State of Wisconsin
2013 - 2014 LEGISLATURE

LRB-3274/1
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2013 ASSEMBLY BILL 446

October 18, 2013 - Introduced by Representatives NYGREN, KRUG, BERNIER, NERISON, PETRYK, BORN, CRAIG, CZAJA, ENDSLEY, JAGLER, KAPENGA, KAUFERT, KLEEFISCH, KNODL, KNUDSON, LEMAHIEU, MURSAU, A. OTT, PETERSEN, PRIDEMORE, RIPP, SPIROS, STRACHOTA, SWEARINGEN, TAUCHEN, TITTL, BERCEAU, BERNARD SCHABER, DOYLE, GENRICH, HULSEY, KAHL, JOHNSON, RICHARDS, SMITH, SCHRAA and BALLWEG, cosponsored by Senators HARSDORF, COWLES, L. TAYLOR, DARLING, JAUCH, GUDEX, OLSEN, LASSA, ELLIS, MOULTON, LEIBHAM, SHILLING, PETROWSKI, LAZICH, MILLER, CARPENTER, SCHULTZ, WIRCH, ERPENBACH, HANSEN, HARRIS and RISSER. Referred to Committee on Health.

AN ACT ***to amend*** 256.15 (8) (e); and ***to create*** 256.40 of the statutes; **relating to:** training and agreements for administering the drug naloxone, requiring emergency medical technicians to carry naloxone, and immunity for certain individuals who administer naloxone.

Analysis by the Legislative Reference Bureau

Under current law, the Department of Health Services (DHS) serves as the lead state agency for emergency medical services and has various duties relating to the provision of emergency medical services, including:

1) Certifying first responders, who are individuals that, as a condition of employment or as members of an organization that provides emergency medical care before hospitalization, provide emergency medical care to sick, disabled, or injured individuals before the arrival of an ambulance. In order to become certified as a first responder, an individual must satisfy certain criteria, including completing a first responder course that meets certain specified criteria. Certified first responders may undertake only certain actions specified under current law, including administering medications that are specified by DHS by rule.

2) Licensing emergency medical technicians (EMTs), who are individuals that may provide emergency medical services ranging from basic life support and patient handling and transportation to emergency cardiac, trauma, and other lifesaving or emergency procedures, depending on the level of EMT licensure. Current law specifies three levels of EMT licensure, known as EMT - basic, EMT - intermediate, and EMT - paramedic (advanced). In order to become licensed as an EMT, an

individual must satisfy certain criteria, including obtaining training commensurate with the level of EMT licensure that is sought. EMTs may, under current law, undertake only those actions that are authorized in rules promulgated by DHS for their level of licensure.

This bill provides that certified first responders may administer the drug naloxone if they have received training necessary to safely administer naloxone, as determined by DHS. Naloxone is a prescription drug which, when administered to a person undergoing an opioid-related drug overdose, can have the effect of countering the effects of the overdose. The bill also requires that DHS permit EMTs at all levels of licensure to administer naloxone to individuals who are undergoing or who are believed to be undergoing an opioid-related drug overdose. DHS must, under the bill, require EMTs to undergo any training necessary to safely and properly administer naloxone. The bill also requires each EMT so trained to, at all times when performing his or her duties as an emergency medical technician, carry or have available for administration a supply of naloxone.

In addition, the bill allows a law enforcement agency or fire department to enter into a written agreement to affiliate with an ambulance service provider or a physician for the purposes of: 1) obtaining a supply of naloxone; and 2) allowing law enforcement officers and fire fighters to obtain the training necessary to safely and properly administer naloxone to individuals who are undergoing or who are believed to be undergoing an opioid-related drug overdose. The bill provides that a law enforcement officer or fire fighter who, acting in good faith, administers naloxone to an individual whom the officer or fire fighter reasonably believes to be undergoing an opioid-related drug overdose may not be subject to any criminal or civil liability in connection with administering naloxone to the individual, if the law enforcement officer or fire fighter is acting pursuant to a written agreement described above.

For further information see the ***state and local*** fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 256.15 (8) (e) of the statutes is amended to read:

256.15 **(8)** (e) A certified first responder is authorized to use an automated external defibrillator, as prescribed for first responders in rules promulgated by the department. The rules shall set forth authorization for the use of an automated external defibrillator or, for a defibrillator that may be operated in more than one mode, use as an automated external defibrillator only. A certified first responder is authorized to administer the drug naloxone if the first responder has received

training necessary to safely administer the drug naloxone, as determined by the department. A certified first responder is also authorized to employ other techniques, including the administration of nonvisualized advanced airways, and the administration of medications that are specified by the department by rule. In promulgating the rules under this paragraph, the department shall consult with the state medical director for emergency medical services and the emergency medical services board. The rule shall include those techniques that are specified in the most current guidelines issued by the National Highway Traffic Safety Administration under 23 CFR 1205.3 (a) (5).

SECTION 2. 256.40 of the statutes is created to read:

256.40 Administration of naloxone in cases of opioid-related drug overdose. (1) In this section:

(a) "Fire fighter" means any person employed by the state or any political subdivision as a member or officer of a fire department or a member of a volunteer fire department, including the state fire marshal and deputies.

(b) "Law enforcement agency" means an agency of a federally recognized Indian tribe or band or a state or political subdivision of a state, whose purpose is the detection and prevention of crime and enforcement of laws or ordinances.

(c) "Law enforcement officer" means any person employed by a law enforcement agency who is authorized to make arrests for violations of the laws or ordinances that the person is employed to enforce.

(d) "Opioid-related drug overdose" means a condition including extreme physical illness, decreased level of consciousness, respiratory depression, coma, or the ceasing of respiratory or circulatory function resulting from the consumption or use of an opioid, or another substance with which an opioid was combined.

(2) (a) Subject to par. (b), the department shall permit all emergency medical technicians to administer the drug naloxone to individuals who are undergoing or who are believed to be undergoing an opioid-related drug overdose.

(b) The department shall require emergency medical technicians to undergo any training necessary to safely and properly administer the drug naloxone as specified under par. (a).

(c) Every emergency medical technician who has obtained the training necessary to safely and properly administer the drug naloxone shall, at all times when performing his or her duties as an emergency medical technician, carry or have available for administration a supply of the drug naloxone.

(3) (a) A law enforcement agency or fire department may enter into a written agreement to affiliate with an ambulance service provider or a physician for all of the following purposes:

1. Obtaining a supply of the drug naloxone.

2. Allowing law enforcement officers and fire fighters to obtain the training necessary to safely and properly administer the drug naloxone to individuals who are undergoing or who are believed to be undergoing an opioid-related drug overdose.

(b) A law enforcement officer or fire fighter who, acting in good faith, administers the drug naloxone to an individual whom the officer or fire fighter reasonably believes to be undergoing an opioid-related drug overdose may not be subject to any criminal or civil liability in connection with administering the drug naloxone to the individual, if the law enforcement officer or fire fighter is acting pursuant to an agreement and any training obtained under par. (a).

(END)