HOUSE DOCKET, NO. 973 FILED ON: 1/29/2021

HOUSE . . . . . No. 2097

The Commonwealth of Massachusetts

PRESENTED BY:

Tami L. Gouveia

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 advancing public health and safety using fentanyl testing strips.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
Tami L. Gouveia	*14th Middlesex*	*1/29/2021*
Joanne M. Comerford	*Hampshire, Franklin and Worcester*	*2/19/2021*
Michael J. Barrett	*Third Middlesex*	*2/25/2021*

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HOUSE . . . . . No. 2097

By Ms. Gouveia of Acton, a petition (accompanied by bill, House, No. 2097) of Tami L. Gouveia, Joanne M. Comerford and Michael J. Barrett relative to the public health and public safety outcomes of the use of fentanyl testing strips by individuals addicted to opioid and other substances. Mental Health, Substance Use and Recovery.

[SIMILAR MATTER FILED IN PREVIOUS SESSION
SEE HOUSE, NO. *1717* OF 2019-2020.]

The Commonwealth of Massachusetts

In the One Hundred and Ninety-Second General Court
(2021-2022)

An Act advancing public health and safety using fentanyl testing strips.

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

SECTION 1. There shall be a pilot program for the purpose of implementing and studying the efficacy, public health, and public safety outcomes of the use of fentanyl testing strips by individuals addicted to opioid and other substances.

The executive office of health and human services shall develop a 3-year pilot program to implement and study the public health and public safety outcomes of fentanyl testing strips. The pilot program shall be a competitive grant process. The office shall develop criteria for grant eligibility, which shall include the implementation of a fentanyl testing program which shall be designed to (1) enable those struggling with opioid and other drug addiction to test for the presence of fentanyl and other derivatives prior to each episode of drug use; (2) study the

program's public health and public safety outcomes, including any strategies or behaviors adopted by individuals using test strips that result in the reduction of overdose and overdose death and; (3) enable the use of fentanyl test strips by police, service providers, individuals dependent on drugs, and others to support the creation of rapid response systems and public health warnings to reduce incidence of overdose deaths. The office shall develop and make public a list of laboratories offering quality test strips. The list shall be updated annually as part of this pilot program.

SECTION 2. The executive office of health and human services may promulgate rules and regulations for the pilot program, which may include, though not necessarily be limited to:

(i) regulate the nature and manner of testing;

(ii) regulate the procedures and apparatus for testing;

(iv) require and provide for a data collection and management plan to be used by the office to manage outreach, testing, data access, fees and fee payments, and any required reports; and

(v) allow for those participating in the program, in addition to any and all necessary education, treatment, or rehabilitation programs, to access government and non-governmental drug addiction treatment programs while accessing fentanyl testing strips.

The office shall develop guidelines and an evaluation process for review of the fentanyl testing strip program.

SECTION 3. The executive office of health and human services shall report annually on the activities and status of the program to the clerks of the senate and the house, who shall

forward the report to the senate and house cochairs of the joint committee on mental health and substance abuse. The report shall include a list and description of all programs that received grant funds, the size of the grant awarded to each program, other sources of public funds that supported each program, a detailed analysis of the impact of each program, including the number of individuals participating, the types of services each participant received, the health and safety outcomes of the participants at the time they completed the program and 1, 6, 12 and 24 months following participation in the program, and the lives saved and estimated savings due to reduced overdoses.