

The Commonwealth of Massachusetts

House of Representatives,

The committee on Bills in the Third Reading, to whom was referred the

engrossed bill An Act establishing the Opioid Recovery and Remediation Trust Fund (see House, No. 5129) being section 3 contained in the engrossed bill making appropriations for fiscal year 2020 to provide for supplementing certain existing appropriations and for certain other activities and projects, (House, No. 5102), which was returned by His excellency the Governor with recommendation of amendment specified by him (for message see House, No. 5130),

Report recommending that the amendment recommended by His Excellency the Governor be considered in the following form:

By striking all after the enacting clause and inserting in place thereof the following:

“Chapter 10 of the General Laws is hereby amended by inserting after section 35NNN, inserted by the section 1 of chapter 132 of the acts of 2019, the following section:-

Section 35000. (a) There shall be an Opioid Recovery and Remediation Fund. Expenditures from the fund shall be made by the executive office of health and human services, subject to appropriation and consistent with the terms of settlements made in connection with claims arising from the manufacture, marketing, distribution or dispensing of opioids, as applicable. The secretary of health and human services, in consultation with the opioid recovery

and remediation trust fund advisory council established in subsection (b), shall administer the fund.

The fund shall be expended to mitigate the impacts of the opioid epidemic in the commonwealth, including, but not limited to, expanding access to opioid use disorder prevention, intervention, treatment and recovery options. Amounts credited to the fund shall be spent subject to appropriation. Monies remaining in the fund at the end of a fiscal year shall not revert to the General Fund, but shall instead be available for expenditure during the next fiscal year. Any fiscal year-end balance in the fund shall be excluded from the calculation of consolidated net surplus pursuant to section 5C of chapter 29.

There shall be credited to the fund: (i) amounts recovered by the commonwealth and credited thereto in connection with claims arising from the manufacture, marketing, distribution or dispensing of opioids; (ii) transfers from other funds authorized by the general court and so designated; (iii) funds from public or private sources, including, but not limited to, gifts, grants, donations, rebates and settlements received by the commonwealth designated to the fund; and (iv) any interest earned on such amounts.

(b) There shall be an opioid recovery and remediation trust fund advisory council regarding the expenditures from the fund. The council shall consist of the following members or their designees: the secretary of health and human services, who shall serve as a non-voting chair; 1 person to be appointed by the senate president; 1 person to be appointed by the speaker

of the house of representatives; 1 person to be appointed by the minority leader of the senate; 1 person to be appointed by the minority leader of the house of representatives; 3 persons to be appointed by the governor, including not less than 1 person qualified by experience with opioid use disorder, either first-hand or as a family member of an individual with opioid use disorder; 3 persons to be appointed by the attorney general, including not less than 1 person qualified by experience with opioid use disorder, either first-hand or as a family member of an individual with opioid use disorder; and 10 people to be appointed by the Massachusetts Municipal Association, Inc., who are officials employed by a city or town and who represent the diversity of the commonwealth's cities and towns; provided, however, that not less than 2 officials appointed under this clause shall be employed by a city or town that is a gateway municipality, as defined in section 3A of chapter 23A; and provided, further, that no 2 officials appointed under this clause shall be employed by a city or town that is in the same county.

In making appointments, the appointing authorities shall ensure that the council includes: (i) members representing racially and socioeconomically diverse communities; (ii) members with public health expertise concerning opioid use disorder; (iii) members with personal experience with opioid use disorder; and (iv) members who will contribute to reducing disparities in health outcomes for underserved communities experiencing opioid use disorder. The appointing authorities shall also consider having racially diverse representation on the council.

The council shall hold no fewer than 4 meetings annually and the council shall make its recommendations upon a majority vote. The council shall be subject to sections 18 to 25, inclusive, of chapter 30A. Council members shall serve without compensation for terms of 2 years. Members shall be reimbursed for actual expenses necessarily incurred in the performance of their duties. Any member shall be eligible for reappointment. In the event of a vacancy, the original appointing authority shall appoint a new member to fulfill the remainder of the unexpired term. Any member who is appointed may be removed by the appointing authority. The secretary of health and human services shall provide administrative support to the council.

(c) Annually, not later than October 1, the secretary of health and human services shall file a report on the activity, revenue and expenditures to and from the fund in the prior fiscal year with the clerks of the senate and the house of representatives, the house and senate committees on ways and means and the joint committee on mental health, substance use and recovery and made available on the executive office of health and human services' public website. The report shall include, but not be limited to: (i) the revenue credited to the fund; (ii) the amount of expenditures attributable to the administrative costs of the executive office; (iii) an itemized list of the funds expended from the fund; and (iv) data and an assessment of how well resources have been directed to vulnerable and under-served communities.”

And that when so amended the same will be correctly drawn.

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For the Committee.