

HOUSE No. 2008**The Commonwealth of Massachusetts**

PRESENTED BY:

Smitty Pignatelli and Joan B. Lovely*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 helping overdosing persons in emergencies.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Smitty Pignatelli</i>	<i>3rd Berkshire</i>	<i>1/18/2023</i>
<i>Joan B. Lovely</i>	<i>Second Essex</i>	<i>1/18/2023</i>
<i>Kate Donaghue</i>	<i>19th Worcester</i>	<i>1/18/2023</i>
<i>Christopher Hendricks</i>	<i>11th Bristol</i>	<i>1/19/2023</i>
<i>Lindsay N. Sabadosa</i>	<i>1st Hampshire</i>	<i>1/19/2023</i>
<i>Brian W. Murray</i>	<i>10th Worcester</i>	<i>1/25/2023</i>
<i>Kelly W. Pease</i>	<i>4th Hampden</i>	<i>1/26/2023</i>
<i>Josh S. Cutler</i>	<i>6th Plymouth</i>	<i>1/27/2023</i>
<i>Susannah M. Whipps</i>	<i>2nd Franklin</i>	<i>2/2/2023</i>
<i>Carlos González</i>	<i>10th Hampden</i>	<i>2/2/2023</i>
<i>Hannah Kane</i>	<i>11th Worcester</i>	<i>2/3/2023</i>
<i>James K. Hawkins</i>	<i>2nd Bristol</i>	<i>2/6/2023</i>
<i>Angelo L. D'Emilia</i>	<i>8th Plymouth</i>	<i>2/6/2023</i>
<i>Carol A. Doherty</i>	<i>3rd Bristol</i>	<i>2/6/2023</i>
<i>Kimberly N. Ferguson</i>	<i>1st Worcester</i>	<i>2/7/2023</i>
<i>John F. Keenan</i>	<i>Norfolk and Plymouth</i>	<i>2/14/2023</i>
<i>Jason M. Lewis</i>	<i>Fifth Middlesex</i>	<i>2/16/2023</i>
<i>Rebecca L. Rausch</i>	<i>Norfolk, Worcester and Middlesex</i>	<i>2/23/2023</i>

<i>Samantha Montaño</i>	<i>15th Suffolk</i>	<i>2/28/2023</i>
<i>James B. Eldridge</i>	<i>Middlesex and Worcester</i>	<i>3/6/2023</i>
<i>Susan L. Moran</i>	<i>Plymouth and Barnstable</i>	<i>4/11/2023</i>
<i>Patricia A. Duffy</i>	<i>5th Hampden</i>	<i>5/22/2023</i>

HOUSE No. 2008

By Representative Pignatelli of Lenox and Senator Lovely, a joint petition (accompanied by bill, House, No. 2008) of Smitty Pignatelli, Joan B. Lovely and others relative to the requirements and procedures necessary for first responders to provide urgent help to persons at risk of serious and deadly harm from opioids and opioid overdose. Mental Health, Substance Use and Recovery.

The Commonwealth of Massachusetts

In the One Hundred and Ninety-Third General Court
(2023-2024)

An Act helping overdosing persons in emergencies.

Whereas, The deferred operation of this act would tend to defeat its purpose, which is to authorize forthwith certain requirements and procedures necessary for first responders to provide urgent help to persons at risk of serious and deadly harm from opioids and opioid overdose, therefore it is hereby declared to be an emergency law, necessary for the immediate preservation of the public health.

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. Section 1 of chapter 94C of the General Laws, as appearing in the 2020
2 Official Edition, is hereby amended by inserting after the definition of “Opiate” the following
3 definition:-

4 “Opioid antagonist”, a drug, including but not limited to naloxone, approved by the
5 federal Food and Drug Administration for the complete or partial reversal of an opioid or opiate
6 overdose.

