

House Bill 965 (AS PASSED HOUSE AND SENATE)

By: Representatives Cooper of the 43rd, Oliver of the 82nd, Rutledge of the 109th, Watson of the 166th, Broadrick of the 4th, and others

A BILL TO BE ENTITLED
AN ACT

1 To amend Article 1 of Chapter 13 of Title 16 of the Official Code of Georgia Annotated,
2 relating to general provisions relative to controlled substances, so as to provide immunities
3 from certain arrests, charges, or prosecutions for persons seeking medical assistance for a
4 drug overdose; to provide for a short title; to provide for legislative findings; to amend
5 Article 6 of Chapter 4 of Title 26 of the Official Code of Georgia Annotated, relating to
6 pharmacies, so as to authorize licensed health practitioners to prescribe opioid antagonists
7 to certain individuals and entities pursuant to a protocol; to provide for legislative findings;
8 to amend Chapter 11 of Title 31 of the Official Code of Georgia Annotated, relating to
9 emergency medical services, so as to authorize emergency medical services personnel to
10 administer opioid antagonists; to authorize first responders to maintain and administer opioid
11 antagonists; to amend Code Section 3-3-23 of the Official Code of Georgia Annotated,
12 relating to furnishing to, purchase of, or possession by persons under 21 years of age of
13 alcoholic beverages, use of false identification, proper identification, dispensing, serving,
14 selling, or handling by persons under 21 years of age in the course of employment, and
15 seller's actions upon receiving false identification, so as to provide immunities from certain
16 arrests, charges, or prosecutions for persons seeking medical assistance for an alcohol related
17 overdose; to provide for related matters; to provide an effective date; to provide for
18 applicability; to repeal conflicting laws; and for other purposes.

19 **BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:**

20 **PART I**

21 **SECTION 1-1.**

22 This part shall be known and may be cited as the "Georgia 9-1-1 Medical Amnesty Law."

23 **SECTION 1-2.**

24 WHEREAS, according to the Atlanta Journal Constitution ("AJC"), more than 600,000
25 Americans used heroin in 2012, which is nearly double the number from five years earlier
26 according to health officials; and

27 WHEREAS, the AJC article states that "[t]he striking thing about heroin's most recent
28 incarnation is that a drug that was once largely confined to major cities is spreading into
29 suburban and rural towns across America, where it is used predominantly by young adults
30 between the ages of 18 and 29"; and

31 WHEREAS, the Drug Enforcement Agency has noted that the "skyrocketing" increase in the
32 availability of cheap heroin is a direct reaction by cartels to legislative efforts to regulate and
33 restrict access to opiate prescription painkillers; and

34 WHEREAS, Stephen Cardiges of Lawrenceville died of an accidental heroin overdose; and

35 WHEREAS, Randall Brannen of McDonough died of an accidental overdose; and

36 WHEREAS, Stephen and Randall are a part of a growing trend of drug overdose victims in
37 Georgia; and

38 WHEREAS, those who were with them did not call 9-1-1 to seek medical assistance, which
39 could have saved their lives, because of a fear of prosecution for the possession and use of
40 illegal drugs; and

41 WHEREAS, Overdose Reporting/Medical Amnesty legislation, or "9-1-1 Good Samaritan
42 Laws," have been passed in 14 states, including Florida and North Carolina, and is under
43 consideration in several more; and

44 WHEREAS, in North Carolina, it is believed that at least 20 lives have been saved since
45 passage last year of similar legislation, and in Massachusetts it is believed that more than 120
46 lives have been saved since passage of similar legislation in that state in 2012; and

47 WHEREAS, overdose deaths result from a variety of substances, including prescription
48 painkillers, heroin, methamphetamine, designer drugs, and alcohol.

49 **SECTION 1-3.**

50 Article 1 of Chapter 13 of Title 16 of the Official Code of Georgia Annotated, relating to
51 general provisions relative to controlled substances, is amended by adding a new Code
52 section to read as follows:

53 "16-13-5.

