



General Assembly

**Substitute Bill No. 5291**

February Session, 2024



**AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S  
RECOMMENDATIONS REGARDING IMPROVED OPIOID  
MONITORING.**

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

1 Section 1. Section 19a-127q of the general statutes is repealed and the  
2 following is substituted in lieu thereof (*Effective October 1, 2024*):

3 (a) On and after January 1, 2019, any hospital licensed pursuant to  
4 chapter 368v or emergency medical services personnel, as defined in  
5 section 20-206jj, that treats a patient for an overdose of an opioid drug,  
6 as defined in section 20-14o, shall report such overdose to the  
7 Department of Public Health in a form and manner prescribed by the  
8 Commissioner of Public Health.

9 (b) On and after January 1, 2020, any hospital licensed pursuant to  
10 chapter 368v that treats a patient for a nonfatal overdose of an opioid  
11 drug, as defined in section 20-14o, shall administer a mental health  
12 screening or assessment of the patient if medically appropriate, and  
13 provide the results of such screening or assessment to the patient if  
14 medically appropriate, or to the patient's parent, guardian or legal  
15 representative, as applicable, if medically appropriate.

16 (c) On or before January 1, 2020, the Department of Public Health

17 shall provide the data reported pursuant to subsection (a) of this section  
18 to the municipal health department or district department of health that  
19 has jurisdiction over the location in which such overdose occurred, or,  
20 if such location is unknown, the location in which the hospital or  
21 emergency medical services personnel treated the patient, as the  
22 department, in its discretion, deems necessary to develop preventive  
23 initiatives.

24 (d) (1) From January 1, 2025, until August 31, 2028, any hospital  
25 licensed pursuant to chapter 368v that treats a patient for a nonfatal  
26 overdose of an opioid drug, as defined in section 20-14o, shall  
27 administer, with the patient's consent, a toxicology screening of the  
28 patient, if medically appropriate. Such screening shall include, but need  
29 not be limited to, screening for opiates, opioids, benzodiazepines,  
30 cannabinoids, methadone, cocaine, gabapentin, xylazine and any other  
31 substance deemed appropriate by the commissioner. Any hospital that  
32 administers a toxicology screening pursuant to the provisions of this  
33 subsection shall report the screening results to the Department of Public  
34 Health in a form and manner prescribed by the commissioner.

35 (2) On or before January 1, 2026, and annually thereafter, until  
36 January 1, 2029, the commissioner shall report, in accordance with the  
37 provisions of section 11-4a, to the joint standing committee of the  
38 General Assembly having cognizance of matters relating to public  
39 health regarding toxicology screening results obtained pursuant to the  
40 provisions of this subsection. Such report shall include, but need not be  
41 limited to, (A) the identification and analysis of any trends identified as  
42 a result of toxicology screening results obtained pursuant to the  
43 provisions of this subsection, (B) the identification of any benefits  
44 experienced by patients seeking emergency department care for  
45 nonfatal overdoses as a result of the toxicology screening results  
46 obtained pursuant to this subsection, and (C) a recommendation  
47 regarding whether toxicology screening reporting performed pursuant  
48 to this subsection should continue after August 31, 2028.

49 [(d)] (e) Data reported to the Department of Public Health by a

