



Senate

General Assembly

File No. 540

January Session, 2003

Substitute Senate Bill No. 1144

Senate, April 24, 2003

The Committee on Public Health reported through SEN. MURPHY of the 16th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

AN ACT CONCERNING THE PREVENTION OF DEATHS FROM DRUG OVERDOSE.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (*Effective July 1, 2003*) The Commissioner of Public Health
2 shall publish a report on state-wide drug overdose trends that reviews
3 state death rates from available data to ascertain changes in the causes
4 or rates of fatal and nonfatal drug overdoses for the preceding period
5 of not less than three years. The report shall also provide information
6 on interventions that would be effective in reducing the rate of fatal or
7 nonfatal drug overdoses. The report shall include: (1) Trends in drug
8 overdose death rates; (2) suggested improvements in data collection;
9 and (3) a description of interventions effective in reducing the rate of
10 fatal or nonfatal drug overdoses. The commissioner shall report, in
11 accordance with section 11-4a of the general statutes, on or before
12 January 1, 2004, to the Governor and the joint standing committee of
13 the General Assembly having cognizance of matters relating to public
14 health.

15 Sec. 2. (NEW) (*Effective October 1, 2003*) A licensed health care
16 professional who is permitted by law to prescribe an opioid antagonist
17 may, if acting with reasonable care, prescribe, dispense, distribute or
18 administer an opioid antagonist to a drug user in need of such
19 intervention without being liable for damages to such person in a civil
20 action or subject to criminal prosecution. For purposes of this section,
21 "opioid antagonist" means naloxone hydrochloride or any other
22 similarly acting and equally safe drug approved by the federal Food
23 and Drug Administration for the treatment of drug overdose.

This act shall take effect as follows:	
Section 1	<i>July 1, 2003</i>
Sec. 2	<i>October 1, 2003</i>

PH *Joint Favorable Subst.*

The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either House thereof for any purpose:

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Type	FY 04 \$	FY 05 \$
Public Health, Dept.	GF - Cost	\$35,000	\$35,000

Note: GF=General Fund

Municipal Impact: None

Explanation

The Department of Public Health will incur an annual cost of approximately \$35,000 to retain consultant services needed to assist in the compilation of data for inclusion in the required annual report on drug overdose trends and other related information specified in the bill. These services would be needed because DPH does not have in-house expertise in the field of substance abuse that would be needed to adequately analyze drug overdose trends, identify and describe effective interventions to reduce the rate of drug overdoses and suggest improvements in data collection.

OLR Bill Analysis

sSB 1144

AN ACT CONCERNING THE PREVENTION OF DEATHS FROM DRUG OVERDOSE**SUMMARY:**

This bill allows those licensed health care practitioners who can prescribe an opioid antagonist to prescribe, dispense, distribute, or administer it to a drug user in need of intervention without being civilly or criminally liable. Under the bill, an "opioid antagonist" is naloxone hydrochloride or any other similarly acting and equally safe drug approved by the federal Food and Drug Administration (FDA) for treatment of a drug overdose. By law, physicians and surgeons, physician assistants, dentists, advanced practice registered nurses, and podiatrists may prescribe them.

The bill requires the Department of Public Health (DPH) to publish a report on statewide fatal and nonfatal drug overdoses for at least the past three years. The report must include information on interventions that would reduce overdoses and also address: (1) trends in drug overdose death rates, (2) suggested data collection improvements, and (3) a description of other interventions effective in reducing fatal and nonfatal drug overdoses. DPH must report by January 1, 2004 to the governor and the Public Health committee.

EFFECTIVE DATE: The provision on administering an opioid antagonist takes effect October 1, 2003; the reporting provision on July 1, 2003.

BACKGROUND***Opioid Antagonist***

Opioid antagonists "sit" on the brain's opioid receptor sites, displacing any opioids (such as heroin), reducing cravings for opiates, and blocking their euphoric and other effects. Some opioid antagonists, like naloxone, when given after a narcotic overdose rapidly reverse the symptoms of overdose.

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute
Yea 22 Nay 0