By Senator Boyd

	21-00566A-22 2022544
1	A bill to be entitled
2	An act relating to drug-related overdose prevention;
3	amending s. 381.887, F.S.; revising the purpose of
4	specified provisions relating to the prescribing,
5	ordering, and dispensing of emergency opioid
6	antagonists to certain persons by authorized health
7	care practitioners; requiring the Florida Public
8	Health Institute, Inc., in consultation with the
9	Department of Health, to educate the public regarding
10	the use of emergency opioid antagonists; authorizing
11	pharmacists to order certain emergency opioid
12	antagonists; providing certain authorized persons
13	immunity from civil or criminal liability for
14	administering emergency opioid antagonists under
15	certain circumstances; authorizing civilian personnel
16	of law enforcement agencies to administer emergency
17	opioid antagonists under certain circumstances;
18	amending s. 395.1041, F.S.; requiring hospital
19	emergency departments and urgent care centers to
20	report incidents involving a suspected or actual
21	overdose to the department under certain
22	circumstances; providing requirements for the report;
23	requiring hospital emergency departments and urgent
24	care centers to use best efforts to report such
25	incidents to the department within a specified
26	timeframe; amending s. 401.253, F.S.; requiring,
27	rather than authorizing, basic life support services
28	and advanced life support services to report incidents
29	involving a suspected or actual overdose of a

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30	controlled substance within a specified timeframe;
31	providing an effective date.
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33	Be It Enacted by the Legislature of the State of Florida:
34	
35	Section 1. Subsections (2), (3), and (4) of section
36	381.887, Florida Statutes, are amended to read:
37	381.887 Emergency treatment for suspected opioid overdose
38	(2) <u>(a)</u> The purpose of this section is to provide for the
39	prescribing, ordering, and dispensing prescription of emergency
40	opioid antagonists an emergency opioid antagonist to patients
41	and caregivers and to encourage the prescribing, ordering, and
42	dispensing prescription of emergency opioid antagonists by
43	authorized health care practitioners.
44	(b) The Florida Public Health Institute, Inc., in
45	consultation with the Department of Health, shall educate the
46	public regarding the use of emergency opioid antagonists in
47	accordance with s. 381.981(2)(r).
48	(3) <u>(a)</u> An authorized health care practitioner may prescribe
49	and dispense an emergency opioid antagonist to, and a pharmacist
50	may order an emergency opioid antagonist with an autoinjection
51	delivery system or intranasal application delivery system for, a
52	patient or caregiver for use in accordance with this section $\underline{\cdot  au}$
53	and
54	(b) A pharmacist pharmacists may dispense an emergency
55	opioid antagonist pursuant to <u>a prescription by an authorized</u>
56	health care practitioner. A pharmacist may dispense an emergency
57	opioid antagonist with such a prescription or pursuant to a non-
58	patient-specific standing order for an autoinjection delivery

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59	system or intranasal application delivery system, which must be
60	appropriately labeled with instructions for use, pursuant to a
61	pharmacist's order or pursuant to a nonpatient-specific standing
62	order.
63	<u>(c) A</u> such patient or caregiver is authorized to store and
64	possess approved emergency opioid antagonists and, in an
65	emergency situation when a physician is not immediately
66	available, administer the emergency opioid antagonist to a
67	person believed in good faith to be experiencing an opioid
68	overdose, regardless of whether that person has a prescription
69	for an emergency opioid antagonist.
70	(4) The following persons are authorized to possess, store,
71	and administer emergency opioid antagonists as clinically
72	indicated and are immune from any civil liability or criminal
73	liability as a result of administering an emergency opioid
74	antagonist:
75	(a) Emergency responders, including, but not limited to,
76	law enforcement officers, paramedics, and emergency medical
77	technicians.
78	(b) Crime laboratory personnel for the statewide criminal
79	analysis laboratory system as described in s. 943.32, including,
80	but not limited to, analysts, evidence intake personnel, and
81	their supervisors.
82	(c) Civilian personnel of a law enforcement agency,
83	including, but not limited to, employees of a sheriff's office
84	authorized to provide child protective investigative services
85	under s. 39.3065 and correctional probation officers who, while
86	acting within the scope or course of employment, come into
87	contact with controlled substances or persons at risk of

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2022544 21-00566A-22 88 experiencing an opioid overdose. 89 Section 2. Subsection (8) is added to section 395.1041, Florida Statutes, to read: 90 91 395.1041 Access to emergency services and care.-92 (8) REPORTING OF CONTROLLED SUBSTANCE OVERDOSES.-A hospital 93 emergency department or urgent care center that treats and 94 releases a person in response to a suspected or actual overdose 95 of a controlled substance must report such incident to the 96 department if the patient was not transported by a basic life 97 support service or an advanced life support service as those 98 terms are defined in s. 401.23. Such reports must be made using 99 an appropriate method with secure access, including, but not 100 limited to, the Washington/Baltimore High Intensity Drug 101 Trafficking Overdose Detection Mapping Application Program or other program identified by department rule. Hospital emergency 102 103 departments and urgent care centers shall use best efforts to 104 make the report to the department within 120 hours after 105 discovering an incident. Section 3. Paragraph (a) of subsection (1) of section 106 107 401.253, Florida Statutes, is amended to read: 108 401.253 Reporting of controlled substance overdoses.-109 (1) (a) A basic life support service or an advanced life 110 support service that which treats and releases, or transports to 111 a medical facility, a person in response to an emergency call 112 for a suspected or actual overdose of a controlled substance 113 must may report such incidents to the department. Such reports 114 must be made using the Emergency Medical Service Tracking and 115 Reporting System or other appropriate method with secure access, 116 including, but not limited to, the Washington/Baltimore High

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117	Intensity Drug Trafficking Overdose Detection Mapping
118	Application Program or other program identified by <del>the</del>
119	department <del>in</del> rule. <del>If a</del> Basic life support <u>services and</u> <del>service</del>
120	<del>or</del> advanced life support <u>services</u> <del>service reports such</del>
121	incidents, it shall use make its best efforts to make the report
122	to the department within 120 hours after <u>responding</u> <del>it responds</del>
123	to <u>an</u> the incident.
124	Section 4. This act shall take effect July 1, 2022.