

WEST VIRGINIA LEGISLATURE

2019 REGULAR SESSION

Committee Substitute

for

Senate Bill 520

SENATORS MARONEY, PLYMALE, STOLLINGS, TARR,
WOELFEL, TAKUBO, BOSO, BALDWIN, HARDESTY, AND
SWOPE, *original sponsors*

[Originating in the Committee on Health and Human
Resources; Reported on February 22, 2019]

1 A BILL to amend and reenact §16-5T-3 and §16-5T-4 of the Code of West Virginia, 1931, as
2 amended, all relating to drug overdoses; requiring entities report drug overdoses; requiring
3 details for drug overdose reports; eliminating mandatory reporters; and making
4 grammatical corrections.

Be it enacted by the Legislature of West Virginia:

ARTICLE 5T. OFFICE OF DRUG CONTROL POLICY.

§16-5T-3. Reporting system requirements; implementation; central repository requirement.

1 (a) The Office of Drug Control Policy shall implement a program in which a central
2 repository is established and maintained that shall contain ~~information required by this article~~
3 overdose information via an appropriate information technology platform with secure access for
4 the purpose of making decisions regarding the allocation of public health and educational
5 resources. In implementing this program, the office shall consult with all affected entities, including
6 law-enforcement agencies, health care providers, emergency response providers, pharmacies,
7 and medical examiners.

8 (b) The program authorized by ~~subsection (a) of this section~~ shall be designed to minimize
9 inconvenience to all entities maintaining possession of the relevant information while effectuating
10 the collection and storage of the required information. ~~The Office of Drug Control Policy shall allow~~
11 ~~reporting of the required information by electronic data transfer where feasible, and where not~~
12 ~~feasible, on reporting forms promulgated by the Office of Drug Control Policy. The information~~
13 ~~required to be submitted by the provisions of this article shall be required to be filed no more~~
14 ~~frequently than on a quarterly basis~~

§16-5T-4. Entities required to report; required information.

1 (a) To fulfill the purposes of this article, the following information shall be reported, within
2 72 hours after the provider responds to the incident and via an appropriate technology platform,
3 to the Office of Drug Control Policy:

4 ~~(1) An emergency medical or law enforcement response to a suspected, reported, or~~
5 ~~confirmed overdose, or a response in which an overdose is identified by the responders;~~

6 ~~(2) Medical treatment for an overdose;~~

7 ~~(3) The dispensation or provision of an opioid antagonist; and~~

8 ~~(4) Death attributed to overdose or "drug poisoning"~~

9 (1) The date and time of the overdose;

10 (2) The approximate address of where the person was picked up or where the overdose
11 took place;

12 (3) Whether an opioid antagonist was administered;

13 (4) Whether the overdose was fatal or nonfatal;

14 (5) The gender and approximate age of the person receiving attention or treatment; and

15 (6) The suspected controlled substance involved in the overdose.

16 (b) The following entities shall be required to report information contained in §16-5T-4(a)
17 of this code:

18 ~~(1) Pharmacies operating in the state;~~

19 ~~(2) (1) Health care providers;~~

20 ~~(3) (2) Medical examiners;~~

21 ~~(4) (3) Law-enforcement agencies, including prosecuting attorneys, state, county, and~~
22 ~~local police departments;~~

23 ~~(5) (4) Emergency response providers; and~~

24 ~~(6) (5) Hospital emergency rooms and departments.~~

25 (c) The data collected by the office pursuant to this subsection shall be made available to
26 law enforcement, local health departments, and emergency medical service agencies in each
27 county.

28 (d) Entities who are required to report information to or from the office pursuant to this
29 section in good faith are not subject to civil or criminal liability for making the report.

30 (e) For the purposes of this section:

31 “Information technology platform” means the Washington/Baltimore High Intensity Drug
32 Trafficking Overdose Detection Mapping Application Program or other program identified by the
33 department in rule.

34 “Overdose” means an acute condition, including, but not limited to, extreme physical
35 illness, decreased level of consciousness, respiratory depression, coma, or death believed to be
36 caused by abuse and misuse of prescription or illicit drugs or by substances that a layperson
37 would reasonably believe to be a drug.

38 “Opioid antagonist” means a federal Food and Drug Administration-approved drug for the
39 treatment of an opiate-related overdose, such as naloxone hydrochloride or other substance that,
40 when administered, negates or neutralizes, in whole or in part, the pharmacological effects of an
41 opioid in the body.

NOTE: The purpose of this bill is to permit the Office of Drug Control to adopt an overdose-reporting platform and set shorter time limits for mandatory overdose reporting for all providers.

Strike-throughs indicate language that would be stricken from a heading or the present law and underscoring indicates new language that would be added.