# By: Delegates Lam, Anderson, Carr, Ebersole, Fraser-Hidalgo, Glenn, Haynes, Hettleman, Hill, Jalisi, A. Miller, Moon, Morales, Morhaim, Oaks, Platt, Reznik, B. Robinson, Smith, Tarlau, M. Washington, and K. Young Introduced and read first time: February 1, 2016 Assigned to: Health and Government Operations

# A BILL ENTITLED

## 1 AN ACT concerning

## 2 Public Health – Opioid–Associated Disease Prevention and Outreach Programs

3 FOR the purpose of repealing the Prince George's County AIDS Prevention Sterile Needle 4 and Syringe Exchange Program; authorizing the establishment of Opioid-Associated Disease Prevention and Outreach Programs by certain entities;  $\mathbf{5}$ 6 requiring a Program to provide for the exchange by participants of used hypodermic 7 needles and syringes; requiring a Program to operate in accordance with procedures 8 approved by certain local health officers and the Department of Health and Mental 9 Hygiene, on the recommendation of a certain committee; requiring a Program to be 10 designed and maintained to provide security of exchange locations and equipment, 11 in accordance with certain regulations; requiring a Program to be operated to allow 12participants to exchange used hypodermic needles at any exchange location; 13requiring a Program to include appropriate levels of staff expertise and training; 14requiring a Program to provide for the dissemination of other preventive means of 15curtailing the spread of certain diseases; requiring a Program to provide linkage to 16drug counseling and treatment services; requiring a Program to educate individuals 17who inject drugs on the dangers of contracting certain diseases through 18needle-sharing practices and unsafe sexual behaviors; requiring a Program to 19establish procedures for identifying Program participants that are consistent with 20certain confidentiality provisions; requiring a Program to develop a plan for data 21 collection and Program evaluation in accordance with certain regulations; requiring 22a Program to develop certain operating procedures, a certain outreach plan, and a 23certain protocol with the advice of a certain committee; requiring a Program, on the 24recommendation by a certain committee, to submit certain operating procedures, a 25certain outreach plan, and a certain protocol to certain local health officers and the 26Department of Health and Mental Hygiene for approval or disapproval; establishing 27a certain committee; requiring a certain committee to provide certain advice and 28recommendations; requiring the Department of Health and Mental Hygiene to adopt 29certain regulations and ensure the provision of certain technical assistance;

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW. [Brackets] indicate matter deleted from existing law.



1 requiring that a Program participant be issued a certain identification card; 2 providing that certain information about a Program participant is confidential; 3 providing that a Program staff member or Program participant may not be found 4 guilty of violating certain laws under certain circumstances; defining certain terms; 5 and generally relating to Opioid–Associated Disease Prevention and Outreach 6 Programs.

7 BY repealing

- 8 Article Health General
- 9 Section 24–901 through 24–909 and the subtitle "Subtitle 9. Prince George's County
   10 AIDS Prevention Sterile Needle and Syringe Exchange Program"
- 11 Annotated Code of Maryland
- 12 (2015 Replacement Volume)
- 13 BY adding to

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- 14 Article Health General
- Section 24–901 through 24–908 to be under the new subtitle "Subtitle 9.
   Opioid–Associated Disease Prevention and Outreach Programs"
- 17 Annotated Code of Maryland
- 18 (2015 Replacement Volume)

#### Preamble

WHEREAS, Infectious diseases, such as HIV, hepatitis B, and hepatitis C, persist in Maryland, with injection drug use as a frequent cause of transmission, and there is a need to control the spread of these diseases; and

WHEREAS, Syringe exchange programs provide access to individuals who inject drugs and engage these individuals in sexually transmitted infection screening, testing, and treatment; hepatitis C screening, testing, and treatment; and HIV screening, testing, and long-term care or pre-exposure prophylaxis; and

WHEREAS, Syringe exchange programs provide comprehensive services for individuals at risk of HIV, hepatitis C, injection–related wounds, and drug overdose, ultimately decreasing the risk of each negative outcome for the individual; and

WHEREAS, Syringe exchange programs have contributed to decreases in the incidence of HIV and hepatitis C in areas in which the programs operate, including in Baltimore City; and

33 WHEREAS, Syringe exchange programs enhance the collection of data and 34 information on substance–related disorder trends and patterns; and

WHEREAS, Overdose deaths in Maryland have increased dramatically, specifically from opioid use leading to heroin use, and syringe exchange programs provide an opportunity to provide overdose prevention education and distribute naloxone directly to individuals at risk of overdose; and

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1 WHEREAS, Syringe exchange programs provide an opportunity to link individuals 2 who inject drugs to substance–related disorder treatment and other health services; and

