

HOUSE BILL REPORT

HB 1761

As Passed Legislature

Title: An act relating to allowing nurses to dispense opioid overdose reversal medication in the emergency department.

Brief Description: Allowing nurses to dispense opioid overdose reversal medication in the emergency department.

Sponsors: Representatives Schmick, Bateman, Bronoske, Cody, Dufault, Jacobsen, Macri, Pollet, Donaghy, Graham, Davis and Chambers.

Brief History:

Committee Activity:

Health Care & Wellness: 1/10/22, 1/19/22 [DP].

Floor Activity:

Passed House: 1/28/22, 94-0.

Passed Senate: 3/1/22, 49-0.

Passed Legislature.

Brief Summary of Bill

- Adds registered and licensed practical nurses to the types of health care providers who must dispense or distribute opioid overdose reversal medication in compliance with requirements for hospital emergency departments.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: Do pass. Signed by 15 members: Representatives Cody, Chair; Bateman, Vice Chair; Schmick, Ranking Minority Member; Caldier, Assistant Ranking Minority Member; Bronoske, Davis, Harris, Macri, Maycumber, Riccelli, Rude, Simmons, Stonier, Tharinger and Ybarra.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.

Staff: Kim Weidenaar (786-7120).

Background:

Opioid overdose reversal medications, such as Narcan, Naloxone, and Evzio, can be administered to an individual experiencing an opioid overdose to rapidly restore normal breathing. Opioid overdose reversal medication is defined as any drug used to reverse an opioid overdose that binds to opioid receptors and blocks or inhibits the effects of opioids acting on those receptors. The Secretary of Health is authorized to issue a standing order for opioid reversal medication to any person at risk of experiencing an opioid-related overdose or any person or entity in a position to assist a person at risk of experiencing an opioid-related overdose. Prescribers and dispensers are authorized to provide opioid overdose reversal medication pursuant to the standing order or a collaborative drug therapy agreement to any person at risk of experiencing an opioid overdose or to any person in a position to assist a person at risk of experiencing an opioid overdose.

Prior to 2022, hospital emergency departments were authorized to allow practitioners to prescribe and for practitioners and registered nurses to distribute prepackaged opioid overdose reversal medication upon discharge if the practitioner determined the patient was at risk of an opioid overdose.

Beginning January 1, 2022, hospitals are required to provide a person who presents to an emergency department with symptoms of opioid overdose, opioid use disorder, or other adverse event related to opioid use with opioid overdose reversal medication upon discharge, unless the treating practitioner determines that dispensing or distributing opioid overdose reversal medication is not appropriate or the practitioner confirms the patient already has the medication. If the hospital dispenses or distributes the medication, it must provide directions for use and information about the medication, harm reduction strategies, and what services may be available. A practitioner in a hospital emergency department must dispense or distribute opioid overdose reversal medication in compliance with these requirements. The requirement only applies to practitioners and no longer authorizes registered nurses to distribute the medication. For purposes of these requirements, a practitioner is a person authorized in Washington to prescribe drugs and does not include registered nurses.

Summary of Bill:

A registered and licensed practical nurse must dispense or distribute opioid overdose reversal medication to the same extent as practitioners in compliance with requirements for hospital emergency departments to dispense or distribute opioid overdose reversal medications to certain patients.

Appropriation: None.

Fiscal Note: Not requested.

Effective Date: The bill contains an emergency clause and takes effect immediately.

Staff Summary of Public Testimony:

(In support) This bill allows nurses who discharge patients out of the emergency department to distribute naloxone and similar drugs. It is a pretty simple bill that fixes something that we did not catch in the original bill.

The bill that was passed last year went a long way to increase the distribution of naloxone. This bill revises some technical pieces to allow licensed practical nurses and registered nurses to distribute naloxone out of the emergency department. We need this drug in as many hands as possible.

Registered nurses are the appropriate providers to dispense naloxone and this bill will increase access to care.

(Opposed) None.

Persons Testifying: Representative Joe Schmick, prime sponsor; Katie Kolan; and Katharine Weiss.

Persons Signed In To Testify But Not Testifying: None.