Bill No.: HB-7190
Title: AN ACT EXTENDING GOOD SAMARITAN PROTECTIONS FOR PERSONS OR ENTITIES THAT INCLUDE AN OPIOID ANTAGONIST WITHIN A CABINET CONTAINING AN AUTOMATIC EXTERNAL DEFIBRILLATOR.
Vote Date: 4/12/2019
Vote Action: Joint Favorable
PH Date: 2/27/2019
File No.: 781

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SPONSORS OF BILL:
JUDICIARY COMMITTEE

REASONS FOR BILL:
A few years ago, legislation was passed to protect people who administer naloxone or Narcan protecting them from civil or criminal prosecution. The proposed language in this bill would extend that protection to entities.

RESPONSE FROM ADMINISTRATION/AGENCY:
CONNECTICUT COMMISSION ON WOMEN, CHILDREN AND SENIORS, STEVEN HERNANDEZ, EXECUTIVE DIRECTOR: Supports this bill. Connecticut is among the top ten states with the highest rates of opioid-related overdose deaths. Through 2016, the death rate increased by more than fourfold from 5.7 per 100,000 persons to 24.5 deaths per 100,000 persons. Opioid antagonists are an essential tool to treat these drug overdoses and prevent death. Thus far, Connecticut has succeeded in passing Good Samaritan laws in relation to prescribing or administering opioid antagonists. This trend needs to continue.

NATURE AND SOURCES OF SUPPORT:
ACT AIDS CONNECTICUT, SHAWN M. LANG, DEPUTY DIRECTOR: Supports this bill. A few years ago, legislation was passed to protect people who administer naloxone or Narcan protecting them from civil or criminal prosecution. The proposed language in the bill would extend that protection to entities. We know from experience that the more widely available
naloxone is, the better the outcomes are for people who have or use opiates. We’ve been training our syringe services clients how to administer naloxone, and they’ve reversed over 300 overdoses out in the community.

**NATURE AND SOURCES OF OPPOSITION:**

**CONNECTICUT TRIAL LAWYERS ASSOCIATION:** Opposes this legislation. CTLA respectfully opposes this legislation because the protection sought in this bill already exist in another statute, CGS Section 17a-714a. That section is as follows, “(d) Any person who in good faith believes that another person is experiencing an opioid-related drug overdose may, if acting with reasonable care, administer an opioid antagonist to such other person. Any person other than a licensed health care professional acting in the ordinary course of such person’s employment, who administers an opioid antagonist in accordance with this subsection shall not be liable for damages in a civil action or subject to criminal prosecution with respect to the administration of such opioid antagonist.”

Reported by: George Marinelli May 7, 2019