



STATE OF HAWAII
DEPARTMENT OF HEALTH
KA 'OIHANA OLAKINO
P. O. Box 3378
Honolulu, HI 96801-3378
doh.testimony@doh.hawaii.gov

Testimony COMMENTING on H.B.816
RELATING TO EMERGENCY RESPONSE

REPRESENTATIVE GREGG TAKAYAMA, CHAIR
HOUSE COMMITTEE ON HEALTH

Hearing Date, Time and Room Number: February 5, 2025, 9:30AM, Room 329

1 **Fiscal Implications:** None.

2 **Department Position:** The Department of Health appreciates the intent of H.B. 816 and offers
3 comments.

4 **Department Testimony:** The Emergency Medical Services & Injury Prevention System Branch
5 (EMSIPSB) provides the following comments on behalf of the Department.

6 The Department of Health supports the intent of this bill.

7 It is premature to have paramedics administer Buprenorphine until there are treatment centers
8 that can accept these patients within a day or two of their EMS encounter and continue to treat
9 them with Buprenorphine.

10 Of note, it would be inappropriate for EMT's to administer this medication.

11 Thank you for the opportunity to comment.

12 **Offered Amendments:** None

13

C. Kimo Alameda, Ph.D.
Mayor



William V. Brillhante, Jr.
Managing Director

Merrick Nishimoto
Deputy Managing Director

County of Hawai'i ~ Office of the Mayor

25 Aupuni Street, Suite 2603 • Hilo, Hawai'i 96720 • Phone (808) 961-8211 • Fax (808) 961-6553
KONA: 74-5044 Ane Keohokālole Hwy., Bldg C • Kailua-Kona, Hawai'i 96740
Phone (808) 323-4444 • Fax (808) 323-4440

February 4, 2025

Committee on Health
February 5, 2025

HB816

Relating to Expanding Emergency Response for Opioid Overdoses
Chair, Rep. Greg Takayama, Vice Chair, Rep Sue L. Keohokapu-LeeLoy

Aloha Chair, Vice Chair, and Honorable Members of the Committee,

My name is Kimo Alameda, Mayor of Hawai'i County and I am writing to express my strong support for HB816, which authorizes emergency medical technicians (EMTs) to administer buprenorphine following the administration of an opioid antagonist during an overdose response. This bill represents a critical step forward in Hawaii's fight against the opioid crisis by expanding access to evidence-based treatment and improving patient outcomes.

Hawaii's rising opioid-related deaths and emergency department visits highlight the urgent need for expanded intervention strategies. By allowing EMTs to administer buprenorphine, this legislation ensures that overdose survivors receive immediate relief from withdrawal symptoms, increasing their chances of engaging with recovery services and reducing the likelihood of subsequent overdoses.

Other states, including California, New Mexico, Massachusetts, and Rhode Island, have successfully incorporated buprenorphine administration into emergency medical services protocols, demonstrating improved patient retention in treatment programs and reduced opioid-related deaths.

I urge the committee to pass HB816 towards addressing Hawaii's opioid crisis with evidence-based solutions. Thank you for your time and dedication to improving public health and emergency response in our state.



HB816 Emergency Response Give Buprenorphine to Patients for Home Use

COMMITTEE ON HEALTH

Rep. Gregg Takayama, Chair

Rep. Sue L. Keohokapu-Lee Loy, Vice Chair

Wednesday, Feb 5, 2025: 9:30: Room 329 Videoconference

Hawaii Substance Abuse Coalition Supports HB816:

ALOHA CHAIR, VICE CHAIR, AND DISTINGUISHED COMMITTEE MEMBERS. My name is Alan Johnson. I am the current chair of the Hawaii Substance Abuse Coalition (HSAC), a statewide organization for substance use disorder and co-occurring mental health disorder treatment and prevention agencies and recovery-oriented services including transition housing.

Administering buprenorphine to patients for home use during an EMS response to a crisis situation for opioid use disorder (OUD) or overdose can be beneficial.

- 1. Overdose Prevention.** As a partial opioid agonist that helps alleviate withdrawal symptoms quickly, buprenorphine can help prevent relapse and reduce the risk of subsequent overdoses, particularly after a nonfatal overdose when patients are at the highest risk.
- 2. Increased Engagement in Treatment.** Patients tend to seek more buprenorphine after their supply runs out, which can encourage them to seek more formal long-term treatment.
- 3. Reduced Strain on Emergency Departments (EDs).** Providing buprenorphine in the field allows patients to stabilize at home, reducing unnecessary ED visits and hospital admissions.
- 4. Harm Reduction and Public Health Impact.** Offering buprenorphine during EMS response aligns with harm reduction strategies, emphasizing treatment over punishment and addressing the opioid crisis with evidence-based care.
- 5. Patients in Rural or Underserved Areas.** Buprenorphine provides a critical point of care for patients who might otherwise struggle to find treatment options.

