

**SB 1043 A -A4 STAFF MEASURE SUMMARY**

**House Committee On Behavioral Health and Health Care**

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**Prepared By:** Brian Nieubuurt, LPRO Analyst

**Meeting Dates:** 5/8, 5/10

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**WHAT THE MEASURE DOES:**

Requires hospitals, sobering facilities, and detoxification facilities to provide two doses of opioid overdose reversal medication and necessary medical supplies to administer medication to specified patients upon discharge or release. Provides immunity from civil liability for person who in good faith provides opioid overdose reversal medications and supplies. Specifies that civil liability protection does not apply to person involved in manufacture or sale of opioid overdose reversal medication. Creates exemption for requirement to provide opioid overdose reversal medication if patient leaves hospital or facility against medical advice. Requires Oregon Health Authority (OHA) to facilitate access to opioid overdose reversal medication for hospitals and other specified facilities.

**ISSUES DISCUSSED:**

**EFFECT OF AMENDMENT:**

-A4 Adds long term care facility to facilities required to provide two doses of opioid overdose reversal medication at discharge or transfer. Clarifies application of requirements to residential care facility, residential treatment facility, or residential treatment home.

**BACKGROUND:**

Opioids are a broad group of drugs that target the body's opioid receptors to provide relief from pain. Opioid drugs can be derived from the poppy plant (e.g., morphine) or synthesized in a laboratory (e.g., fentanyl). According to the Centers for Disease Control and Prevention (CDC), since 1999 over 932,000 people have died from a drug overdose with over 75 percent of those deaths involving an opioid. This has resulted in a federal public health emergency declaration that has remained in place since October 2017. In Oregon, opioid overdose deaths have steadily increased in recent years, with 280 deaths in 2019, 472 deaths in 2020, and 745 deaths in 2021.

Opioid antagonist medications, such as naloxone, can reverse opioid overdoses. According to the CDC, only one naloxone prescription is dispensed for every 70 high-dose opioid prescriptions, with rural counties three times more likely to be ranked as low dispensing of naloxone as metropolitan areas.

Senate Bill 1043 A would require hospitals, sobering facilities, and detoxification facilities to provide two doses of opioid overdose reversal medication and the necessary medical supplies to administer the medication to specified patients upon discharge or release.