SENATE BILL 1099

J1, E4, P1 (4lr0761)

ENROLLED BILL

— Education, Energy, and the Environment/Health and Government Operations —

Introduced by Senators Smith, Gile, James, Rosapepe, Zucker, Salling, Muse, McKay, Carozza, Hettleman, Jackson, Kramer, Folden, King, Guzzone, Lam, Elfreth, Waldstreicher, and West West, Augustine, Brooks, Feldman, Hester, Kagan, Lewis Young, and Simonaire

Read and Examined by Proofreaders: Proofreader. Proofreader. Sealed with the Great Seal and presented to the Governor, for his approval this day of at o'clock, M. President. CHAPTER _____ AN ACT concerning Emergency Services – Automated External Defibrillator and Naloxone Co-Location Initiative - Requirements for Public Buildings FOR the purpose of requiring the State Emergency Medical Services Board, in collaboration with the Maryland Department of Health, to develop and implement an initiative under the Public Access Automated External Defibrillator Program to require that naloxone be co-located with each automated external defibrillator placed in a public building; establishing a certain immunity from liability for owners and operators of public buildings who provide and maintain naloxone under the initiative and for individuals who administer naloxone made available under the initiative in response to a known or suspected drug overdose; requiring that the initiative be funded using available funds from the Opioid Restitution Fund appropriated through the State

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

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Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.

Italics indicate opposite chamber/conference committee amendments.

