19 Section 1. Short title.

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 1662 Session of 2019

INTRODUCED BY DIGIROLAMO, KINSEY, ZABEL, SCHLOSSBERG, MILLARD, HOHENSTEIN, HOWARD, DeLUCA, SAYLOR, T. DAVIS, FREEMAN, NEILSON, SIMS, MOUL, HILL-EVANS, WEBSTER, POLINCHOCK, ROZZI, NELSON, STRUZZI, PASHINSKI, RIGBY, SCHLEGEL CULVER, COMITTA, GREGORY AND MIHALEK, JUNE 19, 2019

AS AMENDED ON SECOND CONSIDERATION, HOUSE OF REPRESENTATIVES, SEPTEMBER 19, 2019

Amending the act of October 24, 2012 (P.L.1198, No.148),

AN ACT

entitled "An act establishing the Methadone Death and Incident Review Team and providing for its powers and duties; and imposing a penalty," further providing for title of act, 4 for short title, for definitions, for establishment of Methadone Death and Incident Review Team, for team duties, 7 for duties of coroner and medical examiner, for review procedures and for confidentiality. The General Assembly of the Commonwealth of Pennsylvania 9 10 hereby enacts as follows: 11 Section 1. The title and sections 1, 2, 3 heading, (a) and 12 (b)(3), 4, 5, 6 and 8(a) and (f) of the act of October 24, 2012 13 (P.L.1198, No.148), known as the Methadone Death and Incident Review Act, are amended to read: 14 15 An Act 16 Establishing the [Methadone] and Buprenorphine MEDICATION Death <--17 and Incident Review Team and providing for its powers and duties; and imposing a penalty. 18

- 1 This act shall be known and may be cited as the [Methadone] <--
- 2 and Buprenorphine MEDICATION Death and Incident Review Act. <--
- 3 Section 2. Definitions.
- 4 The following words and phrases when used in this act shall
- 5 have the meanings given to them in this section unless the
- 6 context clearly indicates otherwise:
- 7 "Department." The Department of Drug and Alcohol Programs of
- 8 the Commonwealth.
- 9 ["Methadone-related] or buprenorphine related "MEDICATION- <--
- 10 RELATED death." A death where [methadone] or buprenorphine A <--
- 11 MEDICATION APPROVED BY THE UNITED STATES FOOD AND DRUG
- 12 ADMINISTRATION FOR THE TREATMENT OF OPIOID USE DISORDER was:
- 13 (1) a primary or secondary cause of death; or
- 14 (2) may have been a contributing factor.
- 15 ["Methadone-related] or buprenorphine-related "MEDICATION- <--
- 16 <u>RELATED</u> incident." A situation where [methadone] <u>or</u> <--
- 17 buprenorphine A MEDICATION APPROVED BY THE UNITED STATES FOOD <--
- 18 AND DRUG ADMINISTRATION FOR THE TREATMENT OF OPIOID USE DISORDER
- 19 may be a contributing factor which:
- 20 (1) does not involve a fatality; and
- 21 (2) involves:
- 22 (i) a serious injury; or
- 23 (ii) unreasonable risk of death or serious injury.
- ["Narcotic treatment program."] "Opioid-assisted treatment
- 25 program." A program licensed and approved by the Department of
- 26 Drug and Alcohol Programs for chronic opiate drug users that
- 27 administers or dispenses agents under a narcotic treatment
- 28 physician's order, either for detoxification purposes or for
- 29 maintenance.
- 30 "OPIOID USE DISORDER." A PROBLEMATIC PATTERN OF OPIOID USE

1	LEADING TO CLINICALLY SIGNIFICANT IMPAIRMENT OR DISTRESS.	
2	"Secretary." The Secretary of Drug and Alcohol Programs of	
3	the Commonwealth.	
4	"Team." The [Methadone] and Buprenorphine MEDICATION Death	<
5	and Incident Review Team established under section 3.	
6	Section 3. Establishment of [Methadone] and Buprenorphine	<
7	MEDICATION Death and Incident Review Team.	<
8	(a) Team establishedThe department shall establish a	
9	[Methadone] and Buprenorphine MEDICATION Death and Incident	<
10	Review Team and conduct a review and shall examine the	
11	circumstances surrounding [methadone-related] or buprenorphine-	<
12	$rac{ ext{related}}{ ext{MEDICATION-RELATED}}$ deaths and [methadone-related] $rac{ ext{or}}{ ext{or}}$	<
13	<u>buprenorphine-related</u> <u>MEDICATION-RELATED</u> incidents in this	<
14	Commonwealth for the purpose of promoting safety, reducing	<
15	[methadone-related] or buprenorphine-related MEDICATION-RELATED	<
16	deaths and [methadone-related] or buprenorphine-related	<
17	MEDICATION-RELATED incidents and improving treatment practices.	<
18	(b) Composition The team shall consist of the following	
19	individuals:	
20	* * *	
21	(3) The following individuals appointed by the	
22	secretary:	
23	(i) A representative from [narcotic treatment	
24	programs as defined in 28 Pa. Code § 701.1 (relating to	
25	definitions)] an opioid-assisted treatment program.	
26	(ii) A representative from a licensed drug and	
27	alcohol addiction treatment program that is not defined	
28	as [a narcotic treatment program] an opioid-assisted	
29	treatment program.	
30	(iii) A representative from law enforcement	

