

Date of Hearing: April 16, 2024

ASSEMBLY COMMITTEE ON ARTS, ENTERTAINMENT, SPORTS, AND TOURISM

Mike Gipson, Chair

AB 1996 (Alanis) – As Introduced January 30, 2024

**SUBJECT:** Opioid antagonists: stadiums, concert venues, and amusement parks: overdose training

**SUMMARY:** Requires the State Department of Public Health (DPH) to develop an opioid overdose training program for stadium, concert venue, and amusement park staff.

Specifically, **this bill:**

- 1) Requires DPH to develop an opioid overdose training toolkit for stadium, concert venue, and amusement park staff to be trained on how to effectively identify and respond to an opioid overdose, including by administering a federally approved opioid overdose reversal medication.
- 2) Specifies that the toolkit may include, but is not limited to, all of the following:
  - a) Informational videos, graphics, and trainings on how to respond during a drug or opioid overdose, including the administration of naloxone hydrochloride or other opioid antagonists.
  - b) Information on how to recognize signs of a drug or opioid overdose.
  - c) Information on how to respond in an emergency involving a drug or opioid overdose.
- 3) Allows DPH to use any existing content or other relevant materials already developed, or develop new materials, for the toolkit.
- 4) Requires DPH to collaborate with local, state, and national organizations, which may include community health centers, community health experts, and nonprofit organizations with related expertise, to provide stadium, concert venue, and amusement park staff with integrated, comprehensive, accurate, and unbiased educational materials on opioid and drug overdose prevention, opioid and drug safety, and stigma reduction.
- 5) Requires DPH to notify stadiums, concert venues, and amusement parks of the training toolkit by July 1, 2026.
- 6) Requires stadiums, concert venues, and amusement parks to ensure that naloxone hydrochloride (NH) or another opioid antagonist on site is easily accessible and its location is widely known.

**EXISTING LAW:**

- 1) Establishes DPH, directed by a state Public Health Officer (PHO), to be vested with all the duties, powers, purposes, functions, responsibilities, and jurisdiction as they relate to disease prevention, as specified. Gives the PHO, broad authority to detect, monitor, and prevent the

spread of communicable disease in the state. (Health and Safety Code (HSC) Sections 131050 and 120130)

- 2) Requires DPH, in order to reduce the rate of fatal overdose from opioid drugs including heroin and prescription opioids and subject to appropriation, to award funding to local health departments, local government agencies, or on a competitive basis to community-based organizations, regional opioid prevention coalitions, or both, to support or establish programs that provide NH, or any other opioid antagonist that is approved by the United States Food and Drug Administration (FDA) for the treatment of an opioid overdose, to first responders and to at-risk opioid users through programs that serve at-risk drug users, including, but not limited to, syringe exchange and disposal programs, homeless programs, and substance use disorder (SUD) treatment providers. (HSC 1179.80(a))
- 3) Requires stadiums, concert venues, and amusement parks to maintain unexpired doses of an opioid antagonist on site and ensure that at least two employees are aware of the location. Provides indemnification for anyone who administers NH or another opioid antagonist, in good faith, on the premises of a stadium, concert venue, or amusement park. (HSC 11871)

**FISCAL EFFECT:** Unknown. This measure has been keyed fiscal by the Legislative Counsel.

**COMMENTS:**

- 1) Author's statement. According to the author, "California communities, including those in my own district, continue to be ravaged by opioid overdoses. Families are being ripped apart while access to this poison continues to grow. AB 1996 is a step toward helping our communities better understand and respond to signs of overdoses in places where people gather. AB 1996 focuses on the expanded training of public venue employees' ability to understand the signs of an opioid overdose and respond appropriately using approved opioid counter agents like Narcan. By creating this toolkit, we can ensure a wider net of protection for all members of the community."
- 2) Background. California is facing an overdose epidemic. According to a California Health Care Foundation report, 9% of Californians have met the criteria for a SUD within the last year. While the health care system is moving toward acknowledging SUDs as a chronic illness, only about 10% of people with an SUD within the last year received treatment. Overdose deaths from both opioids and psychostimulants (such as amphetamines), are soaring. This issue, compounded by the increased availability of fentanyl, has resulted in a ten-fold increase in fentanyl related deaths between 2015 and 2019. DPH's Opioid Overdose Dashboard reported 7,385 deaths related to "any" opioid overdose in 2022, with 6,473 (87.7%) of those deaths fentanyl related.

Fentanyl is a potent synthetic opioid drug approved by the FDA for use as an analgesic and anesthetic. It is approximately 50 times stronger than heroin and 100 times stronger than morphine. First developed in 1959, it was introduced in the 1960s as an intravenous anesthetic. Fentanyl is legally manufactured and distributed in the United States; however, there are two types of fentanyl: pharmaceutical fentanyl and illicitly manufactured fentanyl. Both are considered synthetic opioids. Pharmaceutical fentanyl is prescribed by doctors to treat severe pain, especially after surgery and for advanced-stage cancer. Most recently, cases of fentanyl-related overdoses are linked to illicitly manufactured fentanyl that is distributed through illegal drug markets for its heroin-like effect. It is often added to other drugs because

of its extreme potency, which makes drugs cheaper, more powerful, more addictive, and more dangerous.

