

101ST GENERAL ASSEMBLY State of Illinois 2019 and 2020 HB3833

by Rep. Grant Wehrli

SYNOPSIS AS INTRODUCED:

New Act

Creates the Opioid Overdose Reduction Act. Provides that the Act may be referred to as Alex's Law. Defines "authorized entity" as a community-based health disease prevention or social service program. Provides that a health care practitioner may prescribe opioid antagonists in the name of an authorized entity. Provides that an employee or agent of an authorized entity or other individual who has completed specified training may provide and administer an opioid antagonist to an individual on the property of the authorized entity whom the employee, agent, or other individual believes in good faith is experiencing an opioid overdose, regardless of whether the individual has a prescription for an opioid antagonist. Contains provisions releasing health care practitioners from liability for prescribing or dispensing an opioid antagonists to certain persons. Contains provisions releasing persons who are not otherwise licensed to administer an opioid antagonist from liability for administering an opioid antagonist without fee if the person believes in good faith that another person is experiencing a drug overdose. Provides that a person who, in good faith, seeks or obtains emergency medical assistance for someone experiencing an opioid overdose shall not be charged or prosecuted for possession of a controlled, counterfeit, or look-alike substance or a controlled substance analog if certain conditions are met. Provides that a person who is experiencing an overdose shall not be charged or prosecuted for possession of a controlled, counterfeit, or look-alike substance or a controlled substance analog if evidence for the possession charge was acquired as a result of the person seeking or obtaining emergency medical assistance. Provides that a person's pretrial release, probation, furlough, supervised release, or parole shall not be revoked based on an incident for which the person would be immune from prosecution under the provisions.

LRB101 12127 CPF 59706 b

1 AN ACT concerning health.

Be it enacted by the People of the State of Illinois, represented in the General Assembly:

- 4 Section 1. Short title; references to Act.
- 5 (a) Short title. This Act may be cited as the Opioid 6 Overdose Reduction Act.
- 7 (b) References to Act. This Act may be referred to as 8 Alex's Law.
- 9 Section 5. Definitions. As used in this Act:
- "Administer" means to directly apply an opioid antagonist to the body of an individual.
- "Authorized entity" means a community-based health disease prevention or social service program. The Department shall, by rule, determine what constitutes a community-based health disease prevention or social service program under this definition.
- "Department" means the Department of Public Health.
- "Health care practitioner" means a physician licensed to
 practice medicine in all its branches under the Medical
 Practice Act of 1987, a physician assistant under the Physician
 Assistant Practice Act of 1987 with prescriptive authority, or
 an advanced practice registered nurse with prescribing
 authority under Article 65 of the Nurse Practice Act.

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- "Opioid antagonist" means a drug that binds to opioid receptors and blocks or inhibits the effect of opioids acting on those receptors, including, but not limited to, naloxone hydrochloride or any other similarly acting drug approved by the U.S. Food and Drug Administration.
- 6 "Pharmacist" has the meaning given to that term under 7 subsection (k-5) of Section 3 of the Pharmacy Practice Act.
- 8 "Undesignated opioid antagonist" means an opioid 9 antagonist prescribed in the name of an authorized entity.
- Section 10. Prescription to authorized entity; use; training.
 - (a) A health care practitioner may prescribe opioid antagonists in the name of an authorized entity for use in accordance with this Act, and pharmacists and health care practitioners may dispense opioid antagonists pursuant to a prescription issued in the name of an authorized entity. Such prescriptions shall be valid for a period of 2 years.
 - (b) An authorized entity may acquire and stock a supply of undesignated opioid antagonists pursuant to a prescription issued under subsection (a) of this Section. Such undesignated opioid antagonists shall be stored in a location readily accessible in an emergency and in accordance with the instructions for use of the opioid antagonists. The Department may establish any additional requirements an authorized entity must follow under this Act.

