



**House Committee on Corrections and Juvenile Justice**  
**January 25, 2024**

**House Bill 2487**  
**Testimony of the BIDS Legislative Committee**  
**Presented by Emily Brandt**  
**Proponent**

Dear Chairman Owens and Members of the Committee:

Before getting into our proponent testimony, I wanted to thank the Committee for hearing HB 2487. When I was a student government executive at Fort Hays State University, I spent Higher Education Day at the Capitol lobbying for SB 133, known as the “Lifeline 911” bill, and now codified as K.S.A. 41-727(f). I stood with former Governor Sam Brownback as he signed the bill into law. The bill provided immunity from criminal prosecution for certain alcohol-related crimes to individuals under the age of 21 who initiated contact with emergency services and requested medical assistance for any person who reasonably appeared to need it. It was good policy then to ensure people received emergency medical aid without fear of prosecution, and it is good policy now.

The BIDS Legislative Committee supports HB 2487. It is good policy to empower people to seek emergency medical services during a possible drug overdose without the risk of criminal liability. Like the Lifeline 911 bill, this bill will save lives.

However, unlike the Lifeline 911 bill, HB 2487 contains a number of exceptions that give us pause:

**Section (a)(1)(2)(A):** This section limits the number of people who can receive immunity to four persons. This is an arbitrary restriction of the offered immunity that does not seem to serve any specific purpose. It is very easy to contemplate a scenario where young adults at a party may need to call for medical assistance for a possible drug overdose. This restriction would discourage them from doing so and could cost someone their life.

**Section (a)(1)(2)(B):** While this section is likely necessary to collect the required information necessary to grant someone immunity, we would recommend adding a clause that would prohibit officers from conducting a warrant check based on the information provided during the course of providing emergency medical services and the immediate aftermath. Drug users may have outstanding warrants and existing criminal cases. Requiring that they disclose their identities

may be necessary but will actively discourage people from utilizing emergency medical services if they are concerned that they will be arrested on pending warrants when they do so. This recommendation also alleviates some of the concerns regarding Section (c).

**Section (b)(2):** Providing that no person is immune from prosecution if the quantity of the controlled substance found at the scene would be sufficient to create a rebuttable presumption of an intent to distribute. Being concerned with the *amount* of controlled substances present will disincentivize people from seeking emergency medical services—in direct contradiction with the bill’s purpose. Regardless of the amount of controlled substances present, people should be empowered to seek emergency medical services without fear of prosecution.

**Section (c):** Providing that no person is immune from prosecution if they are seeking medical assistance during the course of the execution of an arrest warrant. We have concerns that if a person with an outstanding warrant is the person who initiates contact with an emergency service provider, that the immunity offered by the bill will cease to be available. A person who has an outstanding warrant for another offense should not lose immunity for a violation of K.S.A. 21-5706 or 21-5706(b) if they comply with the provisions of the bill.

**Section (d):** Providing that no person is immune from prosecution if evidence is obtained from an “independent source.” Most concerning is that the bill contains no definition of “independent source.” For example, could a person lose immunity after law enforcement officers conduct an investigation of the scene? If another person present at the scene cooperates with law enforcement officers and tells them that the person who made the call is the person who provided the drugs, does the caller lose immunity? Like Section (b)(2), this would seem to contradict the purpose of the bill.

To achieve the full public safety benefit of HB 2487, we would propose striking or amending the above sections which seek to limit immunity or more narrowly define their limitations. This bill will save lives, but it will save more lives without the above limitations.

Thank you for your time and consideration.

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