54 (a) As used in this Code section, the term:

55 (1) 'Drug overdose' means an acute condition, including, but not limited to, extreme
56 physical illness, decreased level of consciousness, respiratory depression, coma, mania,
57 or death, resulting from the consumption or use of a controlled substance or dangerous
58 drug by the distressed individual in violation of this chapter or that a reasonable person
59 would believe to be resulting from the consumption or use of a controlled substance or
60 dangerous drug by the distressed individual.

61 (2) 'Drug violation' means:

62 (A) A violation of subsection (a) of Code Section 16-13-30 for possession of a
63 controlled substance if the aggregate weight, including any mixture, is less than four
64 grams of a solid substance, less than one milliliter of liquid substance, or if the
65 substance is placed onto a secondary medium with a combined weight of less than four
66 grams;

67 (B) A violation of paragraph (1) of subsection (j) of Code Section 16-13-30 for
68 possession of less than one ounce of marijuana; or

69 (C) A violation of Code Section 16-13-32.2, relating to possession and use of drug
70 related objects.

71 (3) 'Medical assistance' means aid provided to a person by a health care professional
72 licensed, registered, or certified under the laws of this state who, acting within his or her
73 lawful scope of practice, may provide diagnosis, treatment, or emergency medical
74 services.

75 (4) 'Seeks medical assistance' means accesses or assists in accessing the 9-1-1 system or
76 otherwise contacts or assists in contacting law enforcement or a poison control center and
77 provides care to a person while awaiting the arrival of medical assistance to aid such
78 person.

79 (b) Any person who in good faith seeks medical assistance for a person experiencing or
80 believed to be experiencing a drug overdose shall not be arrested, charged, or prosecuted
81 for a drug violation if the evidence for the arrest, charge, or prosecution of such drug
82 violation resulted solely from seeking such medical assistance. Any person who is
83 experiencing a drug overdose and, in good faith, seeks medical assistance for himself or
84 herself or is the subject of such a request shall not be arrested, charged, or prosecuted for
85 a drug violation if the evidence for the arrest, charge, or prosecution of such drug violation
86 resulted solely from seeking such medical assistance. Any such person shall also not be
87 subject to, if related to the seeking of such medical assistance:

88 (1) Penalties for a violation of a permanent or temporary protective order or restraining
89 order; or

90 (2) Sanctions for a violation of a condition of pretrial release, condition of probation, or
91 condition of parole based on a drug violation.

92 (c) Nothing in this Code section shall be construed to limit the admissibility of any
93 evidence in connection with the investigation or prosecution of a crime with regard to a
94 defendant who does not qualify for the protections of subsection (b) of this Code section
95 or with regard to other crimes committed by a person who otherwise qualifies for
96 protection pursuant to subsection (b) of this Code section. Nothing in this Code section
97 shall be construed to limit any seizure of evidence or contraband otherwise permitted by
98 law. Nothing in this Code section shall be construed to limit or abridge the authority of a
99 law enforcement officer to detain or take into custody a person in the course of an
100 investigation or to effectuate an arrest for any offense except as provided in subsection (b)
101 of this Code section."

102 PART II

103 SECTION 2-1.

104 WHEREAS, Naloxone is an opioid antagonist developed to counter the effects of opiate
105 overdose, specifically the life-threatening depression of the central nervous and respiratory
106 systems; and

107 WHEREAS, Naloxone is clinically administered via intramuscular, intravenous, or
108 subcutaneous injection; and

109 WHEREAS, Naloxone is administered outside of a clinical setting or facility intranasally via
110 nasal atomizer; and

111 WHEREAS, the American Medical Association supported the lay administration of this
112 life-saving drug in 2012; and

113 WHEREAS, similar Naloxone access laws have reversed more than 10,000 opioid overdoses
114 by lay people in other states; and

115 WHEREAS, the American Medical Association acknowledged that "fatalities caused by
116 opioid overdose can devastate families and communities, and we must do more to prevent
117 these unnecessary deaths"; and

118 WHEREAS, the National Institutes of Health found that Naloxone "lacks any psychoactive
119 or addictive qualities ... without any potential for abuse...[and] medical side-effects or other
120 problematic unintended consequences associated with Naloxone have not been reported"; and

121 WHEREAS, any administration of Naloxone to an individual experiencing an opioid
122 overdose must be followed by professional medical attention and treatment.

