By:  Menéndez, et al. S.B. No. 629

A BILL TO BE ENTITLED

AN ACT

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

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

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

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

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

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

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

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

Sec. 38.202.  STOCK MEDICINE ADVISORY COMMITTEE: ESTABLISHMENT AND COMPOSITION.

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

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

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

(1)  a majority of the members are physicians with expertise in treating anaphylaxis or opioid-related drug overdoses, including physicians who specialize in the fields of pediatrics, allergies, asthma, drug use disorders, and immunology;

(2)  at least one member is a registered nurse employed by a school district, open-enrollment charter school, or private school as a school nurse;

(3)  at least one member is an employee of a general academic teaching institution; and

(4)  at least one member is an employee of a public junior college or a public technical institute.

SECTION 5.  Section 38.207, Education Code, is amended to read as follows:

Sec. 38.207.  ADVISORY COMMITTEE: DUTIES. The advisory committee shall advise the commissioner of state health services on:

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

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

(3)  a plan for:

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

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

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

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

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

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

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

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

(b)  If a policy is adopted under Subsection (a), the policy, as applicable:

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

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

(c)  The executive commissioner of the Health and Human Services Commission, in consultation with the commissioner of education, and with advice from the advisory committee as appropriate, shall adopt rules regarding the maintenance, administration, and disposal of an epinephrine auto-injector and opioid antagonist at a school campus subject to a policy adopted under Subsection (a) and the maintenance and administration of asthma medicine at a school campus subject to a policy adopted under Subsection (a-1). The rules must establish:

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

(2)  the amount of prescription asthma medicine available at each campus;

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

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

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

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

SECTION 8.  Section 38.209, Education Code, is amended to read as follows:

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

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

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

(3)  the commissioner of state health services.

(b)  The report required under this section must include the following information:

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

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

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

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

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

(6)  any other information required by the commissioner of education.

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

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

(b)  Training required under this section must:

(1)  include information on:

(A)  recognizing the signs and symptoms of anaphylaxis or an opioid-related drug overdose;

(B)  administering an epinephrine auto-injector or opioid antagonist;

(C)  implementing emergency procedures, if necessary, after administering an epinephrine auto-injector or opioid antagonist; and

(D)  properly disposing of used or expired epinephrine auto-injectors or opioid antagonists;

(2)  be provided in a formal training session or through online education; and

(3)  be provided in accordance with the policy adopted under Section 21.4515.

SECTION 10.  The heading to Section 38.211, Education Code, is amended to read as follows:

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

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

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

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

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

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

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

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

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

(1)  the name and signature of the prescribing physician or other person;

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

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

(4)  the date of issue.

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

SECTION 12.  Section 38.212, Education Code, is amended to read as follows:

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

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

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

(a)  A person who in good faith takes, or fails to take, any action under this subchapter is immune from civil or criminal liability or disciplinary action resulting from that action or failure to act, including:

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

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

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

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

(5)  dispensing:

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

(B)  an opioid antagonist; or

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

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

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

(8)  undertaking any other act permitted or required under this subchapter.

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

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

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

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

(A)  health care providers;

(B)  [~~,~~] first responders;

(C)  [~~,~~] persons experiencing an opioid overdose;

(D)  [~~,~~] families;

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

(F)  community-based service providers;

(G)  [~~,~~] social workers;[~~,~~] or

(H)  other members of the public;

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

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

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

(6)  support efforts to reduce the abuse or misuse of addictive prescription medications, including tools used to give health care providers information needed to protect the public from the harm caused by improper use of those medications;

(7)  support treatment alternatives that provide both psychosocial support and medication-assisted treatments in areas with geographical or transportation-related challenges, including providing access to mobile health services and telemedicine, particularly in rural areas;

(8)  address:

(A)  the needs of persons involved with criminal justice; and

(B)  rural county unattended deaths; or

(9)  further any other purpose related to opioid abatement authorized by appropriation.

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

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