

1-1 By: Menéndez, et al. S.B. No. 629
 1-2 (In the Senate - Filed January 26, 2023; February 17, 2023,
 1-3 read first time and referred to Committee on Education;
 1-4 May 1, 2023, reported adversely, with favorable Committee
 1-5 Substitute by the following vote: Yeas 12, Nays 0; May 1, 2023,
 1-6 sent to printer.)

1-7 COMMITTEE VOTE

	Yea	Nay	Absent	PNV
1-8				
1-9	X			
1-10	X			
1-11	X			
1-12			X	
1-13	X			
1-14	X			
1-15	X			
1-16	X			
1-17	X			
1-18	X			
1-19	X			
1-20	X			
1-21	X			

1-22 COMMITTEE SUBSTITUTE FOR S.B. No. 629 By: West

1-23 A BILL TO BE ENTITLED
 1-24 AN ACT

1-25 relating to the use of opioid antagonists on public and private
 1-26 school campuses and at or in transit to or from off-campus school
 1-27 events and to the permissible uses of money appropriated to a state
 1-28 agency from the opioid abatement account.

1-29 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

1-30 SECTION 1. The heading to Subchapter E, Chapter 38,
 1-31 Education Code, is amended to read as follows:

1-32 SUBCHAPTER E. MAINTENANCE, ~~[AND]~~ ADMINISTRATION, AND DISPOSAL OF
 1-33 EPINEPHRINE AUTO-INJECTORS, OPIOID ANTAGONISTS, AND ASTHMA
 1-34 MEDICINE

1-35 SECTION 2. Section 38.201, Education Code, is amended by
 1-36 amending Subdivision (1) and adding Subdivision (3-a) to read as
 1-37 follows:

1-38 (1) "Advisory committee" means the stock medicine
 1-39 advisory committee established under Section 38.202.

1-40 (3-a) "Opioid antagonist" and "opioid-related drug
 1-41 overdose" have the meanings assigned by Section 483.101, Health and
 1-42 Safety Code.

1-43 SECTION 3. The heading to Section 38.202, Education Code,
 1-44 is amended to read as follows:

1-45 Sec. 38.202. STOCK MEDICINE ADVISORY COMMITTEE:
 1-46 ESTABLISHMENT AND COMPOSITION.

1-47 SECTION 4. Sections 38.202(a) and (b), Education Code, are
 1-48 amended to read as follows:

1-49 (a) The commissioner of state health services shall
 1-50 establish a stock medicine ~~[an]~~ advisory committee to examine and
 1-51 review the administration of epinephrine auto-injectors to a person
 1-52 experiencing an anaphylactic reaction, and opioid antagonists to a
 1-53 person experiencing an apparent opioid-related drug overdose, on a
 1-54 campus of a school district, an open-enrollment charter school, a
 1-55 private school, or an institution of higher education.

1-56 (b) The advisory committee shall be composed of members
 1-57 appointed by the commissioner of state health services. In making
 1-58 appointments, the commissioner shall ensure that:

1-59 (1) a majority of the members are physicians with
 1-60 expertise in treating anaphylaxis or opioid-related drug

2-1 overdoses, including physicians who specialize in the fields of
 2-2 pediatrics, allergies, asthma, drug use disorders, and immunology;
 2-3 (2) at least one member is a registered nurse employed
 2-4 by a school district, open-enrollment charter school, or private
 2-5 school as a school nurse;
 2-6 (3) at least one member is an employee of a general
 2-7 academic teaching institution; and
 2-8 (4) at least one member is an employee of a public
 2-9 junior college or a public technical institute.

2-10 SECTION 5. Section 38.207, Education Code, is amended to
 2-11 read as follows:

2-12 Sec. 38.207. ADVISORY COMMITTEE: DUTIES. The advisory
 2-13 committee shall advise the commissioner of state health services
 2-14 on:

2-15 (1) the storage and maintenance of epinephrine
 2-16 auto-injectors and opioid antagonists on school campuses and
 2-17 campuses of institutions of higher education;

2-18 (2) the training of school personnel and school
 2-19 volunteers, and of personnel and volunteers at institutions of
 2-20 higher education, in the administration of an epinephrine
 2-21 auto-injector and opioid antagonist; and

2-22 (3) a plan for:

2-23 (A) one or more school personnel members or
 2-24 school volunteers trained in the administration of an epinephrine
 2-25 auto-injector to be on each school campus; ~~and~~

2-26 (B) one or more school personnel members or
 2-27 school volunteers trained in the administration of an opioid
 2-28 antagonist to be on each school campus;

2-29 (C) one or more personnel members or volunteers
 2-30 of an institution of higher education trained in the administration
 2-31 of an epinephrine auto-injector to be on each campus of an
 2-32 institution of higher education; and

2-33 (D) one or more personnel members or volunteers
 2-34 of an institution of higher education trained in the administration
 2-35 of an opioid antagonist to be on each campus of an institution of
 2-36 higher education.

