
A BILL FOR AN ACT

RELATING TO OPIOID USE DISORDER TREATMENT.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. The legislature finds that Hawaii continues to
2 face a growing opioid crisis, with rising rates of overdose and
3 opioid-related emergency department visits. Paramedics are
4 often the first health care providers to encounter these
5 patients, providing a critical opportunity to connect them to
6 evidence-based treatment.

7 The legislature further finds that national data, including
8 a 2023 study published in the Annals of Emergency Medicine,
9 demonstrate that the administration of buprenorphine by trained
10 emergency medical services personnel following naloxone can
11 significantly reduce withdrawal symptoms and increase the
12 likelihood of patients engaging in opioid use disorder treatment
13 within thirty days.

14 The legislature recognizes the department of health's
15 concern that it is essential to ensure that patients who receive
16 buprenorphine in the field have access to follow-up treatment
17 within twenty-four to forty-eight hours. The legislature



1 therefore intends to establish a two-year phased pilot program,
2 limited initially to paramedics in one county with a population
3 of one hundred thousand or less.

4 The purpose of this Act is to:

5 (1) Authorize paramedics, under department of
6 health-approved protocols, to administer buprenorphine
7 following naloxone in cases of suspected opioid
8 overdose;

9 (2) Require the department of health to verify and
10 designate treatment centers that can accept patients
11 within twenty-four to forty-eight hours of an
12 emergency medical services encounter;

13 (3) Implement the program as a phased pilot program
14 beginning in one county with a population of one
15 hundred thousand or less; and

16 (4) Require the department to evaluate the program and
17 report outcomes to the legislature.

18 SECTION 2. Section 329E-3, Hawaii Revised Statutes, is
19 amended to read as follows:

20 "[+]§329E-3[+] Opioid antagonist administration; emergency
21 personnel and first responders. (a) Beginning on January 1,



1 2017, every emergency medical technician licensed and registered
2 in [~~Hawaii~~] the State and all law enforcement officers,
3 firefighters, and lifeguards shall be authorized to administer
4 an opioid antagonist as clinically indicated.

5 (b) Beginning July 1, 2026, in a county with a population
6 of one hundred thousand or less, paramedics licensed in the
7 State may administer buprenorphine, under protocols established
8 by the department of health and approved by the chief of the
9 emergency medical services and injury prevention branch of the
10 department of health, after administering an opioid antagonist
11 to a patient experiencing an opioid-related overdose; provided
12 that:

13 (1) The paramedic has completed training in opioid
14 withdrawal assessment and buprenorphine administration
15 approved by the department of health;

16 (2) The patient is alert, has regained decision-making
17 capacity, and meets the clinical criteria for
18 buprenorphine field initiation, as defined by the
19 protocol;



- 1 (3) A same-day or next-day referral is made to a
- 2 designated treatment provider authorized by the
- 3 department of health; and
- 4 (4) Documentation of the administration, withdrawal
- 5 assessment, and referral is submitted to the
- 6 department of health for program evaluation.

7 (c) The department of health shall adopt rules pursuant to
8 chapter 91 to:

- 9 (1) Establish clinical and operational protocols for
- 10 administration of buprenorphine in the field by
- 11 paramedics;
- 12 (2) Designate and maintain a list of treatment centers and
- 13 providers capable of accepting referred patients
- 14 within twenty-four to forty-eight hours; and
- 15 (3) Ensure coordination between emergency medical
- 16 services, emergency departments, and substance use
- 17 disorder treatment programs."

18 SECTION 3. The department of health shall:

- 19 (1) Implement a two-year phased pilot program to implement
- 20 section 329E-3(b) and (c), Hawaii Revised Statutes,
- 21 beginning in a county with a population of one hundred



1 thousand or less and may expand statewide as
2 additional treatment resources become available;

3 (2) Provide or contract for the training of paramedics in
4 the assessment, administration, and documentation of
5 buprenorphine field initiation; and

6 (3) Submit a report to the legislature no later than
7 twenty months after the pilot program's start date,
8 which shall contain an evaluation of:

9 (A) The number of patients treated under the pilot
10 program;

11 (B) Withdrawal symptom outcomes;

12 (C) Rates of engagement with follow-up treatment;

13 (D) Any operational challenges or recommendations for
14 statewide expansion; and

15 (E) Any proposed legislation.

16 SECTION 4. There is appropriated out of the general
17 revenues of the State of Hawaii the sum of \$ or so
18 much thereof as may be necessary for fiscal year 2026-2027 for
19 the department of health to implement the pilot program pursuant
20 to this Act.



1 The sum appropriated shall be expended by the department of
2 health for the purposes of this Act.

3 SECTION 5. Statutory material to be repealed is bracketed
4 and stricken. New statutory material is underscored.

5 SECTION 6. This Act shall take effect on July 1, 2026;
6 provided that on June 30, 2028, sections 2 and 3 of this Act
7 shall be repealed and section 329E-3, Hawaii Revised Statutes,
8 shall be reenacted in the form in which it read on the day prior
9 to the effective date of this Act.



Report Title:

Hawaii State Association of Counties Package; DOH; Paramedics;
Buprenorphine; Opioid Overdose; Pilot Program; Report;
Appropriation

Description:

Authorizes licensed paramedics in a county with a population of 100,000 or less to administer buprenorphine after administration of an opioid antagonist in cases of opioid overdoses, under certain conditions. Requires the Department of Health to implement a two-year phased pilot program beginning in one county with a population of 100,000 or less and authorizes expansion of the program statewide as additional treatment resources become available. Requires a report to the Legislature evaluating program outcomes. Appropriates funds. Sunsets 6/30/2028. (SD1)

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.