7 SECTION 2. Section 34A of chapter 94C of the General Laws, as appearing in the 2018
8 Official Edition, is hereby amended by inserting at the end thereof the following 2 subsections:-

9 f) State and municipal law enforcement personnel and emergency medical personnel
10 including, but not limited to, emergency medical technicians, paramedics, and fire department
11 personnel may provide and transfer an opioid antagonist to an individual or to an individual's
12 family member, friend, or other person with knowledge of an individual's prior substance use,
13 along with instructions on administration and use of the opioid antagonist, to provide opioid
14 overdose protection to an individual. The provision and transfer of an opioid antagonist shall be
15 based upon the good faith judgement of the law enforcement or emergency medical personnel
16 including but not limited to their experience, training, knowledge, observations and the
17 information provided by an individual at substantial risk of experiencing an opioid-related
18 overdose event or from an individual's family, friend or others with knowledge of an
19 individual's prior opioid use; provided, however, that such provision or transfer of opioid
20 antagonists shall be subject such drug's availability; provided further, that a governmental entity
21 or organization that employs such law enforcement and emergency medical personnel may
22 promulgate or implement reasonable rules or regulations concerning such provision or transfer.

23 (g) A person acting in good faith may provide, administer or utilize testing equipment to
24 assist another person in identifying or analyzing the strength, effectiveness or purity of a
25 controlled substance. A person who, in good faith, provides, administers or utilizes testing
26 equipment to assist another person in identifying or in analyzing the strength, effectiveness or
27 purity of a controlled substance shall not be charged or prosecuted for possession of a controlled
28 substance under section 34 or possession of drug paraphernalia under section 32I. Testing

equipment shall include, but not be limited to, fentanyl test strips, colorimetric reagents, high-performance liquid chromatography, gas chromatography and mass spectrometry.

SECTION 3. Section 201 of chapter 111 of the General Laws, as so appearing, is hereby amended by inserting after the first paragraph the following paragraph:-

First aid training required under this section shall include instruction on how to administer opioid antagonists, in overdose emergencies. The training for the administration of opioid antagonists shall meet the standards prescribed by the department. Required personnel shall satisfactorily complete an initial instruction as soon as practical, but in no event more than 1 year after the start date of their employment. Notwithstanding the foregoing, required personnel who began their employment before the effective date of the training requirement prescribed under this paragraph shall satisfactorily complete their instruction as soon as practical, but in no event more than 1 year after said effective date. Satisfactory completion of a refresher course in administering opioid antagonists as approved by the department shall be required every 3 years, unless the department establishes an earlier time requirement by regulation.

SECTION 4. Said chapter 111, as so appearing, is hereby further amended by inserting after section 201, the following section:-

Section 201½. (a) As used in this section, the following words, unless the context clearly requires otherwise, shall have the following meanings:-

“Emergency first response vehicle”, any official government motor vehicle and motorized watercraft that is intended and primarily operated to provide for the transport and rapid response of first responders to emergencies involving the public.

“First responders”, members of police and fire departments, members of the state police participating in highway patrol, and members of emergency reserve units of a volunteer fire department or fire protection district, who are trained to administer an opioid antagonist pursuant to the first aid training requirements under section 201; provided, however, that first responders shall not include police officers, fire department personnel and persons engaged in police and fire work whose duties are primarily clerical or administrative.

“Opioid antagonist”, as defined in section 1 of chapter 94C.

(b) A governmental entity or organization shall be responsible to provide on duty first responders with an opioid antagonist for use in opioid overdose emergencies. This requirement shall be complied with by implementing 1, or any part or combination, of the following methods:

(i) equipping emergency first response vehicles under its ownership, care or control with an opioid antagonist; or (ii) supplying an opioid antagonist to its first responders to be carried by such persons when on duty; provided, however, that replacement doses are made available no less than 48 hours following the administration of the last remaining dose of opioid antagonist provided by the government entity or organization to the first responder or made available in the emergency first response vehicle.

(c) The requirement of a government entity or organization to provide its first responders with an opioid antagonist under this section, shall be subject to such drug’s availability, provided the government entity or organization has taken reasonable measures, as soon as practicable, to acquire and replenish its supply of an obtainable opioid antagonist to comply with this requirement.

71 (d) No cost shall be assessed to first responders by their employing or appointing
72 governmental entity or organization for any opioid antagonist required under this section to be
73 supplied or made available to first responders, including any device necessary for first
74 responders to carry the drug when on duty, which shall be provided by such entity or
75 organization.

76 (e) The immunity provisions established under subsection (g) of section 19B and 34A of
77 chapter 94C shall also apply to first responders who administer an opioid antagonist.

78 SECTION 5. Subsections (b) through (d), inclusive, of Section 4 shall take effect 8
79 months after the passage of this act.