1	recommended by a Statewide association representing
2	members of law enforcement.
3	(iv) A representative from the medical community
4	recommended by a Statewide association representing
5	physicians.
6	(v) A district attorney recommended by a Statewide
7	association representing district attorneys.
8	(vi) A coroner or medical examiner recommended by a
9	Statewide association representing county coroners and
10	medical examiners.
11	(vii) A member of the public.
12	(viii) A patient or family advocate.
13	(ix) A representative from a recovery organization.
14	(X) AN OFFICE-BASED AGONIST TREATMENT PROVIDER WHO <
15	IS ASSIGNED A WAIVER FROM THE DRUG ENFORCEMENT
16	ADMINISTRATION, INCLUDING A SPECIAL IDENTIFICATION
17	NUMBER, COMMONLY REFERRED TO AS THE "X" DEA NUMBER, TO
18	PROVIDE OFFICE-BASED PRESCRIBING OF BUPRENORPHINE.
19	(XI) A REPRESENTATIVE OF THE DEPARTMENT OF HEALTH
20	WHO IS AFFILIATED WITH THE ACHIEVING BETTER CARE BY
21	MONITORING ALL PRESCRIPTIONS PROGRAM (ABC-MAP)
22	ESTABLISHED UNDER THE ACT OF OCTOBER 27, 2014 (P.L.2911,
23	NO.191), KNOWN AS THE ACHIEVING BETTER CARE BY MONITORING
24	ALL PRESCRIPTIONS PROGRAM (ABC-MAP) ACT.
25	(XII) A TOXICOLOGIST.
26	* * *
27	Section 4. Team duties.
28	The team shall:
29	(1) Review each <u>MEDICATION-RELATED</u> death where <
30	[methadone] or buprenorphine A MEDICATION APPROVED BY THE <

1	UNITED STATES FOOD AND DRUG ADMINISTRATION FOR THE TREATMENT	
2	OF OPIOID USE DISORDER was either the primary or a secondary	
3	cause of death and review [methadone-related] or	<
4	<u>buprenorphine related</u> <u>MEDICATION-RELATED</u> incidents.	<
5	(2) Determine the role that [methadone] or buprenorphine	_<
6	A MEDICATION APPROVED BY THE UNITED STATES FOOD AND DRUG	<
7	ADMINISTRATION FOR THE TREATMENT OF OPIOID USE DISORDER	
8	played in each death and [methadone-related] or	<
9	<u>buprenorphine-related</u> <u>MEDICATION-RELATED</u> incident.	<
10	(3) Communicate concerns to regulators and facilitate	
11	communication within the health care and legal systems about	
12	issues that could threaten health and public safety.	
13	(4) Develop best practices to prevent future [methadone-	<
14	related] or buprenorphine related MEDICATION-RELATED deaths	<
15	and [methadone-related] or buprenorphine-related MEDICATION-	<
16	RELATED incidents. The best practices shall be:	
17	(i) Promulgated by the department as regulations.	
18	(ii) Posted on the department's Internet website.	
19	(5) Collect and store data on the number of [methadone-	<
20	related] or buprenorphine related MEDICATION-RELATED deaths	<
21	and [methadone-related] or buprenorphine-related MEDICATION-	<
22	RELATED incidents and provide a brief description of each	
23	death and incident. The aggregate statistics shall be posted	
24	on the department's Internet website. [The team may collect	<
25	and store data concerning deaths and incidents related to	
26	other drugs used in opiate treatment.]	<
27	(6) Develop a form for the submission of [methadone-	<
28	related] or buprenorphine related MEDICATION-RELATED deaths	<
29	and [methadone-related] or buprenorphine-related MEDICATION-	<
30	RELATED incidents to the team by any concerned party.	

Develop, in consultation with a Statewide association representing county coroners and medical examiners, a model form for county coroners and medical examiners to use to report and transmit information regarding [methadone-related] or buprenorphine-related MEDICATION-<--RELATED deaths to the team. The team and the Statewide association representing county coroners and medical examiners shall collaborate to ensure that all [methadone-<--related] or buprenorphine-related MEDICATION-RELATED deaths <--are, to the fullest extent possible, identified by coroners and medical examiners.