Challenges & Considerations

- 1. Training requirements:** EMTs and paramedics may require additional training in buprenorphine administration and withdrawal assessment.

2. **Ongoing Follow-up:** Referrals to treatment centers is crucial for long-term success. The State will want to ensure that there is a pathway to access formal treatment to achieve better outcomes.

Conclusion

Allowing EMTs to provide buprenorphine for home use during crisis response can significantly reduce overdoses, increase treatment engagement, and decreasing ER visits. **With training and a pathway to access formal treatment, this could greatly improve outcomes.**

We appreciate the opportunity to testify and are available for questions.



BIG ISLAND SUBSTANCE ABUSE COUNCIL

Inspiring Change, Reclaiming Lives

Inspiring individuals to reclaim and enrich their lives by utilizing innovative resources and harnessing the strengths within each person.

Kea'au Administrative Office and Treatment Center

16-179 Melekahiwa Street
Kea'au, Hawai'i 96749
P: (808) 969-9994
F: (808)969-7570

Hilo Outpatient Treatment

295 Waiānuenue Avenue
Hilo, Hawai'i 96720
P: (808) 935-4927
F: (808) 934-8067

Kona Outpatient Treatment

75-5722 Kuakini Highway #217
Kailua-Kona, Hawai'i 96740
P: (808) 322-3100
F: (808) 322-3001

Board of Directors

Chief Executive Officer

Hannah Preston-Pita

President

Pat Engelhard

Vice President

Catherine Kamau

Finance Chair

Richard Henderson

Secretary

Vanessa Carlson

Members

Dr. Lissandra Baldan-Jenkins

David Bishaw

Dave DeLuz Jr.

Breeani Kobayashi

Sharri Thornton

Ross Wilson

February 2, 2025

Dear Honorable Chair Gregg Takayama and Vice Chair Sue Keohokapu-Lee Loy and Members of the Health Committee,

Aloha, my name is Dr. Hannah Preston-Pita, and I am submitting this testimony in strong support of HB816, which authorizes emergency medical technicians in the State to administer buprenorphine following the administration of an opioid antagonist during an opioid-related overdose response. As a professional who has worked in the field of substance use treatment and recovery for many years, I have witnessed firsthand the devastating impact of opioid overdoses on individuals, families, and our broader community. Through my work, I have seen the gaps in care that exist between emergency response and long-term treatment. Too often, individuals who survive an overdose are left vulnerable without immediate access to the next steps in treatment, increasing their risk for another overdose or withdrawal-related complications.

The ability for EMTs to administer buprenorphine immediately after an opioid antagonist such as naloxone represents a critical step forward in bridging this gap. Buprenorphine not only helps to ease the distressing withdrawal symptoms that can follow naloxone administration, but it also provides a pathway toward stabilization and connection to treatment. Implementing this measure as a standard emergency response practice aligns with evidence-based best practices and will help save lives by providing individuals with an immediate intervention that can facilitate long-term recovery.

I also strongly support the requirement for the Department of Health to allocate resources for EMT training and ensure proper coordination with emergency medical service providers. Proper training will ensure that first responders have the knowledge and tools necessary to administer buprenorphine safely and effectively, strengthening our overall emergency response system. This legislation is not just about policy, it is about providing real solutions to real crises that our communities face every day. I urge you to support this bill and ensure that those experiencing an opioid overdose have immediate access to the best possible care when they need it most. Mahalo for your time and consideration.

Sincerely,

Dr. Hannah Preston-Pita, Psy.D., Ed.D., CSAC, NCTTP
Chief Executive Officer



Dear Honorable Chair Gregg Takayama and Vice Chair Sue Keohokapu-Loy and Members of the Health Committee,

We, Dr. Kevin Kunz, Wally Lau, and Dr. Hannah Preston-Pita, submit this testimony on behalf of the Hawai'i Island Fentanyl Task Force in strong support of HB816, which would authorize EMTs to administer buprenorphine following naloxone during an opioid overdose response.

As frontline leaders in the fight against Hawai'i's opioid crisis, we have witnessed the devastating impact of fentanyl and opioid-related overdoses on our communities. While naloxone is essential in reversing overdoses, it does not address the severe withdrawal symptoms that often follow, leading many individuals to decline further care and remain at high risk for another overdose. The ability for EMTs to administer buprenorphine immediately creates a critical bridge to treatment, significantly increasing the chances of long-term recovery.

This bill represents the type of systematic change we have long advocated for, one that aligns policy with evidence-based best practices to ensure better outcomes for those struggling with opioid use disorder. Other states, including Washington, New Jersey, and Rhode Island, have implemented similar measures, demonstrating increased patient engagement in treatment and reduced rates of repeat overdoses. By passing HB816, Hawai'i would be taking a major step forward in adopting proven interventions that save lives and improve public health.

