

Date of Hearing: April 14, 2021

ASSEMBLY COMMITTEE ON APPROPRIATIONS
Lorena Gonzalez, Chair
AB 381 (Davies and Petrie-Norris) – As Amended March 25, 2021

Policy Committee: Health Vote: 15 - 0

Urgency: No State Mandated Local Program: No Reimbursable: No

SUMMARY:

This bill addresses the availability and usage of naloxone hydrochloride (naloxone) at alcohol and other drug residential treatment facilities (RTFs) licensed by the Department of Health Care Services (DHCS). Specifically this bill:

- 1) Requires RTFs to maintain at least two unexpired doses of naloxone on the premises.
- 2) Authorizes trained staff of an RTF to administer naloxone in the event of a life-threatening emergency.
- 3) Exempts such staff from civil and criminal liability if naloxone is administered in good faith to a person appearing to experience an overdose.

FISCAL EFFECT:

Negligible administrative costs to DHCS to notify RTFs and verify compliance with the requirement.

COMMENTS:

- 1) **Purpose.** The authors indicate this bill can save lives by requiring opioid overdose reversal drugs be stored at every licensed RTF and authorizing the use of such drugs.
- 2) **Background.** RTFs are facilities licensed by DHCS to provide non-medical recovery, treatment, and detoxification services including group and individual counseling, educational sessions, and alcoholism or drug abuse recovery and treatment planning.

According to the federal Food and Drug Administration (FDA), naloxone is a medication designed to rapidly reverse opioid overdose. FDA describes naloxone as a safe and effective “opioid antagonist” which binds to opioid receptors and can reverse and block the effects of opioids. There are three FDA-approved formulations: injectable, auto-injectable and prepackaged nasal spray.

On March 5, 2019, DHCS allowed licensed RTF programs and outpatient programs to use naloxone at their program sites. This bill would codify an authorization to use naloxone, specifically require two doses be stored on-site and exempt trained staff from liability.

Despite widespread public attention in recent years to the risks of opioid abuse and overdose, a recent policy brief from California Health Policy Strategies notes California overdose

deaths are up 50% since 2017, with synthetic opioids like fentanyl largely responsible for the unprecedented growth in overdose deaths.

- 3) **Support.** This bill is supported by Advocates for Responsible Treatment, County Health Executives Association of California and the San Diego County District Attorney's Office.

The County Behavioral Health Directors Association of California (CBHDA), in a support if amended position, recommends amending the bill to remove the provision requiring staff training on the administration of naloxone, as the medication does not require specialized training. CBHDA further recommends removing the provision stating only trained staff members not be liable for damages in civil action or subject to criminal prosecution and amending the bill to state "a person who possesses or distributes an opioid antagonist shall not be subject to professional review, be liable in a civil action, or be subject to criminal prosecution for this possession or distribution."

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