- (c) An employee or agent of an authorized entity or other individual who has completed training under subsection (d) of this Section may:
 - (1) provide an opioid antagonist to any individual on the property of the authorized entity whom the employee, agent, or other individual believes in good faith is experiencing an opioid overdose, or to the parent, guardian, or caregiver of such individual, for immediate administration, regardless of whether the individual has a prescription for an opioid antagonist; or
 - (2) administer an opioid antagonist to any individual on the property of the authorized entity whom the employee, agent, or other individual believes in good faith is experiencing an opioid overdose, regardless of whether the individual has a prescription for an opioid antagonist.
 - (d) An employee, agent, or other individual must complete an opioid overdose training program before he or she is able to provide or administer an opioid antagonist under this Section. Such training shall be valid for a period of 2 years and shall be conducted by a nationally recognized organization experienced in training laypersons in emergency health treatment. The Department shall include links to training providers' websites on its website. Training shall include, but is not limited to:
 - (1) how to recognize signs and symptoms of an opioid overdose;

1	(2) how to administer an opioid antagonist; and
2	(3) a test demonstrating competency of the knowledge
3	required to recognize opioid overdose and administer an
4	opioid antagonist.
5	Training may also include, but is not limited to:
6	(A) a review of high-risk areas on the authorized
7	entity's property and its related facilities;
8	(B) emergency follow-up procedures; and
9	(C) other criteria as determined in rules adopted
10	under this Act.

Training may be conducted either online or in person. The Department shall approve training programs and list permitted training programs on the Department's website.

Section 15. Costs. Whichever entity initiates the process of obtaining opioid antagonists and providing training to personnel for carrying and administering opioid antagonists shall pay for the costs of the opioid antagonists.

Section 20. Limitations. The use of an opioid antagonist in accordance with the requirements of this Act does not constitute the practice of medicine or any other profession that requires medical licensure. Nothing in this Act shall limit the amount of opioid antagonists that an authorized entity or individual may carry or maintain a supply of.

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- 1 Section 25. Opioid antagonist possession and 2 administration; release from liability.
 - (a) A health care professional who, acting in good faith, directly or by standing order, prescribes or dispenses an opioid antagonist to: (1) a patient who, in the judgment of the health care professional, is capable of administering the opioid antagonist in an emergency, or (2) a person who is not at risk of opioid overdose but who, in the judgment of the health care professional, may be in a position to assist another individual during an opioid-related drug overdose and who has received basic instruction on how to administer an opioid antagonist shall not, as a result of his or her acts or omissions, be subject to: (i) any disciplinary or other adverse action under the Medical Practice Act of 1987, the Physician Assistant Practice Act of 1987, the Nurse Practice Act, the Pharmacy Practice Act, or any other professional licensing statute or (ii) any criminal liability, except for willful and wanton misconduct.
 - (b) A person who is not otherwise licensed to administer an opioid antagonist may in an emergency administer without fee an opioid antagonist if the person believes in good faith that another person is experiencing an opioid overdose. The person shall not, as a result of his or her acts or omissions, be (i) liable for any violation of the Medical Practice Act of 1987, the Physician Assistant Practice Act of 1987, the Nurse Practice Act, the Pharmacy Practice Act, or any other

- 1 professional licensing statute, or (ii) subject to any criminal
- 2 prosecution or civil liability, except for willful and wanton
- 3 misconduct.

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- Section 35. Person seeking medical assistance for an opioid overdose; immunity from prosecution.
 - (a) A person who, in good faith, seeks or obtains emergency medical assistance for someone experiencing an opioid overdose shall not be charged or prosecuted for possession of a controlled, counterfeit, or look-alike substance or a controlled substance analog if (i) evidence for the possession charge was acquired as a result of the person seeking or obtaining emergency medical assistance and (ii) the person who seeks or obtains the medical assistance is the first person to seek or obtain the assistance, provides a name and contact information, remains on the scene until assistance arrives or is provided, and cooperates with the authorities.
 - (b) A person who is experiencing an opioid overdose shall not be charged or prosecuted for possession of a controlled, counterfeit, or look-alike substance or a controlled substance analog if evidence for the possession charge was acquired as a result of the person seeking or obtaining emergency medical assistance.
 - (c) A person's pretrial release, probation, furlough, supervised release, or parole shall not be revoked based on an incident for which the person would be immune from prosecution

l under	this	Section.
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- (d) Nothing in this Section shall:
- (1) be construed to bar the admissibility of any evidence obtained in connection with the investigation and prosecution of other crimes or violations committed by a person who otherwise qualifies for limited immunity under this Section;
 - (2) preclude prosecution of a person on the basis of evidence obtained from an independent source;
 - (3) be construed to limit, modify, or remove any immunity from liability currently available to public entities, public employees by law, or prosecutors; or
 - (4) prevent probation officers from conducting drug testing of persons on pretrial release, probation, furlough, supervised release, or parole.
- Section 85. Rulemaking. The Department shall adopt any rules necessary to implement and administer this Act.