Offered by:
SEN. GERRATANA, 6th Dist.
SEN. SOMERS, 18th Dist.
SEN. KENNEDY, 12th Dist.
REP. STEINBERG, 136th Dist.
REP. BETTS, 78th Dist.

To: Subst. Senate Bill No. 511       File No. 410       Cal. No. 241

"AN ACT CONCERNING OPIOIDS."

1     Strike everything after the enacting clause and substitute the following in lieu thereof:

2     "Section 1. (Effective from passage) (a) The Alcohol and Drug Policy Council established under section 17a-667 of the general statutes shall convene a working group to evaluate methods of combating the opioid epidemic in the state. The working group shall investigate and advise the cochairpersons of the council regarding the following:

3     (1) The number of persons annually who receive services from each methadone treatment program funded by contract with the Department of Mental Health and Addiction Services, the rate at which such persons relapse and the number of such persons who die as the result of a drug overdose while participating in such program;
(2) The availability of opioid antagonists, as defined in section 17a-714a of the general statutes, at each such methadone treatment program and each state-funded treatment program for persons with substance use disorder;

(3) The advantages and disadvantages of a licensed mental health professional at each such methadone treatment program and each treatment program for persons with substance use disorder being permitted to dispense an opioid antagonist directly to a person at the time of such person's discharge from such program without the need for such person to obtain the opioid antagonist from a pharmacy under section 20-633c or 20-633d of the general statutes;

(4) Whether a nonfatal drug overdose at a hospital or outpatient surgical facility should qualify as an adverse event under section 19a-127n of the general statutes;

(5) The role of health carriers, as defined in section 19a-755b of the general statutes, in shortening a person's stay at a treatment program for persons with substance use disorder;

(6) The availability of federal funds to supply emergency medical services personnel in the state with opioid antagonists and provide training to such personnel in the administration of opioid antagonists;

(7) The development and implementation of a state-wide uniform prehospital data reporting system to capture the demographics of prehospital administration or use of an opioid antagonist and opioid reversal outcomes as a result of such administration or use;

(8) The development of a state-wide strategy to (A) identify potential sources of federal funding for treatment and prevention of opioid use disorders, and (B) maximize federal reimbursement and grant funding for state initiatives in combating the opioid epidemic in the state; and

(9) Whether the use of physical therapy, acupuncture, massage and
chiropractic care can reduce the need for opioid drugs, as defined in section 20-14o of the general statutes, in mitigating a patient's chronic pain.

(b) On or before January 1, 2019, the working group shall report its findings to the cochairpersons of the Alcohol and Drug Policy Council. The cochairpersons shall report, in accordance with the provisions of section 11-4a of the general statutes, to the joint standing committee of the General Assembly having cognizance of matters relating to public health regarding such findings and any recommendations for legislation.

Sec. 2. (NEW) (Effective July 1, 2018) (a) On and after January 1, 2019, any hospital licensed pursuant to chapter 368v of the general statutes or emergency medical services personnel, as defined in section 20-206jj of the general statutes, that treats a patient for an overdose of an opioid drug, as defined in section 20-14o of the general statutes, shall report such overdose to the Department of Public Health in a form and manner prescribed by the Commissioner of Public Health.

(b) On or before January 1, 2020, the Department of Public Health shall provide the data reported pursuant to subsection (a) of this section to the municipal health department or district department of health that has jurisdiction over the location in which such overdose occurred, or, if such location is unknown, the location in which the hospital or emergency medical services personnel treated the patient, as the department, in its discretion, deems necessary to develop preventive initiatives pursuant to subsection (c) of this section.

(c) On or before July 1, 2020, each municipal health department and district department of health shall use the data provided pursuant to subsection (b) of this section to develop preventive initiatives on a local level to address the incidences of opioid, heroin and other drug overdoses occurring throughout the state.

(d) Data reported to the Department of Public Health by a hospital or emergency medical services personnel shall at all times remain
This act shall take effect as follows and shall amend the following sections:

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<thead>
<tr>
<th>Section</th>
<th>Effect Date</th>
<th>New Section</th>
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<tbody>
<tr>
<td>Section 1</td>
<td>from passage</td>
<td>New section</td>
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<tr>
<td>Sec. 2</td>
<td>July 1, 2018</td>
<td>New section</td>
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