2-37 SECTION 6. The heading to Section 38.208, Education Code,
 2-38 is amended to read as follows:

2-39 Sec. 38.208. MAINTENANCE AND ADMINISTRATION OF EPINEPHRINE
 2-40 AUTO-INJECTORS, OPIOID ANTAGONISTS, AND ASTHMA MEDICINE.

2-41 SECTION 7. Sections 38.208(a), (b), (c), (d), and (e),
 2-42 Education Code, are amended to read as follows:

2-43 (a) Each school district, open-enrollment charter school,
 2-44 and private school may adopt and implement a policy regarding the
 2-45 maintenance, administration, and disposal of epinephrine
 2-46 auto-injectors or opioid antagonists at each campus in the district
 2-47 or school.

2-48 (b) If a policy is adopted under Subsection (a), the policy,
 2-49 as applicable:

2-50 (1) must provide that school personnel and school
 2-51 volunteers who are authorized and trained may administer an
 2-52 epinephrine auto-injector to a person who is reasonably believed to
 2-53 be experiencing anaphylaxis, or an opioid antagonist to a person
 2-54 who is reasonably believed to be experiencing an opioid-related
 2-55 drug overdose, on a school campus; and

2-56 (2) may provide that school personnel and school
 2-57 volunteers who are authorized and trained may administer an
 2-58 epinephrine auto-injector to a person who is reasonably believed to
 2-59 be experiencing anaphylaxis, or an opioid antagonist to a person
 2-60 who is reasonably believed to be experiencing an opioid-related
 2-61 drug overdose, at an off-campus school event or while in transit to
 2-62 or from a school event.

2-63 (c) The executive commissioner of the Health and Human
 2-64 Services Commission, in consultation with the commissioner of
 2-65 education, and with advice from the advisory committee as
 2-66 appropriate, shall adopt rules regarding the maintenance,
 2-67 administration, and disposal of an epinephrine auto-injector and
 2-68 opioid antagonist at a school campus subject to a policy adopted
 2-69 under Subsection (a) and the maintenance and administration of

3-1 asthma medicine at a school campus subject to a policy adopted under
3-2 Subsection (a-1). The rules must establish:

3-3 (1) the number of epinephrine auto-injectors and
3-4 opioid antagonists available at each campus;

3-5 (2) the amount of prescription asthma medicine
3-6 available at each campus;

3-7 (3) the process for each school district,
3-8 open-enrollment charter school, and private school to check the
3-9 inventory of epinephrine auto-injectors, opioid antagonists, and
3-10 asthma medicine at regular intervals for expiration and
3-11 replacement; and

3-12 (4) the amount of training required for school
3-13 personnel and school volunteers to administer an epinephrine
3-14 auto-injector or opioid antagonist.

3-15 (d) Each school district, open-enrollment charter school,
3-16 and private school that adopts a policy under Subsection (a) must
3-17 require that each campus have one or more school personnel members
3-18 or school volunteers authorized and trained to administer an
3-19 epinephrine auto-injector or an opioid antagonist, as applicable,
3-20 present during all hours the campus is open.

3-21 (e) The supply of epinephrine auto-injectors and opioid
3-22 antagonists at each campus must be stored in a secure location and
3-23 be easily accessible to school personnel and school volunteers
3-24 authorized and trained to administer an epinephrine auto-injector
3-25 or opioid antagonist. The supply of asthma medicine at each campus
3-26 must be stored in a secure location and be easily accessible to the
3-27 school nurse.

3-28 SECTION 8. Section 38.209, Education Code, is amended to
3-29 read as follows:

3-30 Sec. 38.209. REPORT ON ADMINISTERING EPINEPHRINE
3-31 AUTO-INJECTOR OR OPIOID ANTAGONIST. (a) Not later than the 10th
3-32 business day after the date a school personnel member or school
3-33 volunteer administers an epinephrine auto-injector or opioid
3-34 antagonist in accordance with a policy adopted under Section
3-35 38.208(a), the school shall report the information required under
3-36 Subsection (b) to:

3-37 (1) the school district, the charter holder if the
3-38 school is an open-enrollment charter school, or the governing body
3-39 of the school if the school is a private school;

3-40 (2) the physician or other person who prescribed the
3-41 epinephrine auto-injector or opioid antagonist; and

3-42 (3) the commissioner of state health services.

