

DRUG OVERDOSE: IMMUNITY FOR ADMINISTRATION OF OPIOID ANTAGONIST

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Senate Bill 857 (Substitute S-2)
Sponsor: Sen. Tonya Schuitmaker
House Committee: Judiciary
Senate Committee: Judiciary

(Enacted as Public Act 314 of 2014)

Complete to 9-15-14

A SUMMARY OF SENATE BILL 857 AS REPORTED BY HOUSE COMMITTEE WITHOUT AMENDMENT 9-11-14

The bill provides civil immunity under the Good Samaritan Law for a person who, under certain circumstances, administers an opioid antagonist to a person experiencing an overdose from an opioid such as heroin or oxycodone.

The bill is similar in content to House Bill 5406, which has already passed the House.

Senate Bill 857 adds a new section to the Good Samaritan Law, PA 17 of 1963, which relieves certain persons from civil liability while rendering emergency care in certain situations (MCL 691.1503, proposed). The bill specifies that an individual who has a "good faith" belief that another individual is suffering the immediate effects of an opioid-related overdose and administers an opioid antagonist to that individual would not be liable in a civil action for damages resulting from the administration of the opioid antagonist. The exemption does not apply under either of the following:

- If the individual who administers the opioid antagonist is a physician, physician's assistant, registered nurse, or licensed practical nurse and the opioid antagonist is administered in a hospital.
- If the conduct of the individual administering the opioid antagonist "is willful or wanton misconduct."

"Opioid antagonist" would mean naloxone hydrochloride or any other similarly acting and equally safe drug approved by the federal Food and Drug Administration for the treatment of drug overdose.

"Opioid-related overdose" is defined as "a condition, including, but not limited to, extreme physical illness, decreased level of consciousness, respiratory depression, coma, or death, that results from the consumption or use of an opioid or another substance with which an opioid was combined or that a layperson would reasonably believe to be an opioid-related overdose that requires medical assistance."

BACKGROUND INFORMATION:

According to the National Institute on Drug Abuse, *Opioids are medications that relieve pain. They reduce the intensity of pain signals reaching the brain and affect those brain areas controlling emotion, which diminishes the effects of a painful stimulus. Medications that fall within this class include hydrocodone (e.g., Vicodin), oxycodone (e.g., OxyContin, Percocet), morphine (e.g., Kadian, Avinza), codeine, and related drugs. Heroin is an opioid.*

FISCAL IMPACT:

Senate Bill 857 as passed by the Senate has no direct fiscal implications for the state or for local units of government.

BRIEF DISSUSSION:

Heroin and other narcotic use in the state has been increasing over the past several years, and as a result, so have drug overdoses. Reportedly, there were more deaths from drug overdoses in 2011 than from vehicle accidents. Medications known as "opioid antagonists" have the ability to reverse the effects of a narcotic overdose. At least 18 states and the District of Columbia have laws allowing medical professionals to prescribe and administer such drugs (primarily, naloxone, or Narcan). Apparently, there have been tens of thousands of successful overdose reversals. It has been recommended that Michigan follow the lead of these other states and allow for doctors to prescribe; pharmacists to dispense and for first responders, family members, medical personnel, friends of addicts, and other individuals such as staff at residential treatment facilities to administer naloxone to a person in the throes of a drug overdose. Supporters say the ability to save a person from an otherwise deadly overdose may enable the person to live long enough to "kick" the addiction and once again live a productive life.

POSITIONS:

The Michigan Psychiatric Society indicated support for the bill. (9-11-14)

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