123 **SECTION 2-2.**

124 Article 6 of Chapter 4 of Title 26 of the Official Code of Georgia Annotated, relating to
125 pharmacies, is amended by adding a new Code section to read as follows:

126 "26-4-116.2.

127 (a) As used in this Code section, the term:

128 (1) 'First responder' means any person or agency who provides on-site care until the
129 arrival of a duly licensed ambulance service. This shall include, but not be limited to,
130 persons who routinely respond to calls for assistance through an affiliation with law
131 enforcement agencies, fire departments, and rescue agencies.

132 (2) 'Harm reduction organization' means an organization which provides direct assistance
133 and services, such as syringe exchanges, counseling, homeless services, advocacy, drug
134 treatment, and screening, to individuals at risk of experiencing an opioid related
135 overdose.

136 (3) 'Opioid antagonist' means any drug that binds to opioid receptors and blocks or
137 inhibits the effects of opioids acting on those receptors and that is approved by the federal
138 Food and Drug Administration for the treatment of an opioid related overdose.

139 (4) 'Opioid related overdose' means an acute condition, including, but not limited to,
140 extreme physical illness, decreased level of consciousness, respiratory depression, coma,
141 mania, or death, resulting from the consumption or use of an opioid or another substance
142 with which an opioid was combined or that a layperson would reasonably believe to be
143 resulting from the consumption or use of an opioid or another substance with which an
144 opioid was combined for which medical assistance is required.

145 (5) 'Pain management clinic' means a clinic licensed pursuant to Article 10 of Chapter
146 34 of Title 43.

147 (6) 'Practitioner' means a physician licensed to practice medicine in this state.

148 (b) A practitioner acting in good faith and in compliance with the standard of care
149 applicable to that practitioner may prescribe an opioid antagonist for use in accordance
150 with a protocol specified by such practitioner to a person at risk of experiencing an opioid
151 related overdose or to a pain management clinic, first responder, harm reduction
152 organization, family member, friend, or other person in a position to assist a person at risk
153 of experiencing an opioid related overdose.

154 (c) A pharmacist acting in good faith and in compliance with the standard of care
155 applicable to pharmacists may dispense opioid antagonists pursuant to a prescription issued
156 in accordance with subsection (b) of this Code section.

157 (d) A person acting in good faith and with reasonable care to another person whom he or
 158 she believes to be experiencing an opioid related overdose may administer an opioid
 159 antagonist that was prescribed pursuant to subsection (b) of this Code section in accordance
 160 with the protocol specified by the practitioner.

161 (e) The following individuals are immune from any civil or criminal liability or
 162 professional licensing sanctions for the following actions authorized by this Code section:

163 (1) Any practitioner acting in good faith and in compliance with the standard of care
 164 applicable to that practitioner who prescribes an opioid antagonist pursuant to subsection
 165 (b) of this Code section;

166 (2) Any practitioner or pharmacist acting in good faith and in compliance with the
 167 standard of care applicable to that practitioner or pharmacist who dispenses an opioid
 168 antagonist pursuant to a prescription issued in accordance with subsection (b) of this
 169 Code section; and

170 (3) Any person acting in good faith, other than a practitioner, who administers an opioid
 171 antagonist pursuant to subsection (d) of this Code section."

172 **SECTION 2-3.**

173 Chapter 11 of Title 31 of the Official Code of Georgia Annotated, relating to emergency
 174 medical services, is amended in Code Section 31-11-53, relating to services which may be
 175 rendered by certified emergency medical technicians and trainees, by revising subsection (a)
 176 as follows:

177 "(a) Upon certification by the department, emergency medical technicians may do any of
 178 the following:

179 (1) Render first-aid and resuscitation services as taught in the United States Department
 180 of Transportation basic training courses for emergency medical technicians or an
 181 equivalent course approved by the department; and

182 (2) Upon the order of a duly licensed physician, administer approved intravenous
 183 solutions and opioid antagonists."