3 WHEREAS, Syringe exchange programs assist individuals who inject drugs by 4 preventing injection-related wounds and decreasing emergency room visits and associated 5 costs; and

6 WHEREAS, Syringe exchange programs have been shown to decrease the presence 7 of syringes and needles in public places; and

8 WHEREAS, Syringe exchange programs provide for proper disposal of contaminated 9 syringes, reducing the number of improperly, casually disposed of syringes that become 10 litter; and

11 WHEREAS, Syringe exchange programs have been shown to decrease crime rates in 12 areas in which the programs operate, and their operation is supported by law enforcement; 13 and

14 WHEREAS, Syringe exchange programs have a public health impact that is cost 15 effective; now, therefore,

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
That Section(s) 24–901 through 24–909 and the subtitle "Subtitle 9. Prince George's County
AIDS Prevention Sterile Needle and Syringe Exchange Program" of Article – Health
General of the Annotated Code of Maryland be repealed.

20 SECTION 2. AND BE IT FURTHER ENACTED, That the Laws of Maryland read 21 as follows:

22 Article – Health – General

# 23 SUBTITLE 9. OPIOID-ASSOCIATED DISEASE PREVENTION AND OUTREACH 24 PROGRAMS.

25 **24–901.** 

26 (A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS 27 INDICATED.

(B) "COMMUNITY–BASED ORGANIZATION" MEANS AN ORGANIZATION THAT IS REPRESENTATIVE OF A COMMUNITY OR SIGNIFICANT SEGMENTS OF A COMMUNITY AND PROVIDES EDUCATIONAL, HEALTH, OR SOCIAL SERVICES TO INDIVIDUALS IN THE COMMUNITY.

32 (C) "COUNTY" DOES NOT INCLUDE BALTIMORE CITY.

1 (D) "DRUG" HAS THE MEANING STATED IN § 8–101 OF THIS ARTICLE.

2 (E) "HEPATITIS C VIRUS" HAS THE MEANING STATED IN A CASE DEFINITION 3 ADOPTED BY THE FEDERAL CENTERS FOR DISEASE CONTROL AND PREVENTION.

4 (F) "HIV" MEANS THE HUMAN IMMUNODEFICIENCY VIRUS THAT CAUSES 5 ACQUIRED IMMUNE DEFICIENCY SYNDROME (AIDS).

6 (G) "LOCAL HEALTH OFFICER" DOES NOT INCLUDE THE BALTIMORE CITY 7 COMMISSIONER OF HEALTH.

8 (H) "PARTICIPANT" MEANS AN INDIVIDUAL WHO HAS REGISTERED WITH A 9 PROGRAM.

10 (I) "PROGRAM" MEANS AN OPIOID-ASSOCIATED DISEASE PREVENTION 11 AND OUTREACH PROGRAM.

12 (J) "RESIDUE" MEANS THE DRIED REMAINS OF A CONTROLLED 13 DANGEROUS SUBSTANCE ATTACHED TO OR CONTAINED WITHIN A HYPODERMIC 14 NEEDLE OR SYRINGE.

15 (K) "SUBSTANCE-RELATED DISORDER" HAS THE MEANING STATED IN 16 § 7.5–101 OF THIS ARTICLE.

17 **24–902.** 

18 (A) (1) A PROGRAM MAY BE ESTABLISHED BY A LOCAL HEALTH 19 DEPARTMENT OR A COMMUNITY-BASED ORGANIZATION, SUBJECT TO THE 20 PROVISIONS OF THIS SUBTITLE.

21 (2) A COMMUNITY-BASED ORGANIZATION MAY ESTABLISH A 22 MULTICOUNTY PROGRAM.

23 (B) IF ESTABLISHED UNDER SUBSECTION (A) OF THIS SECTION, A PROGRAM 24 SHALL:

(1) PROVIDE FOR SUBSTANCE USE OUTREACH, EDUCATION, AND
 LINKAGE TO TREATMENT SERVICES, INCLUDING THE EXCHANGE BY PARTICIPANTS
 OF USED HYPODERMIC NEEDLES AND SYRINGES FOR STERILE HYPODERMIC
 NEEDLES AND SYRINGES; AND

