


opioid found 34 times. 

# H 3728

Session 123 (2019-2020)

**H 3728** General Bill, By Fry, Alexander, Dillard, Erickson, Hewitt, Huggins, Norrell, Pendarvis, Ridgeway, Rutherford, Spires, Trantham, Weeks, West, Wooten, Yow, Henegan, Cogswell, Gilliard and Mack  
 A BILL TO AMEND THE CODE OF LAWS OF SOUTH CAROLINA, 1976, BY ADDING SECTION 44-130-80 SO AS TO REQUIRE HOSPITAL EMERGENCY DEPARTMENT PHYSICIANS AND PHARMACISTS TO SUBMIT CERTAIN INFORMATION TO THE DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL (DHEC) FOR INCLUSION IN THE PRESCRIPTION MONITORING PROGRAM WHEN A PERSON IS ADMINISTERED AN **OPIOID** ANTIDOTE; TO AMEND SECTION 44-130-60, RELATING TO THE AUTHORITY OF FIRST RESPONDERS TO ADMINISTER **OPIOID** ANTIDOTES, SO AS TO REQUIRE FIRST RESPONDERS TO SUBMIT CERTAIN INFORMATION TO DHEC FOR INCLUSION IN THE PRESCRIPTION MONITORING PROGRAM; TO AMEND SECTION 44-53-1640, RELATING TO THE PRESCRIPTION MONITORING PROGRAM, SO AS TO REQUIRE THE PROGRAM TO MONITOR THE ADMINISTERING OF **OPIOID** ANTIDOTES BY FIRST RESPONDERS AND IN EMERGENCY HEALTH CARE SETTINGS; AND TO AMEND SECTION 44-53-1645, RELATING TO THE REQUIREMENT OF PRACTITIONERS TO REVIEW A PATIENT'S CONTROLLED SUBSTANCE PRESCRIPTION HISTORY BEFORE PRESCRIBING A SCHEDULE II CONTROLLED SUBSTANCE, SO AS TO ALSO REQUIRE A REVIEW OF ANY INCIDENTS IN WHICH THE PATIENT HAS BEEN ADMINISTERED AN **OPIOID** ANTIDOTE BY A FIRST RESPONDER OR IN AN EMERGENCY HEALTH CARE SETTING.

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- 01/23/19 House Introduced and read first time (House Journal-page 7)
- 01/23/19 House Referred to Committee on Medical, Military, Public and Municipal Affairs (House Journal-page 7)
- 01/30/19 House Member(s) request name added as sponsor: Henegan, Cogswell, Gilliard, Mack

**VERSIONS OF THIS BILL**

**1/23/2019**

**H. 3728**

**A BILL**

TO AMEND THE CODE OF LAWS OF SOUTH CAROLINA, 1976, BY ADDING SECTION 44-130-80 SO AS TO REQUIRE HOSPITAL EMERGENCY DEPARTMENT PHYSICIANS AND PHARMACISTS TO SUBMIT CERTAIN INFORMATION TO THE DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL (DHEC) FOR INCLUSION IN THE PRESCRIPTION MONITORING PROGRAM WHEN A PERSON IS ADMINISTERED AN **OPIOID** ANTIDOTE; TO AMEND SECTION 44-130-60, RELATING TO THE AUTHORITY OF FIRST RESPONDERS TO ADMINISTER **OPIOID** ANTIDOTES, SO AS TO REQUIRE FIRST RESPONDERS TO SUBMIT CERTAIN INFORMATION TO DHEC FOR INCLUSION IN THE PRESCRIPTION MONITORING PROGRAM; TO AMEND SECTION 44-53-1640, RELATING TO THE

PRESCRIPTION MONITORING PROGRAM, SO AS TO REQUIRE THE PROGRAM TO MONITOR THE ADMINISTERING OF **OPPIOID** ANTIDOTES BY FIRST RESPONDERS AND IN EMERGENCY HEALTH CARE SETTINGS; AND TO AMEND SECTION 44-53-1645, RELATING TO THE REQUIREMENT OF PRACTITIONERS TO REVIEW A PATIENT'S CONTROLLED SUBSTANCE PRESCRIPTION HISTORY BEFORE PRESCRIBING A SCHEDULE II CONTROLLED SUBSTANCE, SO AS TO ALSO REQUIRE A REVIEW OF ANY INCIDENTS IN WHICH THE PATIENT HAS BEEN ADMINISTERED AN **OPPIOID** ANTIDOTE BY A FIRST RESPONDER OR IN AN EMERGENCY HEALTH CARE SETTING.

