

State of Arkansas
94th General Assembly
Regular Session, 2023

A Bill

HOUSE BILL 1562

By: Representatives Schulz, L. Johnson, J. Mayberry

By: Senator Gilmore

For An Act To Be Entitled

AN ACT TO AMEND THE NALOXONE ACCESS ACT; TO INCREASE AVAILABILITY AND ACCESSIBILITY OF AN OPIOID ANTAGONIST; TO DECLARE AN EMERGENCY; AND FOR OTHER PURPOSES.

Subtitle

TO AMEND THE NALOXONE ACCESS ACT; TO INCREASE AVAILABILITY AND ACCESSIBILITY OF AN OPIOID ANTAGONIST; AND TO DECLARE AN EMERGENCY.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

SECTION 1. DO NOT CODIFY. Legislative findings and intent.

(a) The General Assembly finds that:

(1) As a result of the continued consequences of the opioid crisis affecting our nation, an opioid public health emergency has been in effect since October 26, 2017;

(2) Despite efforts since that time, annual overdose deaths reached record levels during the coronavirus 2019 (COVID-19) pandemic;

(3) Opioid antagonists can be safely administered to prevent overdose-related injuries not only by health care professionals but also by lay people who witness an overdose; and

(4) While this state has enacted laws expanding access to opioid antagonists, more can be done to increase availability and accessibility.

(b) It is the intent of the General Assembly to ensure that opioid



antagonists are more widely available and accessible to people at risk of experiencing or witnessing an overdose.

SECTION 2. Arkansas Code § 20-13-1804 is amended to read as follows:
20-13-1804. Opioid antagonist – Immunity.

(a) A healthcare professional acting in good faith may directly or by standing order prescribe, ~~and dispense, and supply~~ an opioid antagonist to:

(1) A person at risk of experiencing an opioid-related drug overdose;

(2) ~~A pain management clinic~~ A family member, friend, or other individual in a position to assist an individual at risk of experiencing an opioid-related overdose;

(3) ~~A harm reduction organization~~ An individual who is employed or contracted by a public or private organization, including without limitation:

(A) A state, municipal, or county entity;

(B) A hospital or clinic;

(C) A law enforcement agency;

(D) A harm reduction organization;

(E) A shelter or homeless services organization;

(F) An educational institution;

(G) A building manager; or

(H) A pain management center;

(4) An emergency medical services technician;

(5) A first responder;

(6) A law enforcement officer ~~or agency;~~ or

(7) An employee of the State Crime Laboratory; ~~or~~

~~(8) A family member or friend of a person at risk of experiencing an opioid-related drug overdose.~~

(b) Notwithstanding any other law, an individual that has been prescribed, dispensed, or supplied with an opioid antagonist under subsection (a) of this section:

(1) Shall follow manufacturer instructions for storage, replacement, and disposal of the opioid antagonist; and

(2) May provide the opioid antagonist, directly or indirectly, and at no cost, to a person described in subdivision (a)(1) or (2) of this

section.

(c) If an individual listed in subsection (a) of this section does not have access to a healthcare practitioner to issue a standing order for a prescription for an opioid antagonist, then the Secretary of the Department of Health, or his or her designee who is otherwise authorized to prescribe an opioid antagonist, may issue a standing order for an individual to act under subsection (b) of this section.

~~(b)(d)~~ A person acting in good faith who reasonably believes that another person is experiencing an opioid-related drug overdose may administer an opioid antagonist that was prescribed, ~~and~~ dispensed, or supplied under section (a) of this section.

~~(e)(e)~~ The following individuals are immune from civil liability, criminal liability, or professional sanctions for administering, prescribing, ~~or~~ dispensing, or supplying an opioid antagonist under this section:

- (1) A healthcare professional who prescribes an opioid antagonist under subsection (a) of this section;
- (2) A healthcare professional or pharmacist who acts in good faith and in compliance with the standard of care that dispenses or supplies an opioid antagonist under subsection (a) of this section; and
- (3) A person other than a healthcare professional who administers an opioid antagonist under subsection ~~(b)~~ (d) of this section or who is supplied with an opioid antagonist under subsection (a) of this section.

SECTION 3. EMERGENCY CLAUSE. It is found and determined by the General Assembly of the State of Arkansas that the ability to supply naloxone to an individual at risk of an overdose, or the friends or family of an individual at risk of an overdose, is restricted under current state law; that nearly every witnessed opioid overdose is reversible with the timely administration of an opioid antagonist; that this act would make opioid antagonists more widely distributed and available save countless lives by reversing potential overdoses; and that this act is immediately necessary to save the lives of individuals at risk of an overdose that could be reversed by an opioid antagonist. Therefore, an emergency is declared to exist, and this act being immediately necessary for the preservation of the public peace, health, and safety shall become effective on:

(1) The date of its approval by the Governor;

(2) If the bill is neither approved nor vetoed by the Governor, the expiration of the period of time during which the Governor may veto the bill; or

(3) If the bill is vetoed by the Governor and the veto is overridden, the date the last house overrides the veto.