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18 RS HB 428/HCS 1

1	AN ACT relating to opioid overdose.
2	Be it enacted by the General Assembly of the Commonwealth of Kentucky:
3	→SECTION 1. A NEW SECTION OF KRS CHAPTER 222 IS CREATED TO
4	READ AS FOLLOWS:
5	(1) As used in this section:
6	(a) "Appropriate facility" means a medical facility within a service area
7	defined by this section, which is certified by the Cabinet for Health and
8	Family Services to:
9	1. Have emergency services available on a twenty-four (24) hours per
10	<u>day basis;</u>
11	2. Be equipped to manage an acute opioid overdose; and
12	3. Be directly affiliated with a drug treatment clinic offering:
13	a. Transitional, evidence-based care for opioid users who have
14	survived an opioid overdose;
15	b. Medication-assisted treatment for opioid use disorder, as needed;
16	c. Services directly from alcohol and drug peer support specialists
17	registered under KRS Chapter 309; and
18	d. Referrals to longer-term treatment outside of the clinic, as
19	<u>needed;</u>
20	(b) "Emergency medical services provider" means a police officer, firefighter,
21	or emergency medical services personnel as defined in KRS 61.315 who are
22	working within the service area;
23	(c) "Immediate detention" means a period in which a person who has had an
24	opioid overdose is detained by a peace officer for transport by an emergency
25	medical services provider to an appropriate facility for assessment and a
26	referral to treatment under this section;
27	(d) ''Immediate detention form'' means written documentation of a reasonable

1	:	belief that a person who has had an opioid overdose is at serious risk of
2	į	injury or death due to use of opioids, and is in need of treatment;
3	<u>(e)</u>	"Opioid overdose" means that:
4		1. A person suffered respiratory or central nervous system depression
5		consistent with an acute opioid overdose; and
6	;	2. The person's symptoms were significantly alleviated by naloxone or
7		another opioid overdose intervention drug administered by an
8		emergency medical services provider; and
9	<u>(f)</u>	"Service area" means a county containing:
10	:	1. An urban-county government;
11	;	2. A consolidated local government; or
12	:	3. A population of greater than ninety thousand (90,000) if any
13		adjoining county also has a population of greater than ninety
14		thousand (90,000) based upon the most recent federal decennial
15		<u>census.</u>
16	<u>(2)</u> (a)	1. When an emergency medical services provider treats a person for
17		opioid overdose within a service area, the person treated for opioid
18		overdose shall be immediately detained for transportation to an
19		appropriate facility within the service area.
20	;	2. If the emergency medical services provider is not a peace officer with
21		arrest powers, the emergency medical services provider shall contact a
22		peace officer with arrest powers to initiate an immediate detention.
23	<u>(b)</u>	A peace officer shall complete an immediate detention form, take any steps
24	i	prescribed by the Justice and Public Safety Cabinet for entry of the
25	1	completed form into the Law Information Network of Kentucky, and
26	i	provide the facility with a copy of the immediate detention form for
27	ł	inclusion in the overdose patient's medical information.

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1	(c) Unless the peace officer determines that is necessary for the safety of the
2	person who overdosed or for public safety, the peace officer is not required
3	to accompany the person who overdosed to the appropriate facility.
4	(3) The immediate detention form shall document:
5	(a) Reasonable grounds to believe that the person is at serious risk of injury or
6	death due to abuse of opioids and in need of treatment. Evidence of an
7	opioid overdose serves as reasonable grounds under this section; and
8	(b) Other information as prescribed by the Justice and Public Safety Cabinet
9	through administrative regulation promulgated under KRS Chapter 13A.
10	(4) Before a person brought to an appropriate facility under this section can be
11	discharged:
12	(a) An assessment for substance use disorders shall be conducted by a qualified
13	health professional as defined under KRS 222.005, and if appropriate, the
14	qualified health professional shall make a referral to a clinically
15	appropriate evidence-based substance use disorder treatment program;
16	(b) The treating physician may, if appropriate, prescribe or make a referral for
17	medication-assisted treatment for the treatment of opioid use disorders, in
18	coordination with patient; and
19	(c) The qualified health professional conducting the evaluation shall develop a
20	discharge plan which includes a referral to an alcohol and drug peer
21	support specialist registered under KRS Chapter 309.
22	(5) The Justice and Public Safety Cabinet and Office of Drug Control Policy:
23	(a) May promulgate administrative regulations in accordance with KRS
24	Chapter 13A to administer and implement this section; and
25	(b) Shall collect data, in compliance with the federal Health Insurance
26	Portability and Accountability Act of 1996, Pub. L. No. 104-191, as
27	amended, on immediate detention and the resulting treatment provided by

1		appropriate facilities. This data shall be reported by December 31 of each
2		year to the Legislative Program Review and Investigations Committee of the
3		Kentucky General Assembly for analysis.
4	<u>(6)</u>	Persons carrying out duties or rendering professional opinions as provided in this
5		section shall be free of personal liability for such actions, provided that such
6		activities are performed in good faith within the scope of their professional duties
7		and in a manner consistent with accepted professional practices.
8	<u>(7)</u>	For persons who are Medicaid-eligible, transportation to and treatment in an
9		appropriate facility for opioid overdose under this section shall be reimbursed by
10		a health benefit plan, as deemed medically necessary in accordance with the
11		Social Security Act as defined in KRS 61.420.
12	<u>(8)</u>	The provisions of this section shall be subject to available funding.