

135.190 Possession and administration of opioid antagonists — immunity.

1. For purposes of [this section](#), unless the context otherwise requires:

a. “*Community-based organization*” means a public or private organization that provides health or human services to meet the needs of a community including but not limited to a nonprofit organization, a social service provider, or an organization providing substance abuse disorder prevention, treatment, recovery, or harm reduction services.

b. “*Licensed health care professional*” means the same as defined in [section 280.16](#).

c. “*Opioid antagonist*” means the same as defined in [section 147A.1](#).

d. “*Opioid-related overdose*” means the same as defined in [section 147A.1](#).

e. “*Person in a position to assist*” means a family member, friend, caregiver, community-based organization, health care provider, employee of a substance use disorder treatment facility, school employee, first responder as defined in [section 147A.1](#), or other person who may be in a place to render aid to a person at risk of experiencing an opioid-related overdose.

f. “*Secondary distributor*” means a law enforcement agency, emergency medical services program, fire department, school district, health care provider, licensed behavioral health provider, county health department, or the department of health and human services.

2. a. Notwithstanding any other provision of law to the contrary, a licensed health care professional may prescribe an opioid antagonist to a person in a position to assist or to a secondary distributor.

b. (1) Notwithstanding any other provision of law to the contrary, a pharmacist licensed under [chapter 155A](#) may, by standing order or through collaborative agreement, dispense, furnish, or otherwise provide an opioid antagonist to a person in a position to assist or to a secondary distributor.

(2) A pharmacist or secondary distributor who dispenses, furnishes, or otherwise provides an opioid antagonist pursuant to a valid prescription, standing order, or collaborative agreement shall provide written instruction, which shall include emergency, crisis, and substance use referral contact information, to the recipient in accordance with any protocols and instructions developed by the department under [this section](#).

3. A person in a position to assist may possess and provide or administer an opioid antagonist to an individual if the person in a position to assist reasonably and in good faith believes that such individual is experiencing an opioid-related overdose.

4. Notwithstanding any other provision of law to the contrary, the chief medical officer of the department may issue a standing order that does not identify individual patients at the time it is issued for the purpose of dispensing opioid antagonists to a person in a position to assist.

5. A person in a position to assist may distribute an opioid antagonist to any individual pursuant to [this section](#).

6. A person in a position to assist, a secondary distributor, or a prescriber of an opioid antagonist who has acted reasonably and in good faith shall not be liable for any injury arising from the provision, administration, or assistance in the administration of an opioid antagonist as provided in [this section](#).

7. A school district may obtain a valid prescription for an opioid antagonist and maintain a supply of opioid antagonists in a secure location at each location where a student may be present for use as provided in [this section](#).

8. The department may adopt rules pursuant to [chapter 17A](#) to implement and administer [this section](#).

2016 Acts, ch 1061, §1; 2016 Acts, ch 1139, §68 – 70, 72 – 75; 2022 Acts, ch 1121, §2, 3; 2023 Acts, ch 19, §158; 2023 Acts, ch 86, §15 – 18

Referred to in §147A.18, 155A.3, 155A.27

See Code editor's note on simple harmonization at the beginning of this Code volume

Section amended