HRSA
Health Resources & Services Administration
Bureau of Primary Health Care
5600 Fishers Lane
Rockville, MD 20857

DATE: August 17, 2026

TO: FTCA Deemed Health Centers

FROM: Acting Associate Administrator, Bureau of Primary Health Care

SUBJECT: Determination of Coverage for Community-Based Prescription and Distribution of Naloxone to Individuals Who Are Not Health Center Patients

Background

Section 224(g)-(n) of the Public Health Service (PHS) Act, 42 U.S.C. § 233(g)-(n), provides eligibility for certain liability protections, including medical malpractice liability coverage under the Federal Tort Claims Act (FTCA), for the performance of medical, dental, surgical, and related functions within the scope of employment for certain individuals who are employed or contracted by an entity receiving Health Center Program funding that has been deemed as a PHS employee for this purpose ("eligible individuals"), as further described in the authorizing statute, federal regulations at 42 CFR part 6, and other Health Center FTCA Program policy issuances. Similar statutory liability protections apply under section 224(q) of the PHS Act, as further described in other Health Center FTCA Program policy issuances, to the provision of qualifying health services on behalf of a health center by volunteer health professionals for whom a health center deeming sponsorship application has been approved under section 224(q).

On October 26, 2017, the Acting Secretary of Health and Human Services determined that, because of the continued consequences of the opioid crisis affecting our nation, an opioid public health emergency exists nationwide. This determination was subsequently renewed by the Secretary, most recently on June 4, 2026, and became effective June 15, 2026.

Health Resources and Services Administration (HRSA) recognizes that, according to the Centers for Disease Control and Prevention (CDC), "Drug overdoses dramatically increased over the last two decades, with the number of deaths increasing approximately 520% from 1999 to 2023. However, drug overdose deaths declined nearly 3% from 2022 to 2023, the first annual decline since 2018." See CDC Opioid Data. Overdose continues to be the leading cause of death among Americans aged 18-44. HHS remains committed to preventing substance use initiation, reducing the number of lives lost to overdose, and helping Americans to overcome substance use disorders, achieve recovery, and live healthy lives. See Secretary Kennedy's Renewal of the Public Health Emergency Declaration to Address National Opioid Crisis. Consistent with this national response, HRSA has determined that extending FTCA liability protection to eligible deemed health centers engaging in the community-based prescription and distribution of naloxone will further the Department's efforts to reduce opioid overdose mortality.

Determination of Coverage

This memorandum sets forth my determination, in accordance with 42 U.S.C. § 233(g)(1)(B) and (C), and under federal regulations set forth in 42 C.F.R. § 6.6, that health centers that have been deemed as Public Health Service employees for purposes of liability protections, and any officer, governing board member, employee, qualified contractor, or volunteer health professional of such an entity ("eligible individuals"), should have liability protections under section 224 of the PHS Act for prescribing and dispensing of naloxone by health centers and their providers to individuals for individual use as a health service when such prescribing and dispensing occurs within the entity's Health Center Program scope of project. In assessing whether such activity is within the Health Center Program scope of project, the following circumstances apply:

- Such prescribing or dispensing occurs at a health center service site or at offsite locations within the community served by the health center and where the health center is providing care (including at offsite programs or events carried out by the health center), whether in-person or through telehealth.

- Prescribing or dispensing is conducted on behalf of the health center.

- The health center maintains a record of each encounter to the extent practicable, including the service(s) provided, the location where services were administered, the name of the provider(s) administering the services, and the date and time the services were administered, and where possible, the individual who receives the prescription or dispensing of naloxone.

- Health services provided under a contractual arrangement between a health center or a health center provider, and a third-party entity or individual are not addressed by this determination of coverage.

- Activities undertaken by the health center for the sole benefit of employees, family, or other associates of an entity, company, or corporation that are not made available to all patients of the health center or to all members of the community are not eligible for coverage.

This coverage determination is based on my conclusion that such prescribing and dispensing of naloxone benefits patients of these entities and general populations that could be served by these entities through community-wide opioid overdose intervention efforts within the communities served by such entities and therefore are eligible for liability protections for the provision of such services under section 42 U.S.C. § 233(g)-(n) and (q).

Services provided by health center providers must continue to comply with applicable Health Center and Health Center FTCA Program requirements (including applicable scope of project) and applicable state and federal law. If you have any questions, please contact the Health Center Program Support Phone: 1-877-464-4772, Option 1, 8:00 a.m. to 5:30 p.m. ET, Monday through Friday (except Federal holidays) or use the BPHC Contact Form.

This determination of coverage will expire one year from its date of issuance.

Tonya Bowers
Acting Associate Administrator