

HCS HB 538 -- NALOXONE PRESCRIPTIONS

SPONSOR: Lynch

COMMITTEE ACTIONS: Voted "Do Pass with Amendments" by the Standing Committee on Public Safety and Emergency Preparedness by a vote of 8 to 0. Voted "Do Pass with HCS" by the Select Committee on State and Local Governments by a vote of 10 to 0.

This bill allows any licensed pharmacist or pharmacy technician to sell and dispense intranasal naloxone under physician protocol to any person who is at least 18 years old with a valid Missouri identification or driver license. The licensed pharmacist or pharmacy technician must record specified information pertaining to the sale. A licensed pharmacist or pharmacy technician must not be subject to any criminal or civil liability or any professional disciplinary action for prescribing or dispensing the opioid antagonist and the appropriate device to administer the drug or any outcome resulting from the administration of the opioid antagonist when he or she acts in good faith and with reasonable care.

The bill specifies that it must be permissible for any individual to possess an opioid antagonist. Any person who administers an opioid antagonist to another person must immediately contact emergency personnel. The bill creates immunity from criminal prosecution, disciplinary actions from a professional licensing board, and civil liability for an individual who, acting in good faith and with reasonable care, administers an opioid antagonist to an individual whom he or she believes is suffering an opioid-related drug overdose.

Any individual or organization may store and dispense an opioid antagonist without being subject to the licensing and permitting requirements in Chapter 338, RSMo, if he or she does not collect a fee or compensation for dispensing the opioid antagonist when the person or organization is acting under a standing order issued by a health care professional who is authorized to prescribe an opioid antagonist.

PROPOSERS: Supporters say that intranasal naloxone is easy to administer and successfully reverses the effects of opiate overdose 98% of the time. Naloxone is not addictive and poses minimal risk. The bill makes the drug accessible so that those with loved ones who are addicted to heroin or other opiates can have it on-hand for emergency situations. Massachusetts passed similar legislation, and the state saw a 46% reduction in opiate-related deaths.

Testifying for the bill were Representative Lynch; Chad Sabora; Timothy Harper; and Missouri Association for Social Welfare.

OPPONENTS: There was no opposition voiced to the committee.