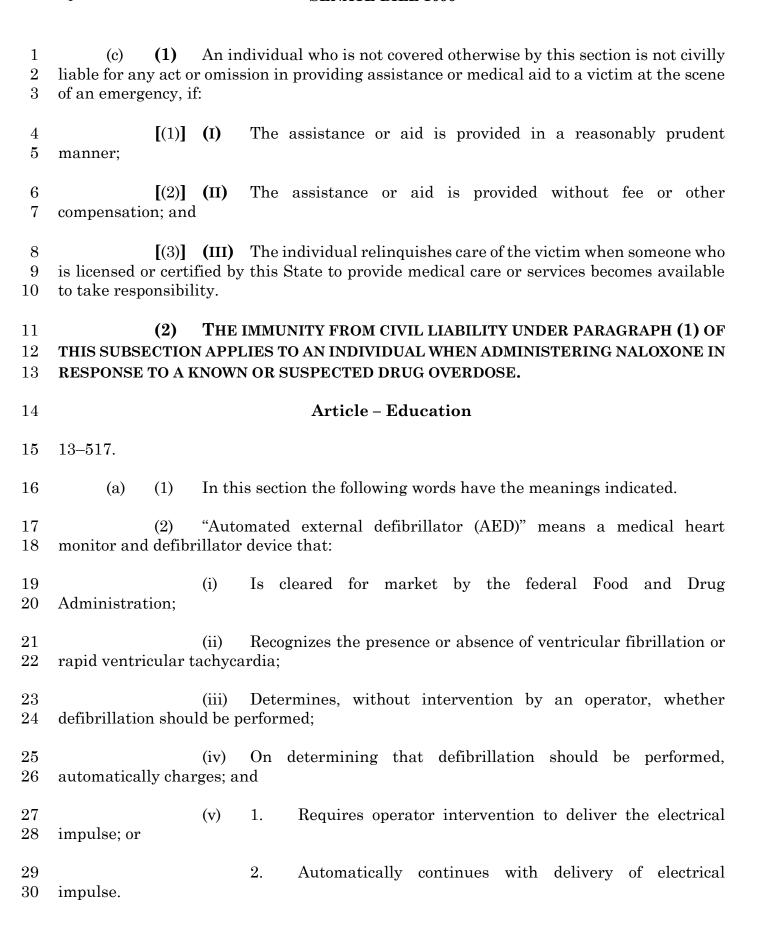


$\frac{1}{2}$	<u>budget</u> ; and generally relating to emergency services and the availability of naloxone in public buildings.								
3 4 5 6 7	BY repealing and reenacting, with amendments, Article – Courts and Judicial Proceedings Section 5–603 Annotated Code of Maryland (2020 Replacement Volume and 2023 Supplement)								
8 9 10 11 12	BY repealing and reenacting, with amendments, Article – Education Section 13–517 Annotated Code of Maryland (2022 Replacement Volume and 2023 Supplement)								
13 14 15 16 17	BY adding to Article – Education Section 13–518 Annotated Code of Maryland (2022 Replacement Volume and 2023 Supplement)								
18 19 20 21 22	BY repealing and reenacting, without amendments, Article – State Finance and Procurement Section 7–331(a) Annotated Code of Maryland (2021 Replacement Volume and 2023 Supplement)								
23 24 25 26 27	BY repealing and reenacting, with amendments, Article – State Finance and Procurement Section 7–331(f)(1)(i) Annotated Code of Maryland (2021 Replacement Volume and 2023 Supplement)								
28 29	,								
30	Article - Courts and Judicial Proceedings								
31	5–603.								
32 33	(a) A person described in subsection (b) of this section is not civilly liable for any act or omission in giving any assistance or medical care, if:								
34	(1) The act or omission is not one of gross negligence;								
35 36	(2) The assistance or medical care is provided without fee or other compensation; and								

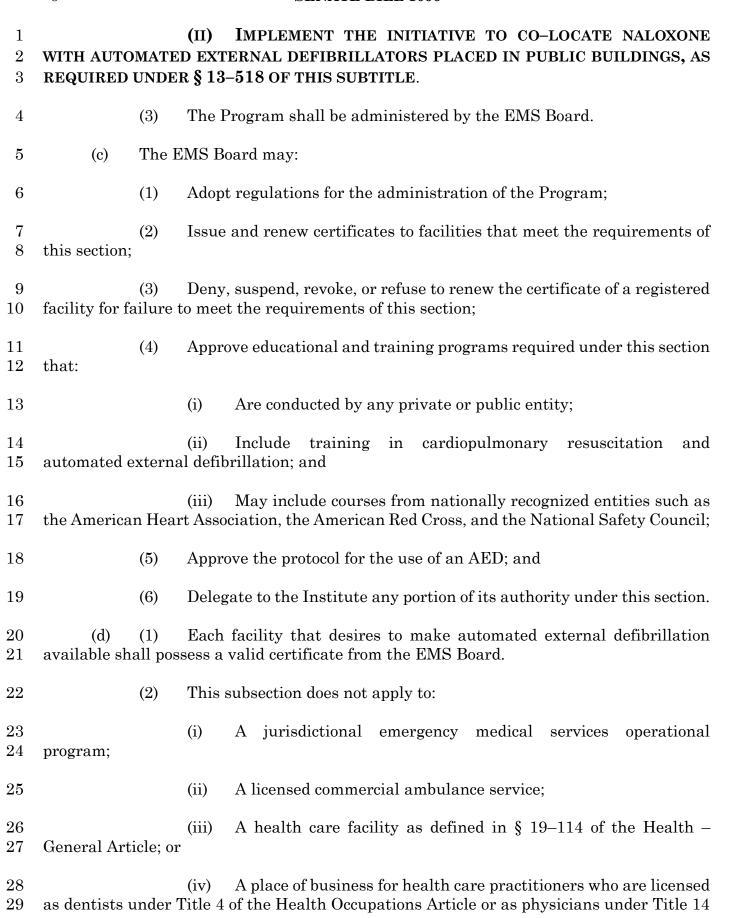
1		(3)	The a	ssistance or medical care is provided:
2			(i)	At the scene of an emergency;
3			(ii)	In transit to a medical facility; or
4 5	assistance.		(iii)	Through communications with personnel providing emergency
6	(b)	Subse	ection ((a) of this section applies to the following:
7		(1)	An in	dividual who is licensed by this State to provide medical care;
8 9 10	-	m, or a	llance a corpo	ember of any State, county, municipal, or volunteer fire and rescue squad, or law enforcement agency, the National Ski orate fire department responding to a call outside of its corporate
$\frac{12}{13}$	aid and has a	a curre	(i) ent car	Has completed an American Red Cross course in advanced first d showing that status;
14 15	advanced firs	st aid,	(ii) as det	Has completed an equivalent of an American Red Cross course in ermined by the Secretary of Health;
16 17	services prov	rider; o	(iii) or	Is certified or licensed by this State as an emergency medical
18	response to a	ın app	(iv) arent	Is administering medications or treatment approved for use in drug overdose and the member is:
20 21 22 23		and t		1. Licensed or certified as an emergency medical services ergency Medical Services Board and authorized to administer the ent under protocols established by the State Emergency Medical
24 25	under protoc	ols est	tablish	2. Certified to administer the medications and treatment ed by the Secretary of Health; or
26 27	under protoc	ols est	tablish	3. Certified to administer the medications and treatment ed by the Maryland State Police Medical Director;
28 29	members hav	(3) ve imr		unteer fire department or ambulance and rescue squad whose; and