29 (2) **OPERATE IN ACCORDANCE WITH:** 

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1	(I) THE ADVICE OF THE STANDING ADVISORY COMMITTEE;
2	AND
3	(II) THE PROCEDURES, PLANS, AND PROTOCOLS APPROVED BY:
4	<b>1.</b> The local health officer for each county in
5	WHICH A PROGRAM IS ESTABLISHED; AND
6	2. THE DEPARTMENT.
7	24-903.
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8	(A) A PROGRAM SHALL:
9	(1) BE DESIGNED AND MAINTAINED TO PROVIDE SECURITY OF
10	EXCHANGE LOCATIONS AND EQUIPMENT, IN ACCORDANCE WITH REGULATIONS
11	ADOPTED BY THE DEPARTMENT;
12	(2) BE OPERATED TO ALLOW PARTICIPANTS TO EXCHANGE USED
13	HYPODERMIC NEEDLES AND SYRINGES AT ANY EXCHANGE LOCATION, IF MORE THAN
14	ONE LOCATION IS AVAILABLE;
15	(3) INCLUDE APPROPRIATE LEVELS OF STAFF EXPERTISE IN
16	WORKING WITH INDIVIDUALS WHO INJECT DRUGS;
17	(4) INCLUDE ADEQUATE STAFF TRAINING IN PROVIDING COMMUNITY
18	REFERRALS, COUNSELING, AND PREVENTIVE EDUCATION;
19	(5) <b>PROVIDE FOR THE DISSEMINATION OF OTHER PREVENTIVE</b>
20	MEANS FOR CURTAILING THE SPREAD OF HIV AND THE HEPATITIS C VIRUS;
21	(6) <b>PROVIDE LINKAGE TO SUBSTANCE-RELATED DISORDER</b>
22	COUNSELING, TREATMENT, AND RECOVERY SERVICES;
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23	(7) EDUCATE INDIVIDUALS WHO INJECT DRUGS ON THE DANGERS OF
24	CONTRACTING HIV, THE HEPATITIS B VIRUS, AND THE HEPATITIS C VIRUS
25	THROUGH NEEDLE–SHARING PRACTICES AND UNSAFE SEXUAL BEHAVIORS;
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26	(8) ESTABLISH PROCEDURES FOR IDENTIFYING PROGRAM
27	PARTICIPANTS THAT ARE CONSISTENT WITH THE CONFIDENTIALITY PROVISIONS OF
28	THIS SUBTITLE;

1 (9) ESTABLISH A METHOD OF IDENTIFICATION AND AUTHORIZATION 2 FOR PROGRAM STAFF MEMBERS WHO HAVE ACCESS TO HYPODERMIC NEEDLES, 3 SYRINGES, OR PROGRAM RECORDS; AND

4 (10) DEVELOP A PLAN FOR DATA COLLECTION AND PROGRAM 5 EVALUATION IN ACCORDANCE WITH REGULATIONS ADOPTED BY THE DEPARTMENT.

6 (B) WITH THE ADVICE OF THE STANDING ADVISORY COMMITTEE, A 7 PROGRAM SHALL DEVELOP:

8 (1) PROGRAM OPERATING PROCEDURES FOR THE FURNISHING AND 9 EXCHANGE OF HYPODERMIC NEEDLES AND SYRINGES TO INDIVIDUALS WHO INJECT 10 DRUGS;

11 (2) A COMMUNITY OUTREACH AND EDUCATION PLAN; AND

12 (3) A PROTOCOL FOR LINKING PROGRAM PARTICIPANTS TO 13 SUBSTANCE-RELATED DISORDER TREATMENT AND RECOVERY SERVICES.

(C) ON THE RECOMMENDATION OF THE STANDING ADVISORY COMMITTEE,
A PROGRAM SHALL SUBMIT THE OPERATING PROCEDURES, PLAN FOR COMMUNITY
OUTREACH AND EDUCATION, AND PROTOCOL FOR LINKING PROGRAM
PARTICIPANTS TO SUBSTANCE-RELATED DISORDER TREATMENT AND RECOVERY
SERVICES DEVELOPED UNDER SUBSECTION (B) OF THIS SECTION FOR APPROVAL OR
DISAPPROVAL BEFORE IMPLEMENTATION TO:

20 (1) THE LOCAL HEALTH OFFICER FOR EACH COUNTY IN WHICH A 21 PROGRAM IS ESTABLISHED; AND

- 22 (2) **THE DEPARTMENT.**
- 23 **24–904.**

24 (A) THE DEPARTMENT SHALL APPOINT A STANDING ADVISORY 25 COMMITTEE ON OPIOID-ASSOCIATED DISEASE PREVENTION AND OUTREACH 26 PROGRAMS.