NH is the generic name for an opioid antagonist that rapidly reverses an opioid overdose. It attaches to opioid receptors and reverses and blocks the effects of other opioids. NH can quickly restore normal breathing to a person if their breathing has slowed or stopped because of an opioid overdose. NH comes in two FDA-approved forms: injectable and prepackaged nasal spray. Narcan nasal spray was first approved by the FDA in 2015 as a prescription drug.

According to the FDA, in accordance with a process to change the status of a drug from prescription to nonprescription, the manufacturer of Narcan provided data demonstrating that the drug is safe and effective for use as directed in its proposed labeling. The manufacturer also showed that consumers can understand how to use the drug safely and effectively without the supervision of a healthcare professional. The application to approve Narcan nasal spray for over-the-counter (OTC) use was granted priority review status and was the subject of an advisory committee meeting in February 2023, where committee members voted unanimously to recommend it be approved for marketing without a prescription.

As of July 2023 the FDA has approved Narcan and RiVive, for OTC, nonprescription use. These are the first NH products approved for use without a prescription. These approvals allow the medications to be sold directly to consumers in drug stores, grocery stores, as well as online. According to an FDA Commissioner, “The approval of OTC NH nasal spray will help improve access to NH, increase the number of locations where it’s available and help reduce opioid overdose deaths throughout the country. We encourage the manufacturer to make accessibility to the product a priority by making it available as soon as possible and at an affordable price.”

Existing DPH education and training materials. DPH’s Substance and Addiction Prevention Branch maintains numerous resources for the public on NH and overdose prevention on their Opioid Prevention Initiative webpages. These webpages include two DPH developed training videos, in English and Spanish, to educate the general public on how to administer NH. The webpages also host two recorded NH webinar trainings from 2018, one targeted for professionals who educate laypersons about opioid overdose and distributing NH, the other for program managers and others in charge of implementing NH distribution systems and the Overdose Education and Naloxone Distribution program in their community. The webpages also provide links to general information on opioids and NH, how to recognize and respond to an overdose, where to get NH, disposal guidance, and multiple outside resources on NH and overdose response.

- 3) Arguments in support. According to the California District Attorneys Association in support, “AB 1996 is a reasonable expansion of existing law that would require not only that large venue operators have opioid antagonists on hand, but also ensures that the availability of such lifesaving medications are well-known and that large venue operators and employees have resources and training on the proper administration of these life-saving medications.

“The epidemic of fentanyl overdoses, and the drastic increase in deaths attributed to fentanyl’s introduction into illicit drugs of all types has hit California, and the nation hard. Figures on increased deaths due to opioid overdose are a sobering reminder of the drastic

harms that fentanyl use is having on our communities. [This] measure recognizes that large venues are increasingly likely to face an opioid overdose emergency, and better equips venue operators to have the medication and training to respond and react to an opioid overdose, and in so doing, to save lives.”

- 4) Double-Referral. This measure was referred to the Assembly Committee on Health and to the Assembly Committee on Arts, Entertainment, Sports, and Tourism. This measure was amended and passed by the Assembly Committee on Health with a 16 to 0 vote.
- 5) Policy considerations. Of note, the provisions of this bill do not mandate the completion of a training program by employees and staff working at stadiums, concert venues, and amusement parks. Additionally, it is the understanding of this committee that this bill will not cause these locations to be liable for any civil damages that result from providing emergency care in good faith at the scene of an emergency. Existing Good Samaritan Law and Drug Overdose Treatment Liability Law state that individuals that administer NH to someone suspected of experiencing an overdose, after receiving it along with required training, do not have civil or criminal liability.<sup>1</sup>
- 6) Prior and related legislation:
  - a) AB 1915 (Arambula) would require DPH to develop by July 1, 2026, a training program and toolkit for public school pupils in grades nine to 12, to gain skills in how to identify and respond to an opioid overdose, including the administering of a federally approved opioid overdose reversal medication. (Status: This bill is currently pending in Assembly Committee on Appropriations.
  - b) SB 234 (Portantino), Chapter 596, Statutes of 2023, requires stadiums, concert venues, and amusement parks to maintain unexpired doses of an opioid antagonist on its premises and ensure that at least two employees are aware of the location and provides indemnification, as specified.
  - c) AB 915 (Arambula) would have required DPH to create an opioid overdose training program and program toolkit to train high school students on how to identify and respond to an opioid overdose. This bill also would have required any local educational agency, county office of education, and charter school that voluntarily determines to make naloxone hydrochloride or another opioid antagonist available on campus to be placed in an appropriate location, as specified. AB 915 was held in the Senate Appropriations Committee.
  - d) AB 1233 (Waldron), Chapter 570, Statutes of 2023, requires the Department of Health Care Services (DHCS) to conduct outreach to each of the tribal governments in California for the purpose of advising them of the availability of NH or another opioid antagonist through DHCS’ Naloxone Distribution Project.
  - e) AB 33 (Bains), Chapter 887, Statutes of 2023, establishes the Fentanyl Addiction and Overdose Prevention Task Force to undertake specified duties relating to fentanyl abuse.

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<sup>1</sup> <https://www.cdph.ca.gov/Programs/CCDPHP/sapb/pages/naloxone.aspx#tag6>

**REGISTERED SUPPORT / OPPOSITION:**

**Support**

California Association of Alcohol and Drug Program Executives  
California District Attorneys Association  
California Medical Association  
California Public Defenders Association  
Everyday Responder Project

**Opposition**

There is no opposition on file.

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