## Senate proposal of amendment

#### H. 222

An act relating to reducing overdoses

The Senate proposes to the House to amend the bill as follows:

<u>First</u>: In Sec. 2, regional stakeholder meetings; public needle and syringe disposal programs, in subsection (a), in the first sentence, by striking out "<u>Health's Accountable Communities for</u>"

Second: By striking out Sec. 3a, 33 V.S.A. § 2004, in its entirety and inserting in lieu thereof the following:

Sec. 3a. [Deleted.]

<u>Third</u>: In Sec. 6b, 18 V.S.A. § 4752, in subsection (e), after "<u>Department of</u> <u>Vermont Health Access</u>", by inserting the phrase <u>or the Department's</u> <u>pharmacy benefits manager</u>

<u>Fourth</u>: By striking out Sec. 8b, rulemaking; prior authorization; buprenorphine in its entirety and inserting in lieu thereof a new Sec. 8b to read as follows:

### Sec. 8b. RULEMAKING; PRIOR AUTHORIZATION; BUPRENORPHINE

The Department of Vermont Health Access shall amend its rules pursuant to 3 V.S.A. chapter 25 to enable health care providers in office-based opioidtreatment programs to prescribe 24 milligrams or less of the preferred medication for buprenorphine without prior authorization in accordance with 33 V.S.A. § 19011.

<u>Fifth</u>: In Sec. 9, 24 V.S.A. § 4412, subdivision (1)(G), in the first sentence, by striking out the word "<u>and</u>" before the phrase "<u>a recovery residence</u>" and inserting in lieu thereof <u>or</u>

<u>Sixth</u>: In Sec. 9, 24 V.S.A. § 4412, in subdivision (1)(G)(i), by striking out the word "<u>tenants</u>" and inserting in lieu thereof the phrase <u>persons in recovery</u>

<u>Seventh</u>: By inserting a new reader assistance heading and Secs. 11 and 12 after Sec. 10 to read as follows:

\* \* \* Drug Checking for Contamination Detection \* \* \*

Sec. 11. 18 V.S.A. § 4201 is amended to read:

§ 4201. DEFINITIONS

As used in this chapter, unless the context otherwise requires:

\* \* \*

(45) "Drug-checking" means the testing of a substance to determine its chemical composition or assist in determining whether the substance contains contaminants, toxic substances, or hazardous compounds.

Sec. 12. 18 V.S.A. § 4240a is added to read:

# § 4240a. OVERDOSE PREVENTION; DRUG-CHECKING FOR CONTAMINANT DETECTION

(a) Notwithstanding any other provision of law, it shall not be a violation of this chapter to receive, possess, transport, or store samples of a substance that may contain a regulated drug solely for purposes of analyzing the substance to determine its chemical composition and disseminate information regarding the analysis to the provider of the substance.

(b) On-site community drug-checking service providers shall be permitted to:

(1) collect voluntarily provided residual samples of substances potentially containing regulated drugs, possess, transport, or store samples of a regulated drug solely for purposes of analyzing the substances to determine its chemical composition as a lifesaving intervention;

(2) use any available technologies to analyze the contents of samples to obtain timely, highly accurate information regarding the composition of drugs to prevent overdose and mitigate health risks;

(3) provide results of analysis obtained from drug-checking technology to the person requesting drug services;

(4) disseminate data containing only the results of analysis and containing no personally identifiable information to community members at risk of overdose; and

(5) if necessary, arrange for a sample of a drug or substance to be tested by an approved laboratory.

(c) In operating any drug-checking service, no personally identifiable information shall be collected from a person providing a controlled substance to a service provider.

(d) An employee, contractor, volunteer, or other person acting in the good faith provision of drug-checking services and, acting in accordance with established protocols shall not:

(1) be subject to arrest, charge, or prosecution for a violation pursuant to this chapter, including for attempting to, aiding and abetting in, or conspiracy to commit a violation of this chapter;

(2) have their property subject to forfeiture, any civil or administrative penalty, or liability of any kind, including disciplinary action by a professional

licensing board, credentialing restrictions, contractual or civil liability, or medical staff or other employment action; or

(3) be denied any right or privilege for actions, conduct, or omissions relating to the operation of a drug-checking service in compliance with this chapter and any rules adopted pursuant to this chapter.

(e) An individual possessing a regulated substance and who provides any portion of the substance to a program pursuant to this section for purposes of obtaining drug-checking services shall not be subject to arrest, charge, or prosecution for possession of a regulated substance pursuant to this chapter or civil or administrative penalty or disciplinary action by a professional licensing board for a violation of this chapter.