27 (B) THE STANDING ADVISORY COMMITTEE SHALL CONSIST OF:

28 (1) THE DEPUTY SECRETARY FOR PUBLIC HEALTH SERVICES;

29 (2) ONE INDIVIDUAL FROM ACADEMIA WHO SPECIALIZES IN PUBLIC 30 HEALTH ISSUES;

BY THE EXECUTIVE DIRECTOR OF THE GOVERNOR'S OFFICE OF CRIME CONTROL

**ONE REPRESENTATIVE FROM LAW ENFORCEMENT, NOMINATED** 

(3)

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AND PREVENTION; 3 **ONE INDIVIDUAL WITH EXPERTISE IN THE PREVENTION OF HIV** 4 (4) OR THE HEPATITIS C VIRUS: 56 (5) **ONE SUBSTANCE-RELATED DISORDER COUNSELOR;** (6) **ONE INDIVIDUAL IN RECOVERY WHO INJECTED DRUGS;** 7 8 (7) **ONE REPRESENTATIVE OF LOCAL LAW ENFORCEMENT;** 9 (8) **ONE LOCAL HEALTH OFFICER;** 10 (9) **ONE REPRESENTATIVE OF A LOCAL OR REGIONAL HOSPITAL;** 11 (10) ONE INDIVIDUAL WITH EXPERIENCE IN SYRINGE EXCHANGE 12**PROGRAMS; AND** 13(11) ANY ADDITIONAL MEMBERS THE RECOMMENDED BY **DEPARTMENT.** 14 THE DEPUTY SECRETARY FOR PUBLIC HEALTH SERVICES SHALL 15**(C)** SERVE AS CHAIR OF THE STANDING ADVISORY COMMITTEE. 16 THE STANDING ADVISORY COMMITTEE SHALL: 17**(**D**) ADVISE EACH PROGRAM ON DEVELOPING:** 18 (1) 19 **(I) PROGRAM OPERATING PROCEDURES FOR THE FURNISHING** AND EXCHANGE OF HYPODERMIC NEEDLES AND SYRINGES TO INDIVIDUALS WHO 2021**INJECT DRUGS;** 

22 (II) A PLAN FOR COMMUNITY OUTREACH AND EDUCATION; AND

23 (III) A PROTOCOL FOR LINKING PROGRAM PARTICIPANTS TO 24 SUBSTANCE-RELATED DISORDER TREATMENT AND RECOVERY SERVICES;

25 (2) BEFORE A PROGRAM BEGINS OPERATING, REVIEW AND MAKE A 26 RECOMMENDATION FOR THE APPROVAL OR DISAPPROVAL OF THE OPERATING 27 PROCEDURES, PLAN FOR COMMUNITY OUTREACH AND EDUCATION, AND PROTOCOL

FOR LINKING PROGRAM PARTICIPANTS TO SUBSTANCE-RELATED DISORDER TREATMENT AND RECOVERY SERVICES TO:
(I) THE LOCAL HEALTH OFFICER FOR EACH COUNTY IN WHICH A PROGRAM IS LOCATED; AND
(II) THE DEPARTMENT; AND
(3) MAKE RECOMMENDATIONS TO A PROGRAM REGARDING ANY ASPECT OF PROGRAM PROCEDURES OR OPERATION.
24-905.
(A) THE DEPARTMENT SHALL:
(1) ADOPT REGULATIONS FOR THE IMPLEMENTATION OF THIS SUBTITLE, IN CONSULTATION WITH THE STANDING ADVISORY COMMITTEE AND THE MARYLAND ASSOCIATION OF COUNTY HEALTH OFFICERS; AND
(2) ENSURE THE PROVISION OF TECHNICAL ASSISTANCE TO A PROGRAM ABOUT BEST PRACTICES, BEST PRACTICE PROTOCOLS, AND OTHER SUBJECT AREAS.
(B) THE REGULATIONS ADOPTED UNDER SUBSECTION (A)(1) OF THIS SECTION SHALL INCLUDE A PLAN FOR SECURITY OF EXCHANGE LOCATIONS AND EQUIPMENT, DATA COLLECTION, AND PROGRAM EVALUATION.
24-906.
(A) (1) EACH PROGRAM PARTICIPANT SHALL BE ISSUED AN IDENTIFICATION CARD WITH AN IDENTIFICATION NUMBER.
(2) THE IDENTIFICATION NUMBER SHALL BE CROSS–INDEXED TO A CONFIDENTIAL RECORD CONTAINING PERTINENT DATA ON THE PARTICIPANT.
(B) ANY INFORMATION OBTAINED BY A PROGRAM THAT IDENTIFIES PROGRAM PARTICIPANTS, INCLUDING PROGRAM RECORDS, IS:
(1) CONFIDENTIAL;
(2) NOT OPEN TO PUBLIC INSPECTION OR DISCLOSURE; AND
(3) NOT DISCOVERABLE IN ANY CRIMINAL OR CIVIL PROCEEDING.