This is more than a policy change, it is an opportunity to transform our emergency response system into one that does more than revive; it stabilizes, connects, and provides real pathways to healing. We urge you to stand with us in supporting HB816 to equip our first responders with the tools they need to make a life-changing and life-saving impact.

Mahalo for your time and consideration.

Respectfully Submitted,

Kevin Kunz, MD
Hawai'i Island Fentanyl Task Force Leader

Wally Lau
Hawai'i Island Fentanyl Task Force Leader

Dr. Hannah Preston-Pita, Psy.D., Ed.D., CSAC, NCTTP
Hawai'i Island Fentanyl Task Force Leader



To: Committee on Health

Hearing Date/Time: Wednesday February 5, 2025 9:30 AM

Re: Testimony in Strong Support of HB 816

Dear Chair Takayama, Vice Chair Keohokapu-Lee Loy and Members of the Committee:

The Hawaii Health & Harm Reduction Center (HHHRC) **strongly supports HB 816** which would authorize EMTs in the state to administer buprenorphine in the field after the administration of an opioid antagonist in response to an opioid-related overdose. HHHRC has one of the largest buprenorphine programs in the islands (over 300 patients) and has seen first hand how this medication has saved lives and helped people with Opioid Use Disorder recover, meet their life goals and live fulfilling lives.

HHHRC's mission is to *reduce harm, promote health, create wellness and fight stigma in Hawaii and the Pacific*. We focus our efforts on those disproportionately affected by social determinants of health, including but not limited to: people living with and/or affected by HIV, hepatitis, substance use, and the transgender, LGBTQ and the Native Hawaiian communities.

We have seen our participants go into withdrawal after receiving naloxone, and by supporting EMTs in administering buprenorphine, it would address both the withdrawal as well as allow the person to potentially continue utilizing the treatment if linked with community providers such as HHHRC. Additionally, emergency room induction of buprenorphine is a growing best practice, and hopefully once the patient is transported to the hospital and stabilized, they can be connected with resources to continue the medications. We know buprenorphine saves lives, thank you for supporting this measure which will do the same.

Thank you for the opportunity to testify.

Heather Lusk, Executive Director, Hawaii Health and Harm Reduction Center

.

HB-816

Submitted on: 2/1/2025 10:03:47 AM

Testimony for HLT on 2/5/2025 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Mark Gordon	Individual	Support	Written Testimony Only

Comments:

As part of the Hawaii Island Fentanyl Task Force (HIFTF), we monthly give and share the importance of providing the opioid antagonist, Narcan to those who may have an opioid overdose. Narcan should be always given even if unsure of an opioid overdose. It will not hurt the individual if they had meth, alcohol or an overdose from a non opioid drug.

EMTs and EMT paramedics currently administer Narcan. Narcan though is only short term. The opioid binds with its receptors and shuts down breathing. The Narcan blocks the opioid from binding with the receptors. This will allow the person to continue to breathe.

EMTs and similar personnel should also be trained and allowed to administer buprenorphine. This drug has been shown to prevent withdrawal symptoms. These withdrawal symptoms may discourage a person from being willing to begin recovery services. The administration of buprenorphine after an opioid antagonist may reduce the risk of repeat overdoses and provide a bridge to treatment, significantly increasing the likelihood of long-term recovery. In addition, use of buprenorphine would reduce the risk of the person becoming angry and/or violent

The sooner these 2 Bills are Passed the sooner more lives can be saved. Currently, about 1 person every 7 days on the Big Island dies from an opioid overdose. These Big Island deaths are sadly increasing. Statewide the deaths are about 1 person doing every day, even worse.

Please Support Approving HB 816 and SB 851.

HB-816

Submitted on: 2/5/2025 10:50:22 AM

Testimony for HLT on 2/5/2025 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Patti Cook	Individual	Support	Written Testimony Only

Comments:

Aloha - my sincere apology for this being submitted belatedly. I strongly support programs to better respond to our state's opioid crisis that is resulting in a tragic loss of lives - of all ages, from young adults to kupuna. Appreciate that our first responders are able to use/administer/have access to Naloxone (NARCAN) but need this additional emergency response treatment to help save lives and give the person involved a better opportunity at recovery.

There is a large cadre of community volunteers here on Hawai'i Island dedicated to the mission of the Hawai'i Island Fentanyl Task Force, but we urgently need our emergency responders even better prepared. We sincerely appreciate the professionalism and training our first responders have already received but they need/deserve this additional treatment methodology.

MAHALO and please keep this bill moving forward. Patti Cook Waimea, Island of Hawaii