**South Carolina General Assembly**

124th Session, 2021-2022

**H. 3366**

**STATUS INFORMATION**

General Bill

Sponsors: Reps. Fry, Huggins, Dillard, Hewitt, Pendarvis, Trantham, Alexander, Wooten, Erickson and Bradley

Document Path: l:\council\bills\cc\15829vr21.docx

Companion/Similar bill(s): 571

Introduced in the House on January 12, 2021

Currently residing in the House Committee on **Medical, Military, Public and Municipal Affairs**

Summary: Naloxone

**HISTORY OF LEGISLATIVE ACTIONS**

Date Body Action Description with journal page number

12/9/2020 House Prefiled

12/9/2020 House Referred to Committee on **Medical, Military, Public and Municipal Affairs**

1/12/2021 House Introduced and read first time ([House Journal‑page 172](file:///h:\hj\20210112.docx))

1/12/2021 House Referred to Committee on **Medical, Military, Public and Municipal Affairs** ([House Journal‑page 172](file:///h:\hj\20210112.docx))

2/9/2021 House Member(s) request name added as sponsor: Erickson, Bradley

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**VERSIONS OF THIS BILL**

[12/9/2020](file:///p:\pprever\2021-22\3366_20201209.docx)

**A** **BILL**

TO AMEND THE CODE OF LAWS OF SOUTH CAROLINA, 1976, BY ADDING SECTION 44‑53‑361 SO AS TO REQUIRE PRESCRIBERS TO OFFER A PRESCRIPTION FOR NALOXONE TO A PATIENT UNDER CERTAIN CIRCUMSTANCES AND FOR OTHER PURPOSES.

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

SECTION 1. Article 3, Chapter 53, Title 44 of the 1976 Code is amended by adding:

“Section 44‑53‑361. (A) A prescriber shall do the following:

(1) offer a prescription for naloxone hydrochloride or another drug approved by the United States Food and Drug Administration for the complete or partial reversal of opioid depression to a patient when one or more of the following conditions are present:

(a) the prescription dosage for the patient is fifty or more morphine milligram equivalents of an opioid medication per day;

(b) an opioid medication is prescribed concurrently with a prescription for benzodiazepine; or

(c) the patient presents with an increased risk for overdose, including a patient with a history of overdose, a patient with a history of substance use disorder, or a patient at risk for returning to a high dose of opioid medication to which the patient is no longer tolerant;

(2) consistent with the existing standard of care, provide education to patients receiving a prescription pursuant to item (1) on overdose prevention and the use of naloxone hydrochloride or another drug approved by the United States Food and Drug Administration for the complete or partial reversal of opioid depression; and

(3) consistent with the existing standard of care, provide education on overdose prevention and the use of naloxone hydrochloride or another drug approved by the United States Food and Drug Administration for the complete or partial reversal of opioid depression to one or more persons designated by the patient, or, for a patient who is a minor, to the minor’s parent or guardian.

(B) A prescriber who fails to offer a prescription, as required by subsection (A)(1), or fails to provide the education and use information required by subsections (A)(2) and (3) must be referred to the appropriate licensing board solely for the imposition of administrative sanctions deemed appropriate by that board. This section does not create a private right of action against a prescriber, and does not limit a prescriber’s liability for the negligent failure to diagnose or treat a patient.”

SECTION 2. This act takes effect upon approval by the Governor.

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