

BILL ANALYSIS

Senate Research Center
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C.S.S.B. 1462
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Health & Human Services
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Committee Report (Substituted)

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

Approximately 80 percent of opioid overdose deaths are unintended. At highest risk are the elderly and medically ill who are already medically compromised (this is typically not someone addicted to opioids, but taking opioids for pain as prescribed by a medical doctor). As most of these overdoses are witnessed (family and friends often say they heard the victim “snoring loudly”), there is frequently the opportunity to intervene. The drug naloxone, an opioid antagonist, offers a rapid and easily administered approach to quickly reverse an opioid overdose. While previously only available to hospitals and first responders, there has been a concerted effort towards getting naloxone out into the community—particularly to the friends and family of patients taking opioids on a regular basis.

C.S.S.B. 1462 permits the prescription and dispensing of an opioid antidote to a person at risk of experiencing an overdose, or to a family member or friend, and the administration of the antidote by those people.

Persons who act in good faith and with reasonable care in prescribing, dispensing, or administering the antidote, or opt not to, do not face civil or criminal liability under the bill.

C.S.S.B. 1462 amends current law relating to the prescription, administration, and possession of certain opioid antagonists for the treatment of suspected opioid overdoses.

RULEMAKING AUTHORITY

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Chapter 483, Health and Safety Code, by adding Subchapter E, as follows:

SUBCHAPTER E. OPIOID ANTAGONISTS

Sec. 483.101. DEFINITIONS. Defines "emergency services personnel," "opioid antagonist," "opioid-related drug overdose," and "prescriber" in this subchapter.

Sec. 483.102. PRESCRIPTION OF OPIOID ANTAGONIST; STANDING ORDER. (a) Authorizes a prescriber to, directly or by standing order, prescribe an opioid antagonist to:

- (1) a person at risk of experiencing an opioid-related drug overdose; or
- (2) a family member, friend, or other person in a position to assist a person described by Subdivision (1).

(b) Provides that a prescription issued under this section is considered as issued for a legitimate medical purpose in the usual course of professional practice.

(c) Provides that a prescriber who, acting in good faith and with reasonable care, prescribes or does not prescribe an opioid antagonist is not subject to any criminal or civil liability or any professional disciplinary action for:

(1) prescribing or failing to prescribe the opioid antagonist; or

(2) if the prescriber chooses to prescribe an opioid antagonist, any outcome resulting from the eventual administration of the opioid antagonist.

Sec. 483.103. DISPENSING OF OPIOID ANTAGONIST. (a) Authorizes a pharmacist to dispense an opioid antagonist under a valid prescription to:

(1) a person at risk of experiencing an opioid-related drug overdose; or

(2) a family member, friend, or other person in a position to assist a person described by Subdivision (1).

(b) Provides that a prescription filled under this section is considered as filled for a legitimate medical purpose in the usual course of professional practice.

(c) Provides that a pharmacist who, acting in good faith and with reasonable care, dispenses or does not dispense an opioid antagonist under a valid prescription is not subject to any criminal or civil liability or any professional disciplinary action for:

(1) dispensing or failing to dispense the opioid antagonist; or

(2) if the pharmacist chooses to dispense an opioid antagonist, any outcome resulting from the eventual administration of the opioid antagonist.

Sec. 483.104. DISTRIBUTION OF OPIOID ANTAGONIST; STANDING ORDER. Authorizes a person or organization acting under a standing order issued by a prescriber to store an opioid antagonist and distribute an opioid antagonist, provided the person or organization does not request or receive compensation for storage or dispensation.

Sec. 483.105. POSSESSION OF OPIOID ANTAGONIST. Authorizes any person to possess an opioid antagonist, regardless of whether the person holds a prescription for the opioid antagonist.

Sec. 483.106. ADMINISTRATION OF OPIOID ANTAGONIST. (a) Provides that a person who, acting in good faith and with reasonable care, administers or does not administer an opioid antagonist to another person whom the person believes is suffering an opioid-related drug overdose is not subject to criminal prosecution, sanction under any professional licensing statute, or civil liability, for an act or omission resulting from the administration of the opioid antagonist.

(b) Authorizes emergency services personnel to administer an opioid antagonist to a person who appears to be suffering an opioid-related drug overdose, as clinically indicated.

Sec. 483.107. CONFLICT OF LAW. Provides that, to the extent of a conflict between this subchapter and another law, this subchapter controls.

SECTION 2. Provides that the change in law made by this Act relating to conduct that is grounds for imposition of a disciplinary sanction applies only to conduct that occurs on or after September 1, 2015. Makes application of this Act prospective.

SECTION 3. Provides that the change in law made by this Act relating to conduct that is the basis for civil liability applies only to conduct that occurs on or after September 1, 2015. Makes application of this Act prospective.

SECTION 4. Provides that the change in law made by this Act relating to conduct that constitutes a criminal offense applies only to an offense committed on or after September 1, 2015. Provides that, for purposes of this section, an offense is committed before September 1, 2015, if any element of the offense occurs before that date. Makes application of this Act prospective.

SECTION 5. Effective date: September 1, 2015.