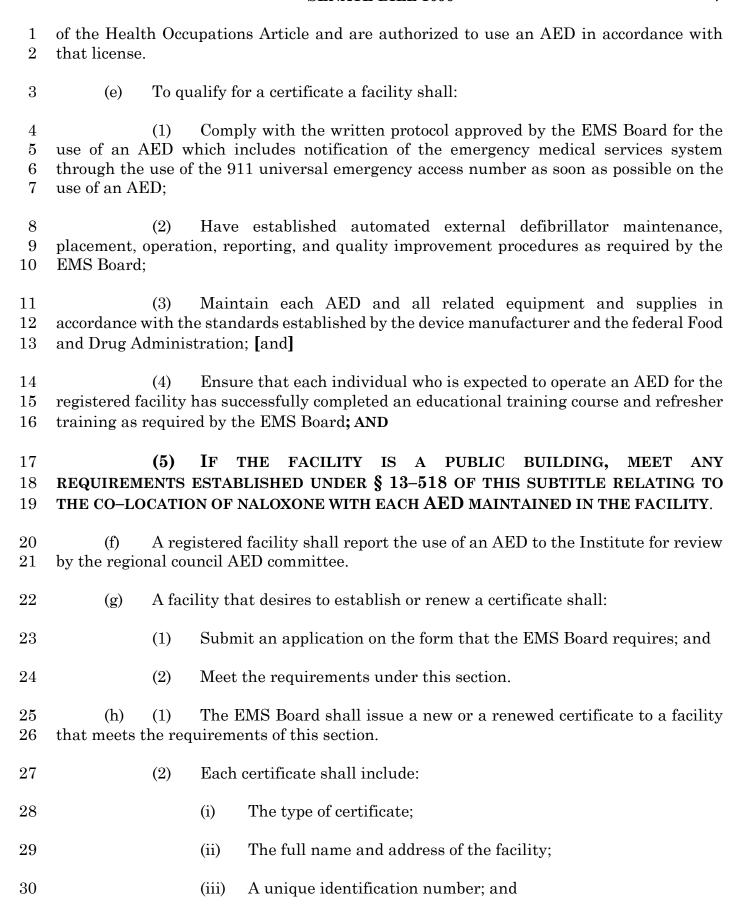
 $\qquad \qquad (4) \qquad A$ corporation when its fire department personnel are immune under item (2) of this subsection.