184 **SECTION 2-4.**

185 Said chapter is further amended in Code Section 31-11-54, relating to services which may
 186 be rendered by paramedics and paramedic trainees, by revising subsection (a) as follows:

187 "(a) Upon certification by the department, paramedics may perform any service that a
 188 cardiac technician is permitted to perform. In addition, upon the order of a duly licensed
 189 physician and subject to the conditions set forth in paragraph (2) of subsection (a) of Code
 190 Section 31-11-55, paramedics may perform any other procedures which they have been
 191 both trained and certified to perform, including, but not limited to:

- 192 (1) Administration of parenteral injections of diuretics, anticonvulsants, hypertonic
 193 glucose, antihistamines, bronchodilators, emetics, narcotic antagonists, and others, and
 194 administration of opioid antagonists;
 195 (2) Cardioversion; and
 196 (3) ~~Gastric suction by intubation~~ Endotracheal suction."

197 **SECTION 2-5.**

198 Said chapter is further amended in Code Section 31-11-55, relating to services which may
 199 be rendered by certified cardiac technicians and trainees, by revising subsection (a) as
 200 follows:

- 201 "(a) Upon certification by the department, cardiac technicians may do any of the following:
 202 (1) Render first-aid and resuscitation services;
 203 (2) Upon the order of a duly licensed physician and as recommended by the Georgia
 204 Emergency Health Medical Services Advisory Council and approved by the department:
 205 (A) Perform cardiopulmonary resuscitation and defibrillation in a ~~pulseless,~~
 206 ~~nonbreathing~~ hemodynamically unstable patient;
 207 (B) Administer approved intravenous solutions;
 208 (C) Administer parenteral injections of antiarrhythmic agents, vagolytic agents,
 209 chronotropic agents, alkalizing agents, analgesic agents, and vasopressor agents or
 210 administer opioid antagonists; and
 211 (D) Perform pulmonary ventilation by esophageal airway and endotracheal intubation."

212 **SECTION 2-6.**

213 Said chapter is further amended in Article 3, relating to emergency medical services
 214 personnel, by adding a new Code section to read as follows:

215 "31-11-55.1.

216 (a) As used in this Code section, the term:

- 217 (1) 'First responder' means any person or agency who provides on-site care until the
 218 arrival of a duly licensed ambulance service. This shall include, but not be limited to,
 219 persons who routinely respond to calls for assistance through an affiliation with law
 220 enforcement agencies, fire departments, and rescue agencies.
 221 (2) 'Opioid antagonist' means any drug that binds to opioid receptors and blocks or
 222 inhibits the effects of opioids acting on those receptors and that is approved by the federal
 223 Food and Drug Administration for the treatment of an opioid related overdose.
 224 (3) 'Opioid related overdose' means an acute condition, including, but not limited to,
 225 extreme physical illness, decreased level of consciousness, respiratory depression, coma,
 226 mania, or death, resulting from the consumption or use of an opioid or another substance

227 with which an opioid was combined or that a layperson would reasonably believe to be
 228 resulting from the consumption or use of an opioid or another substance with which an
 229 opioid was combined.

230 (b) An opioid antagonist may be administered or provided by any first responder for the
 231 purpose of saving the life of a person experiencing an opioid related overdose. In order to
 232 ensure public health and safety:

233 (1) All first responders who have access to or maintain an opioid antagonist obtain
 234 appropriate training as set forth in the rules and regulations of the Department of Public
 235 Health;

236 (2) All law enforcement agencies, fire departments, rescue agencies, and other similar
 237 entities shall notify the appropriate emergency medical services system of the possession
 238 and maintenance of opioid antagonists by its personnel; and

239 (3) Within a reasonable period of time, all first responders who administer or provide an
 240 opioid antagonist shall make available a printed or electronically stored report to the
 241 licensed ambulance service which transports the patient.

242 (c) A pharmacy licensed in this state may issue opioid antagonists to first responders for
 243 use pursuant to this Code section in the same manner and subject to the same requirements
 244 as provided in Code Section 26-4-116.