Be it enacted by the General Assembly of the State of South Carolina:

SECTION 1. Chapter 130, Title 44 of the 1976 Code is amended by adding:

"Section 44-130-80. (A) If a person is administered an **opioid** antidote in a hospital emergency department or other health care facility and the supervising physician diagnoses the patient as having experienced an **opioid** overdose, the supervising physician, the supervising physician's authorized delegate, or the institutional pharmacy's pharmacist-in-charge shall report to the department's Bureau of Drug Control information regarding the **opioid** antidote administered for inclusion in the prescription monitoring program. The information submitted must include:

- (1) date the **opioid** antidote was administered;
- (2) dosage of **opioid** antidote administered and route of administration; and
- (3) name, address, and date of birth of the person to whom the **opioid** antidote was administered, if available.

(B) The supervising physician, the supervising physician's authorized delegate, or the institutional pharmacy's pharmacist-in-charge shall submit the information required pursuant to subsection (A) electronically to Drug Control within three business days after a discharge diagnosis of an **opioid** overdose and administration of an **opioid** antidote.

(C)(1) After a supervising physician, the supervising physician's authorized delegate, or the institutional pharmacy's pharmacist-in-charge submits the name, address, and date of birth of a person to whom an **opioid** antidote was administered as required by subsection (A), Drug Control shall verify whether any prescription history of the person appears in the prescription monitoring program and, if prescription history exists, shall document for review by a practitioner or an authorized delegate the date on which the **opioid** antidote was administered to the person.

(2) Drug Control also shall maintain data on the administering of **opioid** antidotes as required by this section including, but not limited to, the frequency with which **opioid** antidotes are administered in hospital emergency departments as required pursuant to subsection (A) and other health care facilities by geographic location."

SECTION 2. Section 44-130-60 of the 1976 Code is amended by adding an appropriately lettered subsection at the end to read:

"( ) (1) A first responder who administers an **opioid** antidote as provided in this section shall report to the department's Bureau of Drug Control information regarding the **opioid** antidote administered for inclusion in the prescription monitoring program. The information submitted must include:

- (a) date the **opioid** antidote was administered;
- (b) dosage of **opioid** antidote administered and route of administration;
- (c) name, address, and date of birth of the person to whom the **opioid** antidote was administered, if

available; and

(d) dispenser from which the **opioid** antidote was obtained.

(2) A first responder shall submit the information required pursuant to item (1) electronically to Drug Control within seventy-two hours of administration.

(3)(a) If a first responder submits the name, address, and date of birth of a person to whom an **opioid** antidote was administered, Drug Control shall verify whether any prescription history of the person appears in the prescription monitoring program and, if prescription history exists, shall document for review by a practitioner or an authorized delegate the date on which the **opioid** antidote was administered to the person.

(b) Drug Control also shall maintain data on the administering of **opioid** antidotes by first responders including, but not limited to, the frequency with which first responders administer **opioid** antidotes by geographic location, first responder, and dispenser."

SECTION 3. Section 44-53-1640(A) of the 1976 Code is amended to read:

"(A) The Department of Health and Environmental Control, Bureau of Drug Control shall establish and maintain a program to monitor the prescribing and dispensing of all Schedule II, III, and IV controlled substances by professionals licensed to prescribe or dispense these substances in this State and the administering of **opioid** antidotes pursuant to Sections 44-130-60 and 44-130-80."

SECTION 4. Section 44-53-1645(A) of the 1976 Code is amended to read:

"(A) A practitioner, or the practitioner's authorized delegate, shall review a patient's controlled substance prescription history and history of the administering of an **opioid** antidote to the patient pursuant to Section 44-130-60 or 44-130-80, as maintained in the prescription monitoring program, before the practitioner issues a prescription for a Schedule II controlled substance. If an authorized delegate reviews a patient's controlled substance prescription history and history of the administering of an **opioid** antidote to the patient as provided in this subsection, the practitioner must consult with the authorized delegate regarding the prescription and **opioid** antidote administering history before issuing a prescription for a Schedule II controlled substance. The consultation must be documented in the patient's medical record."

SECTION 5. This act takes effect upon approval by the Governor.

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