

HEALTH – GENERAL
TITLE 13. MISCELLANEOUS HEALTH CARE PROGRAMS
SUBTITLE 31. OVERDOSE RESPONSE PROGRAM.

Md. HEALTH-GENERAL Code Ann. § 13-3101 (2017)

§ 13-3101. Definitions.

- (a) In general. -- In this subtitle the following words have the meanings indicated.
- (b) Pharmacist. -- "Pharmacist" has the meaning stated in § 12-101 of the Health Occupations Article.
- (c) Private or public entity. -- "Private or public entity" means a health care provider, local health department, community-based organization, substance abuse treatment organization, or other person that addresses medical or social issues related to drug addiction.
- (d) Program. -- "Program" means the Overdose Response Program.
- (e) Standing order. -- "Standing order" means a written instruction for the prescribing and dispensing of naloxone in accordance with § 13-3106 of this subtitle.

§ 13-3102. Purpose.

The Overdose Response Program is a program administered by the Department for the purpose of providing a means of authorizing certain individuals to administer naloxone to an individual experiencing, or believed to be experiencing, opioid overdose to help prevent a fatality when medical services are not immediately available.

§ 13-3103. Powers and duties of Department.

- (a) Regulations. -- The Department shall adopt regulations necessary for the administration of the Program.
- (b) Powers of Department. -- The Department may:
 - (1) Collect fees necessary for the administration of the Program;
 - (2) Authorize private or public entities to conduct education and training on opioid overdose recognition and response that include:
 - (i) Education on recognizing the signs and symptoms of an opioid overdose;
 - (ii) Training on responding to an opioid overdose, including the administration of naloxone; and

(iii) Access to naloxone and the necessary supplies for the administration of the naloxone;

(3) Develop guidance regarding the content of educational training programs conducted by private or public entities; and

(4) Collect and report data on the operation and results of the programs.

(c) Dispensing naloxone to individuals; training not required. -- An individual is not required to obtain training and education on opioid overdose recognition and response from a private or public entity under subsection (b) of this section in order for a pharmacist to dispense naloxone to the individual.

§ 13-3104. Written agreements to establish dispensing protocols.

An authorized private or public entity shall enter into a written agreement with a licensed health care provider with prescribing authority to establish protocols for the prescribing and dispensing of naloxone to any individual in accordance with this subtitle.

§ 13-3105. Naloxone prescription – Possession and use by individuals.

(a) Prescription to individuals. -- An individual may receive from any licensed health care provider with prescribing authority a prescription for naloxone and the necessary supplies for the administration of naloxone.

(b) Possession and administration of naloxone. -- An individual for whom naloxone is prescribed and dispensed in accordance with this subtitle may:

(1) Possess prescribed naloxone and the necessary supplies for the administration of naloxone; and

(2) In an emergency situation when medical services are not immediately available, administer naloxone to an individual experiencing or believed by the individual to be experiencing an opioid overdose.

§ 13-3106. Prescribing and dispensing naloxone.

(a) Individuals who may receive prescription. -- A licensed health care provider with prescribing authority may prescribe and dispense naloxone to an individual who:

(1) Is believed by the licensed health care provider to be at risk of experiencing an opioid overdose; or

(2) Is in a position to assist an individual at risk of experiencing an opioid overdose.

(b) Standing orders. –

- (1) A licensed health care provider with prescribing authority may prescribe and dispense naloxone by issuing a standing order if the licensed health care provider:
 - (i) Is employed by the Department or a local health department; or
 - (ii) Has a written agreement with an authorized private or public entity under § 13-3104 of this subtitle.
- (2) A licensed health care provider with prescribing authority who issues a standing order under paragraph (1) of this subsection may delegate the dispensing of naloxone to an employee or a volunteer of an authorized private or public entity in accordance with a written agreement under § 13-3104 of this subtitle.
- (3) Any licensed health care provider who has dispensing authority also may dispense naloxone to any individual in accordance with a standing order issued by a licensed health care provider with prescribing authority in accordance with this subsection.

(c) Pharmacists. -- A pharmacist may dispense naloxone in accordance with a therapy management contract under Title 12, Subtitle 6A of the Health Occupations Article.

§ 13-3107. Immunity – Not deemed to be practicing medicine, registered nursing, or pharmacy.

- (a) Individuals. -- An individual who, in accordance with this subtitle, is administering naloxone to an individual experiencing or believed by the individual to be experiencing an opioid overdose may not be considered to be practicing:
 - (1) Medicine for the purposes of Title 14 of the Health Occupations Article; or
 - (2) Registered nursing for the purposes of Title 8 of the Health Occupations Article.
- (b) Employee or volunteer of private or public entity. -- An employee or volunteer of a private or public entity who, in accordance with this subtitle, provides naloxone to an individual who has received education and training in opioid overdose recognition and response in accordance with a standing order may not be considered to be practicing:
 - (1) Medicine for the purposes of Title 14 of the Health Occupations Article;
 - (2) Registered nursing for the purposes of Title 8 of the Health Occupations Article; or
 - (3) Pharmacy for the purposes of Title 12 of the Health Occupations Article.
- (c) Licensed health care providers. -- A licensed health care provider who prescribes or dispenses naloxone in accordance with this subtitle may not be subject to any disciplinary action by the

appropriate licensing health occupations board under the Health Occupations Article solely for the act of prescribing or dispensing naloxone.

§ 13-3108. Immunity – Individuals and medical providers.

- (a) Individuals. -- An individual who administers naloxone to an individual who is or in good faith is believed to be experiencing an opioid overdose shall have immunity from liability under §§ 5-603 and 5-629 of the Courts and Judicial Proceedings Article.
- (b) Health care providers. -- A cause of action may not arise against any licensed health care provider with prescribing authority or pharmacist for any act or omission when the health care provider with prescribing authority or pharmacist in good faith prescribes or dispenses naloxone and the necessary paraphernalia for the administration of naloxone to an individual under § 13-3106 of this subtitle.
- (c) Subtitle not construed to create duties. -- This subtitle may not be construed to create a duty on any individual to:
 - (1) Obtain education and training from an authorized private or public entity under this subtitle, and an individual may not be held civilly liable for failing to obtain education and training from an authorized private or public entity under this subtitle; or
 - (2) Administer naloxone to an individual who is experiencing or believed by the individual to be experiencing an opioid overdose.

§ 13-3109. Exemption from permit requirements.

A person who dispenses naloxone in accordance with this subtitle is exempt from any laws that require a person to maintain a permit to dispense prescription drugs.