3-43 (b) The report required under this section must include the
3-44 following information:

3-45 (1) the age of the person who received the
3-46 administration of the epinephrine auto-injector or opioid
3-47 antagonist;

3-48 (2) whether the person who received the administration
3-49 of the epinephrine auto-injector or opioid antagonist was a
3-50 student, a school personnel member or school volunteer, or a
3-51 visitor;

3-52 (3) the physical location where the epinephrine
3-53 auto-injector or opioid antagonist was administered;

3-54 (4) the number of doses of epinephrine auto-injector
3-55 or opioid antagonist administered;

3-56 (5) the title of the person who administered the
3-57 epinephrine auto-injector or opioid antagonist; and

3-58 (6) any other information required by the commissioner
3-59 of education.

3-60 SECTION 9. Sections 38.210(a) and (b), Education Code, are
3-61 amended to read as follows:

3-62 (a) Each school district, open-enrollment charter school,
3-63 and private school that adopts a policy under Section 38.208(a) is
3-64 responsible for training school personnel and school volunteers in
3-65 the administration of an epinephrine auto-injector or opioid
3-66 antagonist.

3-67 (b) Training required under this section must:

3-68 (1) include information on:

3-69 (A) recognizing the signs and symptoms of

4-1 anaphylaxis or an opioid-related drug overdose;

4-2 (B) administering an epinephrine auto-injector

4-3 or opioid antagonist;

4-4 (C) implementing emergency procedures, if

4-5 necessary, after administering an epinephrine auto-injector or

4-6 opioid antagonist; and

4-7 (D) properly disposing of used or expired

4-8 epinephrine auto-injectors or opioid antagonists;

4-9 (2) be provided in a formal training session or

4-10 through online education; and

4-11 (3) be provided in accordance with the policy adopted

4-12 under Section 21.4515.

4-13 SECTION 10. The heading to Section 38.211, Education Code,

4-14 is amended to read as follows:

4-15 Sec. 38.211. PRESCRIPTION OF EPINEPHRINE AUTO-INJECTORS,
 4-16 OPIOID ANTAGONISTS, AND ASTHMA MEDICINE.

4-17 SECTION 11. Sections 38.211(a), (b), (c), (e), and (f),
 4-18 Education Code, are amended to read as follows:

4-19 (a) A physician or person who has been delegated
 4-20 prescriptive authority under Chapter 157, Occupations Code, may
 4-21 prescribe epinephrine auto-injectors, opioid antagonists, or
 4-22 asthma medicine in the name of a school district, open-enrollment
 4-23 charter school, or private school.

4-24 (b) A physician or other person who prescribes epinephrine
 4-25 auto-injectors, opioid antagonists, or asthma medicine under
 4-26 Subsection (a) shall provide the school district, open-enrollment
 4-27 charter school, or private school with a standing order for the
 4-28 administration of, as applicable:

4-29 (1) an epinephrine auto-injector to a person
 4-30 reasonably believed to be experiencing anaphylaxis; ~~[or]~~

4-31 (2) an opioid antagonist to a person reasonably
 4-32 believed to be experiencing an opioid-related drug overdose; or

4-33 (3) asthma medicine to a person reasonably believed to
 4-34 be experiencing a symptom of asthma and who has provided written
 4-35 notification and permission as required by Section 38.208(b-1).

4-36 (c) The standing order under Subsection (b) is not required
 4-37 to be patient-specific, and the epinephrine auto-injector, opioid
 4-38 antagonist, or asthma medicine may be administered to a person
 4-39 without a previously established physician-patient relationship.

4-40 (e) An order issued under this section must contain:

4-41 (1) the name and signature of the prescribing
 4-42 physician or other person;

4-43 (2) the name of the school district, open-enrollment
 4-44 charter school, or private school to which the order is issued;

4-45 (3) the quantity of epinephrine auto-injectors,
 4-46 opioid antagonists, or asthma medicine to be obtained and
 4-47 maintained under the order; and

4-48 (4) the date of issue.

4-49 (f) A pharmacist may dispense an epinephrine auto-injector,
 4-50 an opioid antagonist, or asthma medicine to a school district,
 4-51 open-enrollment charter school, or private school without
 4-52 requiring the name or any other identifying information relating to
 4-53 the user.

4-54 SECTION 12. Section 38.212, Education Code, is amended to
 4-55 read as follows:

4-56 Sec. 38.212. NOTICE TO PARENTS. (a) Each ~~[If a]~~ school
 4-57 district, open-enrollment charter school, or private school
 4-58 ~~[implements a policy under this subchapter, the district or school]~~
 4-59 shall provide written notice to a parent or guardian of each student
 4-60 enrolled in the district or school regarding any policies the
 4-61 district or school implements under this subchapter.

4-62 (b) Notice required under this section must be provided
 4-63 before a policy is implemented by the district or school and before
 4-64 the start of each school year.

