

8285

2013-2014 Regular Sessions

I N A S S E M B L Y

November 20, 2013

Introduced by M. of A. LENTOL -- read once and referred to the Committee
on Health

AN ACT to amend the public health law, in relation to establishing an
emergency opioid overdose prevention pilot program and the use of
opioid inverse agonists in opioid overdose prevention

THE PEOPLE OF THE STATE OF NEW YORK, REPRESENTED IN SENATE AND ASSEM-
BLY, DO ENACT AS FOLLOWS:

1 Section 1. Section 3309 of the public health law, as added by chapter
2 413 of the laws of 2005, is amended to read as follows:
3 S 3309. Opioid overdose prevention. 1. The commissioner is authorized
4 to establish standards for approval of any opioid overdose prevention
5 program which may include, but not be limited to, standards for program
6 directors, appropriate clinical oversight, training, record keeping and
7 reporting.
8 2. THE COMMISSIONER SHALL ESTABLISH AN EMERGENCY OPIOID OVERDOSE
9 PREVENTION PILOT PROGRAM. SUCH PROGRAM SHALL:
10 (A) MAKE NALOXONE AVAILABLE TO ALL LAW ENFORCEMENT AGENCIES, UPON
11 REQUEST; PROVIDED THAT THE POLICE OFFICERS OF SUCH AGENCY CAN CERTIFY
12 THAT THEY HAVE RECEIVED THE TRAINING ESTABLISHED PURSUANT TO PARAGRAPH
13 (C) OF THIS SUBDIVISION;
14 (B) PROVIDE NALOXONE TO NOT MORE THAN THIRTY PUBLIC HIGH SCHOOLS
15 THROUGHOUT THE STATE. THE COMMISSIONER SHALL SELECT NOT LESS THAN TWO
16 PUBLIC HIGH SCHOOLS IN EACH OF THE FOLLOWING REGIONS TO PARTICIPATE IN
17 THE PROGRAM ESTABLISHED PURSUANT TO THIS SUBDIVISION: LONG ISLAND, THE
18 CITY OF NEW YORK, THE CAPITAL DISTRICT, THE HUDSON VALLEY, THE MOHAWK
19 VALLEY, THE NORTH COUNTRY, CENTRAL NEW YORK, THE SOUTHERN TIER, THE
20 FINGER LAKES AND WESTERN NEW YORK. THE SCHOOL NURSE AND AT LEAST ONE
21 OTHER STAFF MEMBER OF EACH PARTICIPATING HIGH SCHOOL SHALL RECEIVE THE
22 TRAINING ESTABLISHED PURSUANT TO PARAGRAPH (C) OF THIS SUBDIVISION; AND
23 (C) PROVIDE TRAINING, OR WORK WITH LOCAL ORGANIZATIONS TO PROVIDE
24 TRAINING, ON THE PROPER USE AND ADMINISTRATION OF NALOXONE.

EXPLANATION--Matter in *ITALICS* (underscored) is new; matter in brackets
[] is old law to be omitted.

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1 3. Notwithstanding any inconsistent provisions of section sixty-five
2 hundred twelve of the education law or any other law, the purchase,
3 acquisition, possession or use of an opioid antagonist OR AN OPIOID
4 INVERSE AGONIST pursuant to this section shall not constitute the unlaw-
5 ful practice of a profession or other violation under title eight of the
6 education law or this article.

7 [3.] 4. Use of an opioid antagonist OR AN OPIOID INVERSE AGONIST
8 pursuant to this section shall be considered first aid or emergency
9 treatment for the purpose of any statute relating to liability.

10 [4.] 5. The commissioner shall publish findings on statewide opioid
11 overdose data [that reviews], INCLUDING:

12 (A) USE OF NALOXONE UNDER THE PILOT PROGRAM ESTABLISHED PURSUANT TO
13 SUBDIVISION TWO OF THIS SECTION;

14 (B) overdose death rates;

15 (C) AGE, GENDER, ETHNICITY AND GEOGRAPHIC LOCATION OF OPIOID OVERDOSE
16 DEATHS;

17 (D) EMERGENCY ROOM UTILIZATION FOR TREATMENT OF OPIOID OVERDOSES;

18 (E) UTILIZATION OF PRE-HOSPITAL SERVICES FOR OPIOID OVERDOSES; and

19 (F) ANY other information NECESSARY to ascertain THE SUCCESS OF NALOX-
20 ONE USE AND changes in the cause and rates of fatal opioid overdoses.
21 The [report] FINDINGS, WHICH may be part of AN existing [state mortality
22 reports issued by the department, and] REPORT, shall be submitted annu-
23 ally [for three years and as deemed necessary by the commissioner there-
24 after,] to [the governor,] the temporary president of the senate [and],
25 THE CHAIR OF THE SENATE STANDING COMMITTEE ON HEALTH, the speaker of the
26 assembly AND THE CHAIR OF THE ASSEMBLY HEALTH COMMITTEE. [The report
27 shall include, at a minimum, the following information:

28 (a) information on opioid overdose deaths, including age, gender,
29 ethnicity, and geographic location;

30 (b) data on emergency room utilization for the treatment of opioid
31 overdose;

32 (c) data on utilization of pre-hospital services;

33 (d) suggested improvements in data collection.]

34 S 2. This act shall take effect immediately.