245 (d) Any first responder who gratuitously and in good faith renders emergency care or
 246 treatment by administering or providing an opioid antagonist shall not be held liable for
 247 any civil damages as a result of such care or treatment or as a result of any act or failure to
 248 act in providing or arranging further medical treatment where the person acts without gross
 249 negligence or intent to harm or as an ordinary reasonably prudent person would have acted
 250 under the same or similar circumstances, even if such individual does so without benefit
 251 of the appropriate training. This subsection includes paid persons who extend care or
 252 treatment without expectation of remuneration from the patient or victim for receiving the
 253 opioid antagonist."

254 PART IIA

255 SECTION 2A-1.

256 Code Section 3-3-23 of the Official Code of Georgia Annotated, relating to furnishing to,
 257 purchase of, or possession by persons under 21 years of age of alcoholic beverages, use of
 258 false identification, proper identification, dispensing, serving, selling, or handling by persons
 259 under 21 years of age in the course of employment, and seller's actions upon receiving false
 260 identification, is amended by adding a new subsection to read as follows:

261 "(j)(1) As used in this subsection, the term:

262 (A) 'Alcohol related overdose' means an acute condition, including, but not limited to,
263 extreme physical illness, decreased level of consciousness, respiratory depression,
264 coma, mania, or death, resulting from the consumption or use of alcohol or that a
265 layperson would reasonably believe to be resulting from the consumption or use of
266 alcohol for which medical assistance is required.

267 (B) 'Medical assistance' means aid provided to a person believed to be experiencing an
268 alcohol related overdose by a health care professional licensed, registered, or certified
269 under the laws of this state who, acting within his or her lawful scope of practice, may
270 provide diagnosis, treatment, or emergency services relative to such overdose.

271 (C) 'Seeks medical assistance' means accesses or assists in accessing the 9-1-1 system
272 or otherwise contacts or assists in contacting law enforcement or a poison control center
273 or provides care to a person experiencing or believed to be experiencing an alcohol
274 related overdose while awaiting the arrival of medical assistance to aid such person.

275 (2) Any person who in good faith seeks medical assistance for someone who is
276 experiencing an alcohol related overdose shall not be arrested, charged, or prosecuted for
277 a violation of paragraphs (2) through (5) of subsection (a) of this Code section if the
278 evidence for the arrest, charge, or prosecution of such violation resulted from seeking
279 such medical assistance. Any person who is experiencing an alcohol related overdose
280 and, in good faith, seeks medical assistance for himself or herself or is the subject of such
281 a request shall not be arrested, charged, or prosecuted for a violation of paragraphs (2)
282 through (5) of subsection (a) of this Code section if the evidence for the arrest, charge,
283 or prosecution of such violation resulted from seeking such medical assistance. Any such
284 person shall also not be subject to:

285 (A) Penalties for a violation of a permanent or temporary protective order or
286 restraining order; or

287 (B) Sanctions for a violation of a condition of pretrial release, condition of probation,
288 or condition of parole based on a violation of paragraphs (2) through (5) of subsection
289 (a) of this Code section.

290 (3) Nothing in this subsection shall be construed to limit the admissibility of any
291 evidence in connection with the investigation or prosecution of a crime with regard to a
292 defendant who does not qualify for the protections of paragraph (2) of this subsection or
293 with regard to other crimes committed by a person who otherwise qualifies for protection
294 pursuant to paragraph (2) of this subsection. Nothing in this subsection shall be
295 construed to limit any seizure of evidence or contraband otherwise permitted by law.
296 Nothing herein shall be construed to limit or abridge the authority of a law enforcement
297 officer to detain or take into custody a person in the course of an investigation or to

298 effectuate an arrest for any offense except as provided in paragraph (2) of this subsection."

299

PART III

300

SECTION 3-1.

301 (a) This Act shall become effective upon its approval by the Governor or upon its becoming
302 law without such approval.

303 (b) Parts I and II of this Act shall apply to all acts committed on or after such effective date.

304

SECTION 3-2.

305 All laws and parts of laws in conflict with this Act are repealed.