(f) Local governments shall not collect, maintain, use, or disclose any personal information relating to an individual from whom local government receives any drug or substance for checking or disposal.

(g) The result of a test carried out by a drug-checking service provider shall not be admissible as evidence in any criminal or civil proceeding.

(h)(1) The Department of Health shall publish guidance and provide technical assistance for any service provider choosing to implement drug-checking services under this section.

(2) The Department shall coordinate the collection and dissemination of deidentified data related to drug-checking services to inform prevention and public health initiatives.

<u>Eighth</u>: By inserting a new reader assistance heading and Secs. 13 and 14 after the newly added Sec. 12 to read as follows:

\* \* \* Opioid Abatement Special Fund \* \* \*

Sec. 13. 18 V.S.A. § 4774 is amended to read:

### § 4774. OPIOID ABATEMENT SPECIAL FUND

(a)(1) There is created the Opioid Abatement Special Fund, a special fund established and managed pursuant to 32 V.S.A. chapter 7, subchapter 5 and administered by the Department of Health. The Opioid Abatement Special Fund shall consist of all abatement account fund monies disbursed to the Department from the national abatement account fund, the national opioid abatement trust, the supplemental opioid abatement fund, or any other settlement funds that must be utilized exclusively for opioid prevention, intervention, treatment, recovery, and harm reduction services.

(2) The Department shall include <u>submit</u> a spending plan to the General <u>Assembly</u>, informed by the recommendations of the Opioid Settlement Advisory Committee established pursuant to section 4772 of this subchapter,

as part of its annual budget submission, and once <u>funding is</u> approved appropriated by the General Assembly from the Opioid Abatement Special <u>Fund</u>, the Department shall request to have the funds formally released from the national abatement account fund, the national opioid abatement trust, the supplemental opioid abatement fund, or any other settlement funds that must be utilized exclusively for opioid prevention, intervention, treatment, recovery, and harm reduction services. The Department shall disburse monies from the Opioid Abatement Special Fund pursuant to 32 V.S.A. chapter 7, subchapter 3.

\* \* \*

# Sec. 14. APPROPRIATION; OPIOID ABATEMENT SPECIAL FUND

In fiscal year 2023, the following monies shall be appropriated from the Opioid Abatement Special Fund pursuant to 18 V.S.A. § 4774:

(1) \$1,980,000.00 for the expansion of naloxone distribution efforts, including establishing harm reduction vending machines, home delivery and mail order options, and expanding the harm reduction pack and leave behind kit programs;

(2)(A) \$2,000,000.00 divided equally between four opioid treatment programs to cover costs associated with partnering with other health care providers to expand satellite locations for the dosing of medications, including costs associated with the satellite locations' physical facilities, staff time at the satellite locations, and staff time at opioid treatment programs to prepare medications and coordinate with satellite locations;

(B) the satellite locations established pursuant to this subdivision (2) shall be located in Addison County, eastern or southern Vermont, Chittenden County, and a facility operated by the Department of Corrections;

(3)(A) \$1,976,000.00 to fund 26 outreach or case management staff positions within the preferred provider network and within syringe service organizations for the provision of services that increase motivation of and engagement with individuals with substance use disorder in settings such as police barracks, shelters, social service organizations, and elsewhere in the community;

(B) it the intent of the General Assembly that these positions shall be funded annually by the Opioid Abatement Special Fund unless and until the Special Fund does not have sufficient monies to fund this expenditure;

(4) \$400,000.00 divided equally among the State's four syringe service providers to provide overdose prevention services and response education and resources that build trust between individuals with substance use disorder and Vermont's system of care; (5) \$840,000.00 to provide contingency management services to individuals with substance use disorder;

(6) \$100,000.00 to implement a wound care telehealth consultation pilot program for the purpose of utilizing wound care experts to provide telehealth drop-in appointments to address syringe use by individuals with opioid use disorder;

(7) \$200,000.00 to expand the distribution of fentanyl test strips and, if available, xylazine test strips; and

(8)(A) \$700,000.00 to the Department of Health's Division of Substance Use Programs to award one or more grants to an organization or organizations providing or preparing to implement drug-checking services with spectroscopy devices, including high-pressure mass spectrometer (HPMS) or Fourier-transform infrared spectroscopy device (FTIR), in a harm reduction setting;

(B) the grants awarded pursuant to this subdivision (8) shall be based on an applicant's ability to provide publicly available drug-checking services.

And by renumbering the remaining section to be numerically correct.

<u>Ninth</u>: In the newly renumbered Sec. 15, effective dates, before the period, by inserting and Sec. 8b (rulemaking; prior authorization; buprenorphine) shall take effect on January 1, 2024