4-65 SECTION 13. Section 38.215(a), Education Code, is amended
 4-66 to read as follows:

4-67 (a) A person who in good faith takes, or fails to take, any
 4-68 action under this subchapter is immune from civil or criminal
 4-69 liability or disciplinary action resulting from that action or

5-1 failure to act, including:

5-2 (1) issuing an order for epinephrine auto-injectors,
5-3 opioid antagonists, or asthma medicine;

5-4 (2) supervising or delegating the administration of an
5-5 epinephrine auto-injector, an opioid antagonist, or asthma
5-6 medicine;

5-7 (3) possessing, maintaining, storing, or disposing of
5-8 an epinephrine auto-injector, an opioid antagonist, or asthma
5-9 medicine;

5-10 (4) prescribing an epinephrine auto-injector, an
5-11 opioid antagonist, or asthma medicine;

5-12 (5) dispensing:

5-13 (A) an epinephrine auto-injector; [~~or~~]

5-14 (B) an opioid antagonist; or

5-15 (C) asthma medicine, provided that permission
5-16 has been granted as provided by Section 38.208(b-1);

5-17 (6) administering, or assisting in administering, an
5-18 epinephrine auto-injector, an opioid antagonist, or asthma
5-19 medicine, provided that permission has been granted as provided by
5-20 Section 38.208(b-1);

5-21 (7) providing, or assisting in providing, training,
5-22 consultation, or advice in the development, adoption, or
5-23 implementation of policies, guidelines, rules, or plans; or

5-24 (8) undertaking any other act permitted or required
5-25 under this subchapter.

5-26 SECTION 14. Section 403.505(d), Government Code, is amended
5-27 to read as follows:

5-28 (d) A state agency may use money appropriated from the
5-29 account only to:

5-30 (1) prevent opioid use disorder through
5-31 evidence-based education and prevention, such as school-based
5-32 prevention, early intervention, or health care services or programs
5-33 intended to reduce the risk of opioid use by school-age children;

5-34 (2) support efforts to prevent or reduce deaths from
5-35 opioid overdoses or other opioid-related harms, including through
5-36 increasing the availability or distribution of naloxone or other
5-37 opioid antagonists for use by:

5-38 (A) health care providers;

5-39 (B) [~~]~~ first responders;

5-40 (C) [~~]~~ persons experiencing an opioid overdose;

5-41 (D) [~~]~~ families;

5-42 (E) [~~]~~ schools, including under a policy adopted
5-43 under Subchapter E, Chapter 38, Education Code, regarding the
5-44 maintenance, administration, and disposal of opioid antagonists;

5-45 (F) community-based service providers;

5-46 (G) [~~]~~ social workers; [~~]~~ or

5-47 (H) other members of the public;

5-48 (3) create and provide training on the treatment of
5-49 opioid addiction, including the treatment of opioid dependence with
5-50 each medication approved for that purpose by the United States Food
5-51 and Drug Administration, medical detoxification, relapse
5-52 prevention, patient assessment, individual treatment planning,
5-53 counseling, recovery supports, diversion control, and other best
5-54 practices;

5-55 (4) provide opioid use disorder treatment for youths
5-56 and adults, with an emphasis on programs that provide a continuum of
5-57 care that includes screening and assessment for opioid use disorder
5-58 and co-occurring behavioral health disorders, early intervention,
5-59 contingency management, cognitive behavioral therapy, case
5-60 management, relapse management, counseling services, and
5-61 medication-assisted treatments;

5-62 (5) provide patients suffering from opioid dependence
5-63 with access to all medications approved by the United States Food
5-64 and Drug Administration for the treatment of opioid dependence and
5-65 relapse prevention following opioid detoxification, including
5-66 opioid agonists, partial agonists, and antagonists;

5-67 (6) support efforts to reduce the abuse or misuse of
5-68 addictive prescription medications, including tools used to give
5-69 health care providers information needed to protect the public from

6-1 the harm caused by improper use of those medications;
6-2 (7) support treatment alternatives that provide both
6-3 psychosocial support and medication-assisted treatments in areas
6-4 with geographical or transportation-related challenges, including
6-5 providing access to mobile health services and telemedicine,
6-6 particularly in rural areas;

6-7 (8) address:
6-8 (A) the needs of persons involved with criminal
6-9 justice; and

6-10 (B) rural county unattended deaths; or
6-11 (9) further any other purpose related to opioid
6-12 abatement authorized by appropriation.

6-13 SECTION 15. This Act applies beginning with the 2023-2024
6-14 school year.

6-15 SECTION 16. This Act takes effect immediately if it
6-16 receives a vote of two-thirds of all the members elected to each
6-17 house, as provided by Section 39, Article III, Texas Constitution.
6-18 If this Act does not receive the vote necessary for immediate
6-19 effect, this Act takes effect September 1, 2023.

6-20 * * * * *