Senate Bill 121

By: Senators Miller of the 49th, Unterman of the 45th, Walker III of the 20th, Martin of the 9th, Kirk of the 13th and others

A BILL TO BE ENTITLED
AN ACT

To amend Article 6 of Chapter 4 of Title 26 of the Official Code of Georgia Annotated, relating to pharmacies, so as to provide that the state health officer may issue a standing order permitting certain persons and entities to obtain opioid antagonists under the conditions the state health officer may impose; to provide for immunity; to amend Chapter 13 of Title 16 of the Official Code of Georgia Annotated, relating to controlled substances, so as to change the definition of a dangerous drug; to add a drug to Schedule V; to provide for a short title; to repeal conflicting laws; and for other purposes.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

SECTION 1.

This Act shall be known and may be cited as the "Jeffrey Dallas Gay, Jr., Act."

SECTION 2.

Article 6 of Chapter 4 of Title 26 of the Official Code of Georgia Annotated, relating to pharmacies, is amended by revising Code Section 26-4-116.2, relating to authority of licensed health practitioners to prescribe opioid antagonists and immunity from liability, as follows:

"26-4-116.2.

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

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

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

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

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

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

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

(b) The following persons may prescribe an opioid antagonist:

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

(2) The state health officer may issue a standing order permitting certain persons and entities, or categories of persons or entities, to obtain opioid antagonists under such conditions as the state health officer may impose. Such an order shall have state-wide effect.

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

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

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

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

(2) Any practitioner or pharmacist acting in good faith and in compliance with the standard of care applicable to that practitioner or pharmacist who dispenses an opioid

antagonist pursuant to a prescription issued in accordance with paragraph (1) of subsection (b) of this Code section; ~~and~~

(3) The state health officer acting pursuant to paragraph (2) of subsection (b) of this Code section; and

~~(3)~~(4) Any person acting in good faith, other than a practitioner, who administers an opioid antagonist pursuant to subsection (d) of this Code section.

(f) Pursuant to any standing order issued under paragraph (2) of subsection (b) of this Code section, every pharmacy operating in this state shall keep a copy of the standing order issued by the state health officer and shall keep a record of every opioid antagonist dispensed pursuant to such standing order. Each record shall include the name of the purchaser, and the personal information of such purchaser shall include such purchaser's name and address, including the city, state, and ZIP Code. Such record shall be maintained by the pharmacy for two years. Nothing in this subsection shall prevent such record from being maintained electronically. Pharmacists shall not be required to submit this information to the Prescription Drug Monitoring Program. Such standing order shall not require pharmacies in this state to maintain opioid antagonists in their biennial inventories.″

SECTION 3.

Chapter 13 of Title 16 of the Official Code of Georgia Annotated, relating to controlled substances, is amended by revising Code Section 16-13-29, relating to Schedule V, as follows:

″16-13-29.

The controlled substances listed in this Code section are included in Schedule V:

(1) Any compound, mixture, or preparation containing limited quantities of any of the following narcotic drugs, or salts thereof, which also contains one or more nonnarcotic, active, medicinal ingredients in sufficient proportion to confer upon the compound, mixture, or preparation valuable medicinal qualities other than those possessed by the narcotic drug alone:

(A) Not more than 200 milligrams of codeine, or any of its salts, per 100 milliliters or per 100 grams;

(B) Not more than 100 milligrams of dihydrocodeine, or any of its salts, per 100 milliliters or per 100 grams;

(C) Not more than 100 milligrams of ethylmorphine, or any of its salts, per 100 milliliters or per 100 grams;

(D) Not more than 2.5 milligrams of diphenoxylate and not less than 25 micrograms of atropine sulfate per dosage unit;

(E) Not more than 100 milligrams of opium per 100 milliliters or per 100 grams;

(2) Lacosamide;

(3) Pregabalin;

(4) Pyrovalerone;

(5) Pseudoephedrine as an exempt over-the-counter Schedule V controlled substance distributed in the same manner as set forth in Code Section 16-13-29.2; provided, however, that such exemption shall take effect immediately and shall not require ~~rulemaking~~ rule making by the State Board of Pharmacy; provided, further, that wholesale drug distributors located within this state and licensed by the State Board of Pharmacy and which are registered and regulated by the DEA shall not be subject to any board requirements for controlled substances for the storage, reporting, record keeping, or physical security of drug products containing pseudoephedrine which are more stringent than those included in DEA regulations; ~~or~~

(6) Ezogabine; or

(7) Naloxone or any opioid antagonist as identified by the State Board of Pharmacy as an exempt Schedule V controlled substance, which shall require rule making by the State Board of Pharmacy and such rule shall require such substance to be sold only in a pharmacy. Such rule shall further authorize pharmacists and pharmacy interns and externs under the supervision of a licensed pharmacist to dispense naloxone only with a prescription by a licensed practitioner or under a standing order issued pursuant to Code Section 26-4-116.2.″

SECTION 4.

Said chapter is further amended by revising paragraph (635) of subsection (b) of Code Section 16-13-71, relating to the definition of a dangerous drug, as follows:

″(635) ~~Naloxone~~ Reserved;″

SECTION 5.

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