

GOOD SAMARITAN ASSESSMENT ACT OF 2016

MAY 6, 2016.—Committed to the Committee of the Whole House on the State of the Union and ordered to be printed

Mr. GOODLATTE, from the Committee on the Judiciary,
submitted the following

R E P O R T

[To accompany H.R. 5048]

[Including cost estimate of the Congressional Budget Office]

The Committee on the Judiciary, to whom was referred the bill (H.R. 5048) to require a study by the Comptroller General of the United States on Good Samaritan laws that pertain to treatment of opioid overdoses, and for other purposes, having considered the same, reports favorably thereon without amendment and recommends that the bill do pass.

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Purpose and Summary

H.R. 5048 directs the Government Accountability Office (GAO) to issue a report to the House and Senate Judiciary Committees, the House Oversight and Government Reform Committee, and the Senate Homeland Security and Governmental Affairs Committee, on

the extent to which the Office of National Drug Control Policy (ONDCP) has reviewed Good Samaritan laws and the findings from such a review; efforts by the ONDCP Director to encourage the enactment of Good Samaritan laws; and a compilation of Good Samaritan laws in effect in the States, the territories, and the District of Columbia.

Background and Need for the Legislation

In recent years, states across the country have responded to the epidemic of opioid abuse and heroin use in a variety of ways. One example of an effort undertaken in many states has been the enactment of “Good Samaritan laws.” Every state has laws or regulations to protect citizens who render help to someone in need. In the context of opioids, Good Samaritan laws are laws that exempt from criminal or civil liability an individual who administers an opioid overdose reversal drug or device, such as naloxone, or who calls 911 to report an overdose.

Currently, more than half the states and the District of Columbia have some form of Good Samaritan law on the books.¹ This is a major increase since 2013, when the number was 10 states and the District of Columbia.² These laws vary widely from jurisdiction to jurisdiction, as far as who is protected (i.e., some laws differentiate between laypersons and those with medical training) and what offenses and violations may disqualify someone from receiving immunity.

As Congress considers appropriate Federal responses to the opioid epidemic, one consideration is whether to enact a Federal Good Samaritan law. However, given the widespread activity in state legislatures on the issue, and the differences between the individual state statutes, it is prudent for Members to ask the Government Accountability Office to study the effects of the various Good Samaritan laws at the state level, and efforts by the ONDCP to address the issue.³ H.R. 5048 contains such a directive.

Hearings

The Committee on the Judiciary held no hearings on H.R. 5048.

Committee Consideration

On April 27, 2016, the Committee met in open session and ordered the bill H.R. 5048 favorably reported, without amendment, by voice vote, a quorum being present.

Committee Votes

In compliance with clause 3(b) of rule XIII of the Rules of the House of Representatives, the Committee advises that there were no recorded votes during the Committee’s consideration of H.R. 5048.

¹For a table of State laws as of September 2015, see https://www.networkforphl.org/_asset/qz5pvn/network-naloxone-10-4.pdf (p. 8); see also <http://www.ncsl.org/research/civil-and-criminal-justice/drug-overdose-immunity-good-samaritan-laws.aspx>.

²See <https://www.whitehouse.gov/blog/2013/03/29/good-samaritan-overdose-response-laws-lessons-learned-washington-state>.

³*Id.*

Committee Oversight Findings

In compliance with clause 3(c)(1) of rule XIII of the Rules of the House of Representatives, the Committee advises that the findings and recommendations of the Committee, based on oversight activities under clause 2(b)(1) of rule X of the Rules of the House of Representatives, are incorporated in the descriptive portions of this report.

New Budget Authority and Tax Expenditures

Clause 3(c)(2) of rule XIII of the Rules of the House of Representatives is inapplicable because this legislation does not provide new budgetary authority or increased tax expenditures.

Congressional Budget Office Cost Estimate

In compliance with clause 3(c)(3) of rule XIII of the Rules of the House of Representatives, the Committee sets forth, with respect to the bill, H.R. 5048, the following estimate and comparison prepared by the Director of the Congressional Budget Office under section 402 of the Congressional Budget Act of 1974:

U.S. CONGRESS,
CONGRESSIONAL BUDGET OFFICE,
Washington, DC, May 5, 2016.

