

RESOLUTION

NO: [Title]

LIVINGSTON COUNTY

DATE: Click or tap to enter a date.

Resolution to Implement Michigan’s Nonopioid Directive to Enhance Emergency Medical Services – Board of Commissioners

WHEREAS, Act No. 41 of Public Acts of 2022 is commonly referred to as the Nonopioid Directive. The full text of the Act can be found online at <https://legislature.mi.gov/documents/2021-2022/publicact/pdf/2022-PA-0041.pdf>

WHEREAS, Sec. 9145 (1) and (2) of the Act provides a summary of the Nonopioid Directive and is shown in Exhibit 1 attached to this resolution.

WHEREAS, The State of Michigan enacted the Nonopioid Directive to help reduce opioid use disorder (OUD).

WHEREAS, In a press release MDHHS praised the passage of the Nonopioid Directive stating, “This law helps ensure nonopioid options to pain management are considered in the medical treatment of Michigan patients.” And, “Providing this supportive tool for patients to notify their health professionals that they are seeking alternatives for pain treatment is critically important for those who are most at-risk of misusing opioids, including those with a history of an opioid disorder.”

WHEREAS, As stated in Act 41, the Nonopioid Directive provides a means for individuals to inform their healthcare professionals and emergency medical services providers that they do not want to receive opioid medications. It's a way for individuals to express their preference to avoid opioids in their treatment.

WHEREAS, Exhibit 2, attached to this resolution, shows the form that individuals would need to fill out to notify healthcare professionals and emergency medical services providers to avoid administering opioids.

WHEREAS, Livingston County’s 911 Central Dispatch, which has an important role in providing emergency medical services for our citizens, is purchasing a new computer-aided dispatch system (CAD).

WHEREAS, The new CAD will be able to accommodate citizens’ Nonopioid Directive thus making their wishes known ahead of time to emergency medical service providers.

WHEREAS, Exhibit E of the Final Distributor Settlement Agreement dated 8/11/21 states that efforts to “Prevent Over-Prescribing and Ensure Appropriate Prescribing and Dispensing of Opioids” is an allowable use of settlement funds. (see page E-10, Part Two: Prevention, Section F)

WHEREAS, Preventing over-prescribing can directly reduce OUD as 75% of individuals with OUD first used opioids because of a prescription (source Dr. Matt McCord).

THEREFORE, BE IT RESOLVED that the Board of Commissioners authorizes the use of Fund 284 Opioid Settlement funds as the funding source and creation of a project to specifically record all transactions relating to ESO/Logis for EMS CAD project for an amount not to exceed \$266,641 over a term of 4 years.

BE IT FURTHER RESOLVED that the Board of Commissioners authorizes the Treasurer to transfer back funds from Fund 261 911 Central Dispatch up to \$266,641, previously authorized per Resolution 2024-12-157, back to General Fund and redesignate as Vision Tour Contingency – Committed Fund Balance.

BE IT FINALLY RESOLVED that the Board of Commissioners authorizes any budget amendment needed to effectuate the changes described above.

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MOVED:
SECONDED:
CARRIED:

Exhibit 1: Nonopioid Directive Summary

Sec. 9145. (1) The department shall develop a nonopioid directive form indicating to health professionals and emergency medical services personnel that, except as otherwise provided in subsection (3) or in rules promulgated by the department under subsection (5), an individual who has executed the form or who has had a form executed on the individual's behalf must not be administered an opioid or offered a prescription for an opioid. The department shall include on the nonopioid directive form instructions on how the form may be revoked and any other information that the department considers relevant. The department shall make the form available to the public on the department's internet website.

(2) An individual may execute a nonopioid directive form on his or her own behalf. A guardian or patient advocate of an individual may execute a nonopioid directive form on behalf of the individual. If a nonopioid directive form is executed by or on behalf of an individual and is presented to a health professional, the health professional shall obtain a copy of the form and include the copy in the individual's medical record. An individual may revoke a nonopioid directive form executed by himself or herself at any time and in any manner by which he or she is able to communicate his or her intent to revoke the form. A patient advocate or guardian may revoke a nonopioid directive form on behalf of an individual at any time by issuing the revocation in writing and providing notice of the revocation to the individual's health professional or his or her delegatee.

Exhibit 2: Nonopioid Directive Form

MDHHS-5793, NONOPIOID DIRECTIVE

Michigan Department of Health and Human Services

Required by MCL 333.9145 effective 3/28/2019

(Revised 6-22)

SECTION 1 - MUST BE INCLUDED IN THE PATIENT'S MEDICAL RECORD – Do not return form to your insurer. Submit form to a health professional who must include it in the patient's medical record.

Patient Name	Date of Birth
Other Names Used by Patient	Preferred Language of Patient
Emergency Contact	Name of Primary Care Provider
Drug Allergies	

SECTION 2

The patient above must not be administered an opioid or offered a prescription for an opioid while this directive is in effect.

- An individual who has executed a nonopioid directive on their own behalf may revoke the directive at any time and in any way, they are able to communicate their intent to revoke the form.
- A guardian or patient's advocate can revoke at any time by issuing a revocation in writing and providing notice of the revocation to the individual's health professional or their delegate.
- This directive does not apply to:
 - A patient receiving opioids for substance use disorder treatment.
 - A patient who is in hospice.
 - A patient is being treated at a hospital, or in a setting outside of a hospital in the case of an emergency, and, in the prescriber's professional opinion, the administration of the opioid is medically necessary to treat the individual.

SECTION 3 - SIGNATURES

Signature of patient, or if the patient is a minor, parent	Date
Printed name of Patient	Date
Signature of guardian or patient's advocate, if applicable	Date
Printed name of parent/guardian/patient's advocate, if applicable	Date

The Michigan Department of Health and Human Services will not exclude from participation in, deny benefits of, or discriminate against any individual or group because of race, sex, religion, age, national origin, color, height, weight, marital status, partisan considerations, or a disability or genetic information that is unrelated to the person's eligibility.