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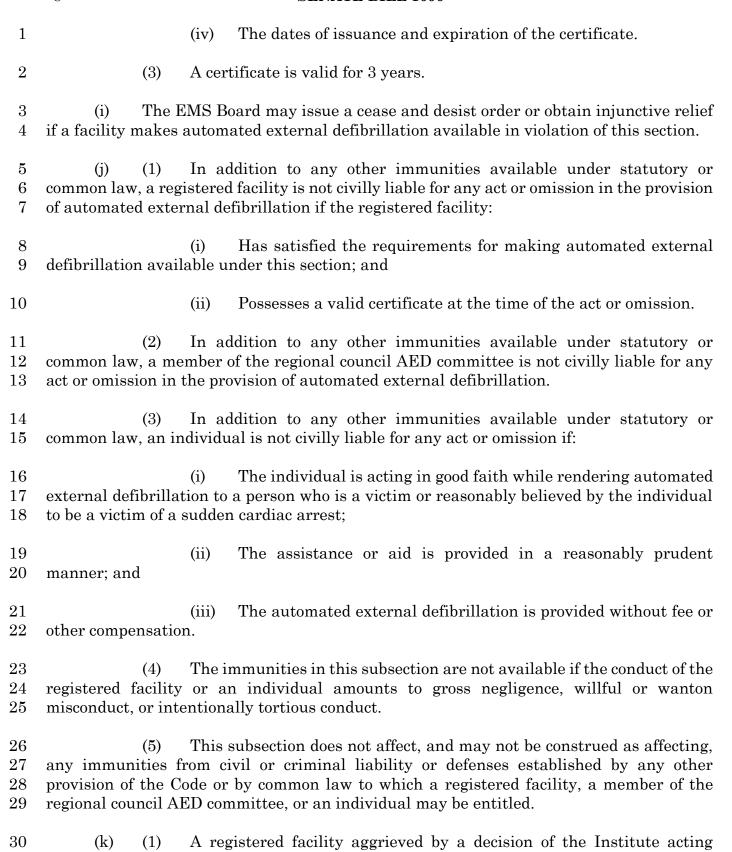
1 "Certificate" means a certificate issued by the EMS Board to a (3)2 registered facility. 3 **(4)** (i) "Facility" means an agency, an association, a corporation, a firm, a partnership, or any other entity. 4 "Facility" does not include a grocery store or restaurant that is 5 6 subject to § 21–330.3 of the Health – General Article. 7 "Jurisdictional emergency medical services operational program" (5)8 means the institution, agency, corporation, or other entity that has been approved by the 9 EMS Board to provide oversight of emergency medical services for each of the local government and State and federal emergency medical services programs. 10 (6) "Program" means the Public Access Automated External Defibrillator 11 12 Program. 13 "Regional administrator" means the individual employed by the (7)14 Institute as regional administrator in each EMS region. "Regional council" means an EMS advisory body as created by the Code 15 (8)16 of Maryland Regulations 30.05. 17 (9)"Regional council AED committee" means a committee appointed by the 18 regional council consisting of: 19 (i) The regional medical director; 20(ii) The regional administrator; and 21(iii) Three or more individuals with knowledge of and expertise in AEDs. 2223"Registered facility" means an organization, a business association, an (10)agency, or any other entity that meets the requirements of the EMS Board for registering 24with the Program. 2526 (b) There is a Public Access Automated External Defibrillator Program. (1) The purpose of the Program is to [coordinate]: 27 (2)28 **(I) COORDINATE** an effective statewide public access defibrillation 29program; AND





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under the delegated authority of the EMS Board under this section shall be afforded an

opportunity for a hearing before the EMS Board.

- 1 (2) A registered facility aggrieved by a decision of the EMS Board under
- 2 this section shall be afforded an opportunity for a hearing in accordance with Title 10,
- 3 Subtitle 2 of the State Government Article.
- 4 **13–518.**
- 5 (A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS
- 6 INDICATED.
- 7 (2) "AUTOMATED EXTERNAL DEFIBRILLATOR (AED)" HAS THE
- 8 MEANING STATED IN § 13–517 OF THIS SUBTITLE.
- 9 (3) "NALOXONE" MEANS THE MEDICATION APPROVED BY THE
- 10 FEDERAL FOOD AND DRUG ADMINISTRATION FOR COMMUNITY USE FOR THE
- 11 REVERSAL OF A KNOWN OR SUSPECTED OPIOID OVERDOSE.
- 12 (4) "PUBLIC BUILDING" MEANS:
- 13 (I) A PUBLIC MASS TRANSPORTATION ACCOMMODATION, SUCH
- 14 AS A TERMINAL OR STATION, THAT IS SUPPORTED BY PUBLIC FUNDS;
- 15 (II) AN IMPROVEMENT OF A PUBLIC AREA USED FOR
- 16 GATHERING OR AMUSEMENT, INCLUDING A PUBLIC PARK OR RECREATION CENTER;
- 17 **OR**
- 18 (III) A FACILITY THAT IS SUPPORTED BY PUBLIC FUNDS AND
- 19 PRIMARILY USED TO PROVIDE SECONDARY OR HIGHER EDUCATION.
- 20 (B) (1) THE EMS BOARD, IN COLLABORATION WITH THE MARYLAND
- 21 DEPARTMENT OF HEALTH, SHALL DEVELOP AND IMPLEMENT AN INITIATIVE UNDER
- 22 THE PUBLIC ACCESS AUTOMATED EXTERNAL DEFIBRILLATOR PROGRAM TO
- 23 REQUIRE THAT NALOXONE BE CO-LOCATED WITH EACH AUTOMATED EXTERNAL
- 24 DEFIBRILLATOR PLACED IN A PUBLIC BUILDING.
- 25 (2) THE INITIATIVE DEVELOPED UNDER PARAGRAPH (1) OF THIS
- 26 SUBSECTION SHALL ENSURE THAT UP TO TWO DOSES OF NALOXONE ARE
- 27 MAINTAINED IN A LOCATION THAT:
- 28 (I) IS VISIBLE AND IN CLOSE PHYSICAL PROXIMITY TO THE
- 29 AUTOMATED EXTERNAL DEFIBRILLATOR; AND
- 30 (II) HAS A LABEL THAT CLEARLY INDICATES TO THE PUBLIC
- 31 THE AVAILABILITY OF NALOXONE.