- (8) Develop and implement any other strategies that the team identifies to ensure that the most complete collection of [methadone-related] or buprenorphine related MEDICATION- <--RELATED death and [methadone-related] or buprenorphine <--related MEDICATION-RELATED serious incident cases reasonably <--possible is created.
- (9) Prepare an annual report that shall be posted on the department's Internet website and distributed to the chairman and minority chairman of the Judiciary Committee of the Senate, the chairman and minority chairman of the [Public Health and Welfare] HEALTH AND HUMAN SERVICES Committee of the Senate, the chairman and minority chairman of the Judiciary Committee of the House of Representatives and the chairman and minority chairman of the Human Services

 Committee of the House of Representatives. Each report shall:
 - (i) Provide public information regarding the number and causes of [methadone-related] or buprenorphine <-
 related MEDICATION-RELATED deaths and [methadone-related] <-
 or buprenorphine related MEDICATION-RELATED incidents. <--

1 (ii) Provide aggregate data on five-year trends on 2 [methadone-related] or buprenorphine-related MEDICATION-RELATED deaths and [methadone-related] or buprenorphine-3 related MEDICATION-RELATED incidents when such 4 <-information is available. 5 (iii) Make recommendations to prevent future 6 7 [methadone-related] or buprenorphine-related MEDICATION-<--RELATED deaths, [methadone-related] or buprenorphine-8 <-related MEDICATION-RELATED incidents and abuse and set 9 <--10 forth the department's plan for implementing the 11 recommendations. 12 (iv) Recommend changes to statutes and regulations 13 to decrease [methadone-related] or buprenorphine-related <--14 MEDICATION-RELATED deaths and [methadone-related] or <-buprenorphine-related MEDICATION-RELATED incidents. 15 <--(v) Provide a report on [methadone-related] or 16 <-buprenorphine-related MEDICATION-RELATED deaths and 17 <--18 [methadone-related] or buprenorphine-related MEDICATION-<--19 RELATED incidents and concerns regarding [narcotic] 20 opioid-assisted treatment programs. 21 (10) Develop and publish on the department's Internet

- 21 (10) Develop and publish on the department's Internet 22 website a list of meetings for each year.
- 23 Section 5. Duties of coroner and medical examiner.
- 24 A county coroner or medical examiner shall forward all
- 25 [methadone-related] or buprenorphine-related MEDICATION-RELATED <--
- 26 death cases to the team for review. The county coroner and
- 27 medical examiner shall use the model form developed by the team
- 28 to transmit the data.
- 29 Section 6. Review procedures.
- 30 The team may review the following information:

- 1 (1) Coroner's reports or postmortem examination records
- 2 unless otherwise prohibited by Federal or State laws,
- 3 regulations or court decisions.
- 4 (2) Death certificates and birth certificates.
- 5 (3) Law enforcement records and interviews with law
- 6 enforcement officials as long as the release of such records
- 7 will not jeopardize an ongoing criminal investigation or
- 8 proceeding.
- 9 (4) Medical records from hospitals, other health care
- 10 providers and [narcotic treatment programs] opioid-assisted
- 11 treatment programs.
- 12 (5) Information and reports made available by the county
- children and youth agency in accordance with 23 Pa.C.S. Ch.
- 14 63 (relating to child protective services).
- 15 (6) Information made available by firefighters or
- 16 emergency services personnel.
- 17 (7) Reports and records made available by the court to
- 18 the extent permitted by law or court rule.
- 19 (8) EMS records.
- 20 (9) Traffic fatality reports.
- 21 (10) [Narcotic treatment program] Opioid-assisted
- 22 <u>treatment program</u> incident reports.
- 23 (11) [Narcotic treatment program] Opioid-assisted_
- 24 treatment program licensure surveys from the program
- 25 licensure division.
- 26 (12) Any other records necessary to conduct the review.
- 27 Section 8. Confidentiality.
- 28 (a) Maintenance. -- The team shall maintain the
- 29 confidentiality of any identifying information obtained relating
- 30 to the death of an individual or adverse incidents regarding

- 1 [methadone] or buprenorphine MEDICATION, including the name of <--
- 2 the individual, guardians, family members, caretakers or alleged
- 3 or suspected perpetrators of abuse, neglect or a criminal act.
- 4 * * *
- 5 (f) Attendance. -- Nothing in this act shall prevent the team
- 6 from allowing the attendance of a person with information
- 7 relevant to a review at a [methadone] <u>or buprenorphine</u> <--

<--

- 8 <u>MEDICATION</u> death and incident team review meeting.
- 9 * * *
- 10 Section 2. This act shall take effect in 60 days.