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1 (C) (1) NOTWITHSTANDING THE PROVISIONS OF SUBSECTION (B) OF THIS 2 SECTION, ON THE WRITTEN CONSENT OF A PROGRAM PARTICIPANT, INFORMATION 3 OBTAINED BY A PROGRAM THAT IDENTIFIES THE PROGRAM PARTICIPANT MAY BE 4 RELEASED OR DISCLOSED TO AN INDIVIDUAL OR AGENCY PARTICIPATING IN A 5 PROGRAM.

6 (2) IN ADDITION TO THE PROVISIONS OF PARAGRAPH (1) OF THIS 7 SUBSECTION, IF A PROGRAM PARTICIPANT RAISES THE ISSUE OF PARTICIPATION IN 8 A PROGRAM EITHER AS A SUBJECT MATTER OR LEGAL DEFENSE IN AN 9 ADMINISTRATIVE, CIVIL, OR CRIMINAL PROCEEDING, THE PROGRAM PARTICIPANT 10 WAIVES THE CONFIDENTIALITY AS TO IDENTITY PROVIDED UNDER SUBSECTION (B) 11 OF THIS SECTION.

12 (3) SUBSTANCE-RELATED TREATMENT RECORDS REQUESTED OR 13 PROVIDED UNDER THIS SECTION ARE SUBJECT TO ANY ADDITIONAL LIMITATIONS 14 ON DISCLOSURE OR RE-DISCLOSURE OF A MEDICAL RECORD DEVELOPED IN 15 CONNECTION WITH THE PROVISION OF SUBSTANCE-RELATED TREATMENT 16 SERVICES UNDER STATE LAW OR 42 U.S.C. § 290DD-2 AND 42 C.F.R. PART 2.

17 **24–907.** 

18 (A) NO PROGRAM STAFF MEMBER OR PROGRAM PARTICIPANT MAY BE 19 FOUND GUILTY OF VIOLATING § 5–601, § 5–619, § 5–620, § 5–902, OR § 5–904 OF THE 20 CRIMINAL LAW ARTICLE FOR POSSESSING OR DISTRIBUTING CONTROLLED 21 PARAPHERNALIA OR DRUG PARAPHERNALIA WHENEVER THE POSSESSION OR 22 DISTRIBUTION OF THE CONTROLLED PARAPHERNALIA OR DRUG PARAPHERNALIA IS 23 A DIRECT RESULT OF THE EMPLOYEE'S OR PARTICIPANT'S ACTIVITIES IN 24 CONNECTION WITH THE WORK OF A PROGRAM AUTHORIZED UNDER THIS SUBTITLE.

25 (B) NOTWITHSTANDING THE PROVISIONS OF SUBSECTION (A) OF THIS 26 SECTION, A PROGRAM STAFF MEMBER OR PROGRAM PARTICIPANT IS NOT IMMUNE 27 FROM CRIMINAL PROSECUTION FOR:

28 (1) ANY ACTIVITIES NOT AUTHORIZED OR APPROVED BY A PROGRAM;
 29 OR

30 (2) THE POSSESSION OR DISTRIBUTION OF CONTROLLED 31 PARAPHERNALIA OR DRUG PARAPHERNALIA OR ANY OTHER UNLAWFUL ACTIVITY 32 OUTSIDE THE COUNTY LIMITS FOR ANY COUNTY IN WHICH A PROGRAM IS 33 ESTABLISHED.

34 **24–908.** 

EXCEPT FOR VIOLATIONS OF ANY LAWS THAT COULD ARISE FROM RESIDUE 1  $\mathbf{2}$ ATTACHED TO OR CONTAINED WITHIN HYPODERMIC NEEDLES OR SYRINGES BEING RETURNED OR ALREADY RETURNED TO A PROGRAM, NOTHING IN THIS SUBTITLE 3 PROVIDES IMMUNITY TO A PROGRAM STAFF MEMBER OR PROGRAM PARTICIPANT 4 FROM CRIMINAL PROSECUTION FOR A VIOLATION OF ANY LAW PROHIBITING OR  $\mathbf{5}$ **REGULATING THE USE, POSSESSION, DISPENSING, DISTRIBUTION, OR PROMOTION** 6 7 OF CONTROLLED DANGEROUS SUBSTANCES, DANGEROUS DRUGS, DETRIMENTAL 8 DRUGS, OR HARMFUL DRUGS OR ANY CONSPIRACY OR ATTEMPT TO COMMIT ANY OF 9 THOSE OFFENSES.

10 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect 11 October 1, 2016.