## ASSEMBLY, No. 5457

# STATE OF NEW JERSEY

### 219th LEGISLATURE

INTRODUCED MARCH 15, 2021

**Sponsored by:** 

Assemblywoman VALERIE VAINIERI HUTTLE
District 37 (Bergen)
Assemblyman ANTHONY S. VERRELLI
District 15 (Hunterdon and Mercer)
Assemblyman DANIEL R. BENSON
District 14 (Mercer and Middlesex)

Co-Sponsored by:

Assemblyman Mukherji and Assemblywoman McKnight

#### **SYNOPSIS**

Permits any person to administer or dispense opioid antidotes.

#### **CURRENT VERSION OF TEXT**

As introduced.



(Sponsorship Updated As Of: 3/15/2021)

#### **A5457** VAINIERI HUTTLE, VERRELLI

AN ACT concerning opioid antidotes and supplementing Title 24 of the Revised Statutes and repealing P.L.2013, c.46 (C.24:6J-1 et seq.).

**BE IT ENACTED** by the Senate and General Assembly of the State of New Jersey:

- 1. (New section) As used in this section:
- a. "Opioid antidote" means any drug, regardless of dosage amount or method of administration, which has been approved by the United States Food and Drug Administration (FDA) for the treatment of an opioid overdose. "Opioid antidote" includes, but is not limited to, naloxone hydrochloride, in any dosage amount, which is administered through nasal spray or any other FDA-approved means or methods.

"Opioid overdose" means an acute condition including, but not limited to, extreme physical illness, decreased level of consciousness, respiratory depression, coma, or death resulting from the consumption or use of an opioid drug or another substance with which an opioid drug was combined, and that a layperson would reasonably believe to require medical assistance.

- b. (1) Within 90 days of the effective date of this act, any person in this State may dispense an opioid antidote to a person who is located in this State.
- (2) Any person in this State may administer an opioid antidote to a recipient who is located in this State if the person believes, in good faith, that the recipient is experiencing an opioid overdose.
- (3) Within 90 days of the effective date of this act, the Department of Health shall publish on its Internet website guidelines for the dispensation of opioid antidotes that are dispensed pursuant to the provisions of this section.
- c. Any person who administers or dispenses an opioid antidote in good faith, and in accordance with the provisions of this section, shall not, as a result of the person's acts or omissions, be subject to any criminal or civil liability or any professional disciplinary action under Title 45 of the Revised Statutes for such administering or dispensing.

2. P.L.2013, c.46 (C.24:6J-1 et seq.) is repealed.

3. This act shall take effect immediately.

#### STATEMENT

This bill permits any person to administer or dispense opioid antidotes.

#### A5457 VAINIERI HUTTLE, VERRELLI

Under the bill, any person in this State may dispense an opioid antidote to a person who is located in this State. Further, any person in this State may administer an opioid antidote to a recipient who is located in this State if the person believes, in good faith, that the recipient is experiencing an opioid overdose. The bill also provides immunity from criminal, civil, and professional liability both to any person who administers or dispenses an opioid antidote in good faith, and in accordance with the provisions of the bill.

This bill repeals the "Overdose Prevention Act," P.L.2013, c.46 (C.24:6J-1 et seq.) in order to facilitate the dispensation of opioid antidotes without government regulation.

The bill defines "opioid antidote" to mean any drug, regardless of dosage amount or method of administration, which has been approved by the United States Food and Drug Administration (FDA) for the treatment of an opioid overdose. "Opioid antidote" includes, but is not limited to, naloxone hydrochloride, in any dosage amount, which is administered through nasal spray or any other FDA-approved means or methods. "Opioid overdose" means an acute condition including, but not limited to, extreme physical illness, decreased level of consciousness, respiratory depression, coma, or death resulting from the consumption or use of an opioid drug or another substance with which an opioid drug was combined, and that a layperson would reasonably believe to require medical assistance.