1	(3) THE INITIATIVE DEVELOPED UNDER PARAGRAPH (1) OF THIS
2	SUBSECTION SHALL BE FUNDED IN THE SAME MANNER AS THE PUBLIC ACCESS
3	AUTOMATED EXTERNAL DEFIBRILLATOR PROGRAM USING AVAILABLE FUNDS
4	FROM THE OPIOID RESTITUTION FUND APPROPRIATED THROUGH THE STATE
5	BUDGET.

- 6 (C) (1) THE OWNER OR OPERATOR OF A PUBLIC BUILDING IS NOT CIVILLY
 7 LIABLE FOR ANY ACT OR OMISSION IN THE PROVISION AND MAINTENANCE OF
 8 NALOXONE UNDER THE INITIATIVE DEVELOPED UNDER SUBSECTION (B)(1) OF THIS
 9 SECTION IF THE OWNER OR OPERATOR HAS SATISFIED ANY REQUIREMENTS
 10 ESTABLISHED FOR PROVIDING AND MAINTAINING NALOXONE UNDER THE
 11 INITIATIVE.
- 12 (2) AN INDIVIDUAL WHO ADMINISTERS NALOXONE MADE AVAILABLE
 13 UNDER THE INITIATIVE DEVELOPED UNDER PARAGRAPH (1) OF THIS SUBSECTION
 14 IN RESPONSE TO A KNOWN OR SUSPECTED DRUG OVERDOSE SHALL HAVE IMMUNITY
 15 FROM CIVIL LIABILITY AS PROVIDED IN § 5–603 OF THE COURTS ARTICLE.
- 16 **(D)** THE EMS BOARD AND THE MARYLAND DEPARTMENT OF HEALTH 17 JOINTLY SHALL ADOPT REGULATIONS THAT:
- 18 **(1)** ESTABLISH GUIDELINES FOR PERIODIC INSPECTIONS AND 19 MAINTENANCE OF THE NALOXONE PLACED IN PUBLIC BUILDINGS; AND
- 20 **(2)** ASSIST THE ADMINISTRATORS OF EACH PUBLIC BUILDING IN 21 CARRYING OUT THE PROVISIONS OF THIS SECTION; AND
- 22 (3) ESTABLISH INITIAL PRIORITIZATION OF THE PUBLIC BUILDINGS
 23 ELIGIBLE TO RECEIVE FUNDING UNDER THIS SECTION WITH A GOAL OF
 24 CO-LOCATION OF NALOXONE WITH EACH AUTOMATED EXTERNAL DEFIBRILLATOR
 25 LOCATED IN A PUBLIC BUILDING BY OCTOBER 1, 2027.

Article - State Finance and Procurement

27 7–331.

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- 28 (a) <u>In this section, "Fund" means the Opioid Restitution Fund.</u>
- 29 <u>(f) The Fund may be used only to provide funds for:</u>
- 30 (1) programs, services, supports, and resources for evidence—based 31 substance use disorder prevention, treatment, recovery, or harm reduction that have the 32 purpose of:

								prevent		
overdose, INCLUD										
WITH AUTOMATE						PLAC	CED IN	PUBLIC	BUILI)IN(
<u>UNDER § 13–518</u>	OF THE	EDUC	ATION A	ARTI	CLE;					
SECTION 2	AND	BE IT	FURTH	ER	ENACT	ED T	hat this	s Act sha	ll take	effe
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2000001 1, 2021.										
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								Gover	nor.	
						Pre	esident	of the Ser	nate.	
					Speake	er of the	e House	e of Delega	ates.	_