such act.

17 (ii) Shall not be subject to professional review for such  
18 act.

19 (iii) Shall not be liable for any civil damages for acts or  
20 omissions resulting from such act.

21 (4) Provision of training or instructional materials that  
22 meet the criteria of subsection (c)(1) shall create a rebuttable  
23 presumption that the person acted with reasonable care in  
24 prescribing and dispensing an opioid antagonist.

25 (5) Receipt of training or instructional materials that meet  
26 the criteria of subsection (c)(1) and the prompt seeking of  
27 additional medical assistance shall create a rebuttable  
28 presumption that the person acted with reasonable care in  
29 administering an opioid antagonist.

30 (g) To encourage good faith requests for medical assistance

1 involving drug overdoses, the following shall be immune from  
2 being arrested, charged, prosecuted, charged with a probation or  
3 parole violation or convicted for committing a prohibited act  
4 under section 13 of the act of April 14, 1972 (P.L.233, No.64),  
5 known as The Controlled Substance, Drug, Device and Cosmetic  
6 Act, where the evidence for the arrest, charge, prosecution,  
7 probation or parole violation charge or conviction was obtained  
8 as a result of seeking medical assistance:

9 (1) A person who, in good faith, seeks medical assistance  
10 for a person experiencing or whom the person reasonably believes  
11 to be experiencing a drug overdose.

12 (2) A person who experiences a drug overdose and seeks  
13 medical assistance.

14 (3) A person who is subject to a good faith request for  
15 medical assistance due to a drug overdose.

16 (h) Notwithstanding any other law or regulation, a person or  
17 organization acting at the direction of a health care  
18 professional authorized to prescribe naloxone may store naloxone  
19 without being subject to the provisions of the act of September  
20 27, 1961 (P.L.1700, No.699), known as the Pharmacy Act, and may  
21 dispense naloxone under a valid prescription order, including a  
22 standing order, so long as such activities are undertaken  
23 without charge or compensation.

24 (i) The department shall have the power to provide grants  
25 and contracts as needed for:

26 (1) Drug overdose prevention, recognition and response,  
27 including naloxone administration.

28 (2) Training related to naloxone administration for patients  
29 receiving opioids and their families and caregivers.

30 (3) Naloxone prescription or distribution projects.



1 (j) The Department of Health shall have the power to provide  
2 grants and contracts as needed for programs authorized under  
3 subsections (d) and (e).

4 (k) The department shall include the following as part of  
5 its annual report to the General Assembly:

6 (1) Statistics, trends, patterns and risk factors related to  
7 unintentional drug overdose fatalities occurring within this  
8 Commonwealth each year.

9 (2) Information on interventions that would be effective in  
10 reducing the rate of fatal or nonfatal drug overdose.

11 (l) The Department of Health shall annually report to the  
12 General Assembly on the adoption, utilization and effectiveness  
13 of programs authorized under subsections (d) and (e).

14 Section 4. This act shall take effect in 60 days.