

SENATE No. 1242

The Commonwealth of Massachusetts

PRESENTED BY:

Julian Cyr

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act relative to preventing overdose deaths and increasing access to treatment.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	
<i>Julian Cyr</i>	<i>Cape and Islands</i>	
<i>Joanne M. Comerford</i>	<i>Hampshire, Franklin and Worcester</i>	<i>2/7/2023</i>
<i>Jack Patrick Lewis</i>	<i>7th Middlesex</i>	<i>2/7/2023</i>
<i>Vanna Howard</i>	<i>17th Middlesex</i>	<i>2/7/2023</i>
<i>Jacob R. Oliveira</i>	<i>Hampden, Hampshire and Worcester</i>	<i>2/7/2023</i>
<i>John F. Keenan</i>	<i>Norfolk and Plymouth</i>	<i>2/7/2023</i>
<i>Carmine Lawrence Gentile</i>	<i>13th Middlesex</i>	<i>2/7/2023</i>
<i>Sal N. DiDomenico</i>	<i>Middlesex and Suffolk</i>	<i>2/7/2023</i>
<i>Patricia D. Jehlen</i>	<i>Second Middlesex</i>	<i>2/7/2023</i>
<i>Jason M. Lewis</i>	<i>Fifth Middlesex</i>	<i>2/22/2023</i>
<i>James B. Eldridge</i>	<i>Middlesex and Worcester</i>	<i>2/22/2023</i>

SENATE No. 1242

By Mr. Cyr, a petition (accompanied by bill, Senate, No. 1242) of Julian Cyr, Joanne M. Comerford, Jack Patrick Lewis, Vanna Howard and other members of the General Court for legislation relative to preventing overdose deaths and increasing access to treatment. Mental Health, Substance Use and Recovery.

[SIMILAR MATTER FILED IN PREVIOUS SESSION
SEE SENATE, NO. 1272 OF 2021-2022.]

The Commonwealth of Massachusetts

—————
**In the One Hundred and Ninety-Third General Court
(2023-2024)**
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An Act relative to preventing overdose deaths and increasing access to treatment.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 SECTION 1. Notwithstanding any general or special law to the contrary, there shall be a
2 10-year pilot program establishing overdose prevention centers that utilize harm reduction tools,
3 including clinical monitoring of the consumption of pre-obtained controlled substances in the
4 presence of trained staff, for the purpose of reducing the risks of disease transmission and
5 preventing overdose deaths.

6 The department of public health shall promulgate rules and regulations necessary for the
7 operation of an overdose prevention center, including but not limited to, establishing a process to
8 apply for licensure. Entities that provide health and social services, including private
9 organizations and municipal departments, shall be eligible to apply for licensure to operate an

10 overdose prevention center. Approval from the local board of health to participate in the pilot
11 program shall be required before an entity may apply for licensure to operate an overdose
12 prevention center.

13 The department of public health shall send notification and an explanation of the
14 department's approval or denial of licensure, in writing, within 45 days of a completed
15 application to the applicant and to the local board of health where the overdose prevention center
16 would be located. A denial of licensure shall not prohibit an entity from submitting a future
17 application at any time.

18 To be considered for licensure, an overdose prevention center shall, at a minimum:

19 (1) provide a hygienic space where participants may consume pre-obtained controlled
20 substances;

21 (2) provide adequate staffing by healthcare professionals or other trained staff or
22 volunteers;

23 (3) provide sterile injection supplies, collect used hypodermic needles and syringes, and
24 provide secure hypodermic needle and syringe disposal services;

25 (4) provide education on safe consumption practices, proper disposal of hypodermic
26 needles and syringes, and overdose prevention;

27 (5) monitor participants for potential overdose and administer first aid, if needed;

28 (6) provide access or referrals to addiction treatment;

29 (7) educate participants on the risks of contracting HIV and viral hepatitis, and provide
30 access or referrals to prevention, screening, and treatment services;

31 (8) provide access to naloxone or referrals to obtain naloxone for participants;

32 (9) ensure the confidentiality of participants using an anonymous unique identifier, if
33 needed;

34 (10) provide trainings for staff members to deliver services offered by the overdose
35 prevention center or make available any trainings provided by the department of public health, if
36 required;

37 (11) establish standard security procedures in consultation with local law enforcement;
38 and

39 (12) establish standard policies that facilitate communication and education with local
40 businesses, community members, local law enforcement, and first responders.

41 A licensed overdose prevention center shall be authorized as a needle exchange program
42 under section 215 of chapter 111 of the General Laws.

43 Notwithstanding any general or special law or rule or regulation to the contrary, the
44 following persons shall not be arrested, charged, or prosecuted for any criminal offense,
45 including, but not limited to, charges pursuant to sections 13, 32I, 34, 43 or 47 of chapter 94C of
46 the General Laws, or be subject to any civil or administrative penalty, including seizure or
47 forfeiture of data records, assets or property or disciplinary action by a professional licensing
48 board, credentialing restriction, contractual liability, and action against clinical staff or other
49 employment action, or be denied any right or privilege, solely for participation or involvement in

50 an overdose prevention center licensed by the department of public health pursuant to this
51 section: (i) a participant; (ii) a staff member or administrator of a licensed overdose prevention
52 center, including a health-care professional, manager, employee, or volunteer; (iii) a property
53 owner who owns property at which a licensed overdose prevention center is located and
54 operates, (iv) the entity operating the licensed overdose prevention center. Entering or exiting a
55 licensed overdose prevention center cannot serve as the basis for, or a fact contributing to the
56 existence of, reasonable suspicion or probable cause to conduct a search or seizure.

57 The department of public health shall submit a report to the clerks of the senate and house
58 of representatives and to the senate and house chairs of the joint committee on mental health,
59 substance use and recovery. The report shall include site-specific and aggregate data for all
60 licensed overdose prevention centers including but not limited to: (i) number of participant visits;
61 (ii) number of overdoses reversed; (iii) number of referrals to addiction treatment and (iv)
62 number of hypodermic needles and syringes collected and distributed. The report shall be
63 submitted no later than 18 months after implementation of the pilot program, and annually
64 thereafter.

65 SECTION 2. The department of public of health shall promulgate regulations to
66 implement section 1 within 6 months of the effective date of this act.