

## WISCONSIN LEGISLATIVE COUNCIL ACT MEMO

2013 Wisconsin Act 200 [2013 Assembly Bill 446] **Opioid Antagonists and Opioid-Related Drug Overdoses** 

2013 Wisconsin Act 200 (hereinafter, "the Act") contains various provisions related to the training and agreements for administering an opioid antagonist drug; the authority of first responders and all emergency medical technicians (EMTs) to administer an opioid antagonist; the authority to prescribe and dispense an opioid antagonist; and immunity for certain individuals who administer an opioid antagonist. Under the Act, an "opioid antagonist" is defined to mean a drug, such as naloxone<sup>1</sup>, that satisfies all of the following:

- The drug binds to the opioid receptors and competes with or displaces opioid agonists at the opioid receptor site but does not activate the receptors, effectively blocking the receptor and preventing or reversing the effect of an opioid agonist.
- The drug is not a controlled substance.

The Act provides that any person may possess an opioid antagonist and may deliver or dispense an opioid antagonist except that a licensed physician, licensed physician assistant, or advanced practice nurse who is certified to issue prescription orders (APRN), or licensed pharmacist may only dispense or deliver in accordance with his or her other legal authority to dispense prescription drugs, as described below.

## Administration of an Opioid Antagonist by First Responders, EMTs, Law Enforcement, and Fire Fighters

The Act authorizes a certified first responder to administer a naloxone, or another opioid antagonist, if he or she has received training necessary to safely administer it, as

<sup>&</sup>lt;sup>1</sup> "Naloxone," also known by its trade name "Narcan," is a prescription drug that is used as an antidote to reverse an overdose of an opioid (e.g., heroin and prescription opioids including morphine, oxycontin, methadone, and Vicodin).

This memo provides a brief description of the Act. For more detailed information,

consult the text of the law and related legislative documents at the Legislature's Web site at: <u>http://www.legis.wisconsin.gov</u>.

determined by the Department of Health Services (DHS). DHS must also permit EMTs, at all levels of training, to administer naloxone or another opioid antagonist to individuals who are undergoing or who are believed to be undergoing an opioid-related drug overdose.<sup>2</sup> DHS must also require EMTs to undergo any training necessary to safely and properly administer naloxone or another opioid antagonist.

Every ambulance service provider<sup>3</sup> is required by the Act to do all of the following:

- Ensure that every EMT under the ambulance service provider's supervision who has obtained the training necessary to safely and properly administer naloxone or another opioid antagonist has a supply of naloxone or other opioid antagonist available for administration when he or she is performing his or her duties as an EMT, to the extent that naloxone or the other opioid antagonist is available to the ambulance service provider.
- Require each certified first responder and EMT under its supervision to, in the manner prescribed by DHS, keep a record of each instance in which he or she administers naloxone or another opioid antagonist.
- Submit the records described above to DHS in a manner prescribed by DHS.

The Act also authorizes a law enforcement agency or fire department to enter into a written agreement to affiliate with an ambulance service provider or a physician for all of the following purposes:

- Obtaining a supply of naloxone or another opioid antagonist.
- Allowing law enforcement officers and fire fighters to obtain the training necessary to safely and properly administer naloxone to individuals who are undergoing or who are believed to be undergoing an opioid-related drug overdose.

## Prescriptions for an Opioid Antagonist

The Act provides that a prescription order for a prescription opioid antagonist need not specify the name and address of the individual to whom the opioid antagonist will be administered. Instead, it must specify the name of the person to whom the drug will be delivered or dispensed.

The Act also authorizes a licensed physician, licensed physician assistant, and APRN to prescribe an opioid antagonist to a person who is in a position to assist another person who is at risk of experiencing an opioid-related drug overdose, either directly or by the use of a standing order. They may also deliver or dispense an opioid antagonist to a person who is in a position to assist another person at risk of experiencing an opioid-related drug overdose.

<sup>&</sup>lt;sup>2</sup> The Act defines an "opioid-related drug overdose" to mean "a condition including extreme physical illness, decreased level of consciousness, respiratory depression, coma, or the ceasing of respiratory or circulatory function resulting from the consumption or use of an opioid, or another substance with which an opioid was combined."

<sup>&</sup>lt;sup>3</sup> An "ambulance service provider" is defined as "a person engaged in the business of transporting sick, disabled, or injured individuals by ambulance to or from facilities or institutions providing health services." [s. 256.01 (3), Stats.]

However, if a licensed physician, licensed physician assistant, or APRN prescribes or delivers an opioid antagonist to such a person, he or she must ensure both of the following:

- The person to whom the drug will be delivered or dispensed has the knowledge and training necessary to safely administer it to an individual experiencing an opioid-related overdose.
- The person to whom the drug will be delivered or dispensed will ensure that any individual to whom the person further delivers or dispenses the drug has or receives that knowledge and training necessary to safely administer it to an individual experiencing an opioid-related overdose.

A licensed pharmacist is authorized under the Act to deliver or dispense an opioid antagonist upon the prescription order of a physician, physician assistant, or APRN that complies with the requirements described above. The pharmacist must provide a consultation in accordance with rules promulgated by the Pharmacy Examining Board for the delivery or dispensing of a prescription to the person to whom the drug is delivered or dispensed.

A licensed physician, licensed physician assistant, or APRN who, acting in good faith, prescribes, delivers, or dispenses an opioid antagonist in accordance with the procedures created by the Act may not be subject to professional discipline for any outcomes resulting from prescribing, delivering, or dispensing that drug. Likewise, a licensed pharmacist who, acting in good faith, delivers, or dispenses an opioid antagonist in accordance with the procedures created by the Act may not be subject to professional discipline for any outcomes resulting from delivering or dispensing that drug.

## Immunity from Civil or Criminal Liability

The Act provides that, in general, any person who **delivers** an opioid antagonist to another person is immune from civil or criminal liability, with the following exceptions:

- A licensed physician, licensed physician assistant, or APRN must act in good faith when prescribing, delivering, or dispensing an opioid antagonist in accordance with the procedures created by the Act, to be immune from any criminal or civil liability for any outcomes resulting from prescribing, delivering, or dispensing that drug.
- A licensed pharmacist must act in good faith when delivering or dispensing an opioid antagonist in accordance with the procedures created by the Act, to be immune from any criminal or civil liability for any outcomes resulting from delivering or dispensing that drug.

The Act also provides that, in general any person who **administers** an opioid antagonist to another, whom the person reasonably believes to be undergoing an opioid-related drug overdose, is immune from civil or criminal liability, with the following exceptions:

• A law enforcement officer or fire fighter is only immune from civil or criminal liability for any outcomes resulting from the administration of naloxone or another opioid antagonist to another person if the law enforcement officer or fire fighter does all of the following:

- Reasonably believes the individual is undergoing an opioid-related drug overdose.
- Acts pursuant to an agreement with an ambulance service provider or a physician and any training obtained pursuant to the agreement, as described above.
- An employee trained in health care or a health care professional is not immune from civil liability if he or she renders emergency care for compensation within the scope of their usual and customary employment or practice at a hospital or other institution equipped with hospital facilities, at the scene of an emergency or accident, enroute to a hospital or other institution equipped with hospital facilities, or at a physician's office.

*Effective date:* This Act went into effect on April 9, 2014.

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