Hon. BOB GOODLATTE, CHAIRMAN,
Committee on the Judiciary,
House of Representatives, Washington, DC.

DEAR MR. CHAIRMAN: The Congressional Budget Office has prepared the enclosed cost estimate for H.R. 5048, the “Good Samaritan Assessment Act of 2016.”

If you wish further details on this estimate, we will be pleased to provide them. The CBO staff contact is Matthew Pickford, who can be reached at 226–2861.

Sincerely,

KEITH HALL,
DIRECTOR.

Enclosure

cc: Honorable John Conyers, Jr.
Ranking Member

H.R. 5048—Good Samaritan Assessment Act of 2016.

As ordered reported by the House Committee on the Judiciary
on April 27, 2016.

H.R. 5048 would direct the Government Accountability Office (GAO) to conduct a study of the various state and local Good Samaritan laws pertaining to opioid drug overdoses. The bill defines Good Samaritan laws as those that provide immunity for people who respond to opioid overdoses by rendering aid or calling for emergency assistance.

CBO estimates that implementing the legislation would have no significant effect on the Federal budget because the information

needed to complete the report is readily available and would not take significant time or resources to compile. Because enacting the bill would not affect direct spending or revenues, pay-as-you-go procedures do not apply.

CBO estimates that enacting H.R. 5048 would not increase direct spending or on-budget deficits in any of the four consecutive 10-year periods beginning in 2027.

H.R. 5048 contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act and would not affect the budgets of state, local, or tribal governments.

The CBO staff contact for this estimate is Matthew Pickford. The estimate was approved by H. Samuel Papenfuss, Deputy Assistant Director for Budget Analysis.

Duplication of Federal Programs

No provision of H.R. 5048 establishes or reauthorizes a program of the Federal Government known to be duplicative of another Federal program, a program that was included in any report from the Government Accountability Office to Congress pursuant to section 21 of Public Law 111–139, or a program related to a program identified in the most recent Catalog of Federal Domestic Assistance.

Disclosure of Directed Rule Makings

The Committee estimates that H.R. 5048 specifically directs to be completed no specific rule makings within the meaning of 5 U.S.C. § 551.

Performance Goals and Objectives

The Committee states that pursuant to clause 3(c)(4) of rule XIII of the Rules of the House of Representatives, H.R. 5048 directs the GAO to issue a report to the relevant House and Senate Committees on the ONDCP’s review of Good Samaritan laws; efforts by ONDCP to encourage the enactment of Good Samaritan laws; and a compilation of Good Samaritan laws in effect in the States, the territories, and the District of Columbia.

Advisory on Earmarks

In accordance with clause 9 of rule XXI of the Rules of the House of Representatives, H.R. 5048 does not contain any congressional earmarks, limited tax benefits, or limited tariff benefits as defined in clause 9(e), 9(f), or 9(g) of Rule XXI.

Section-by-Section Analysis

Section 1. Short Title. This section cites the short title of the bill as the “Good Samaritan Assessment Act of 2016.”

Section 2. Finding. This section finds that “the executive branch, including the ONDCP, has a policy focus on preventing and addressing prescription drug misuse and heroin use, and has worked with States and municipalities to enact Good Samaritan laws that would protect caregivers, law enforcement personnel, and first responders who administer opioid overdose reversal drugs or devices.”

Section 3. GAO Study on Good Samaritan Laws Pertaining to Treatment of Opioid Overdoses. This section directs the Comptroller General to issue a report to the House and Senate Judiciary Committees, the House Oversight and Government Reform Committee, and the Senate Homeland Security and Governmental Affairs Committee, on

- (1) The extent to which ONDCP has reviewed Good Samaritan laws and the findings from such a review;
- (2) Efforts by the Director to encourage the enactment of Good Samaritan laws; and
- (3) A compilation of Good Samaritan laws in effect in the States, the territories, and the District of Columbia.

Section 4. Definitions. This section provides definitions for the terms used in this bill, including “Good Samaritan law” and “opioid.”

