The Legislative Analysis and Public Policy Association (LAPPA) recently published the Model School Response to Drugs and Drug-related Incidents Act (Act). Drafted in collaboration with the Earl Carl Institute for Legal and Social Policy at the Thurgood Marshall School of Law at Texas Southern University, the purpose of this Act is to establish a consistent and positive response for public schools to best support students who have drug or drug-related incidents on school premises or at a school-related function. This Act provides state legislators, policymakers, and those in the public education setting with the foundation for an evidence-based framework to better respond to K-12 students who have drug or drug-related incidents on school grounds. It addresses what has been termed the school-to-prison pipeline, by decreasing the number of school-age youth who are funneled into the justice system for drug or drug-related incidents. This Act: (1) requires public schools to establish and implement administrative processes and supportive protocols to carefully evaluate drug and drug-related incidents; and (2) uses a decision tree that evaluates the risk level of the incident and further requires that the protocols for supporting students include education, mentorship, and counseling commensurate with the level of the incident. Click here to learn more about the Earl Carl Institute and its mission to identify potential solutions to legal and social issues that disproportionately impact communities of color and other disenfranchised populations.

LAPPA is monitoring the emergence of novel psychoactive substances (NPS) appearing on the illicit drug market in the United States and is highlighting these potentially dangerous drugs in a series of fact sheets. The third in the series examines tianeptine, an unapproved drug commonly sold in gas stations and on the internet as a dietary supplement. Discovered and patented in the 1960s, tianeptine is an antidepressant drug structurally similar to tricyclic antidepressants and can cause opioid-like withdrawal symptoms. Dietary supplements containing tianeptine can be purchased in gas stations, head shops, and on the internet. Ads for supplements containing tianeptine claim that the product reduces pain and provides stress relief. While tianeptine is not as dangerous as other NPS, it remains a concern to states and to the U.S. Food and Drug Administration (FDA) due to its ability to produce opioid-like responses in individuals taking the substance in high doses. LAPPA will continue to monitor its spread and any new regulatory responses at the state or federal level. To read the full fact sheet on tianeptine, click here.
LAPPA, in partnership with the Institute for Intergovernmental Research, developed information sharing fact sheets to provide guidance for overdose fatality review (OFR) teams, public safety and public health agencies utilizing the Overdose Detection Mapping Application Program (ODMAP), and law enforcement deflection partnership efforts on what can and cannot be legally shared regarding federal law (such as 42 Code of Federal Regulations [CFR] Part 2 and the Health Insurance Portability and Accountability Act [HIPAA]). Click here to access the fact sheets.

Presentations

On April 10, 2023, LAPPA Senior Legislative Attorney Heather Gray presented at the Rx and Illicit Drug Summit (Rx Summit) with Vanderbilt University neonatologist Dr. Stephen Patrick on the struggles and barriers faced by pregnant individuals with substance use disorders (SUD) and LAPPA’s Model Substance Use during Pregnancy and Family Care Plans Act. The joint presentation focused on: (1) best practices related to the care and treatment of pregnant and postpartum individuals with SUD and their infants; (2) punitive laws across the country that act as deterrents to pregnant individuals seeking treatment; and (3) the Model Substance Use during Pregnancy and Family Care Plans Act.

Also at the Rx Summit, LAPPA Senior Legislative Attorney Jon Woodruff joined Dr. Marta Sokolowska, Deputy Center Director for Substance Use and Behavioral Health at the FDA, to give a presentation to Summit attendees about nonprescription naloxone. FDA’s March 2023 approval of nonprescription naloxone will have numerous implications on consumers and policymakers. During his presentation, Mr. Woodruff highlighted several implications not fully known at this time, including: (1) whether consumers will be able to rely upon third-party payment options, such as Medicaid or private health insurance, when purchasing nonprescription naloxone; and (2) uncertainties about the interplay between nonprescription naloxone and currently-in-force state laws covering standing orders, co-prescription requirements, and layperson administration.

In the Rx Summit’s Poster Hall, LAPPA Legislative Attorney Stephanie Noblit presented a posted entitled “Drug and Sharps Take-back and Disposal Programs as a Means of Harm Reduction: A Legislative Update on an Underutilized Form of Combatting the Drug Epidemic.” The poster highlighted the importance of proper disposal of drugs and sharps, and detailed which states have drug and/or sharps take-back programs established in law or regulation and discussed how LAPPA’s model laws on these topics can assist states without programs in place.

FEDERAL NEWS BITS

FBI Investigating Scams Targeting Indigenous Communities: The Federal Bureau of Investigation (FBI) is investigating fake rehab groups who are targeting Indigenous communities, offering those communities substance use disorder recovery or mental health services. Scammers scout out potential victims by visiting medical centers and sometimes even Navajo Nation lands, offering to drive people to facilities where they can receive services. The individuals are then taken to short-term rentals, are often given alcohol on the drive, and often end up not knowing where they are or remembering how they got there. Victims are then coerced into signing paperwork that eventually results in government treatment dollars ending up in the hands of the defrauders, and those suffering from SUD receiving no treatment. The FBI and Navajo Police Department are working together to identify the extent of the fraud, but the assumption is that cases are underreported and that the problem is widespread and continuing to grow.

Bipartisan Fentanyl Caucus Launched: Congressional leaders announced the formation of a new caucus, the Bipartisan Fentanyl Prevention Caucus, to combat the nationwide spike in fentanyl-related overdoses. Co-chairs
Joe Neguse (D-Colorado), Madeline Dean (D-Pennsylvania), Darrell Issa (R-California), and Ken Calvert (R-California) will coordinate with members from both parties, federal and state law enforcement, and prevention and awareness groups to gain a better understanding of the threat fentanyl poses. In addition to the four co-chairs, there are 24 other caucus members who together are hoping to search for and implement solutions to the fentanyl crisis, which has reached every state and congressional district in the country.

**NATIONAL NEWS BITS**

**Kids’ Illicit Substance Ingestion Rose during COVID:** In the first month of the COVID-19 pandemic in 2020, there was a 25 percent increase in overall illicit substance ingestions among children under the age of six. This data hails from a study in *JAMA Network Open*, which looked at 7,659 children who were treated for ingestion of amphetamines, benzodiazepines, cannabis, cocaine, ethanol, and opioids across 46 different children’s hospitals. Researchers suggest that there may be several reasons for the rise in ingestion rates, including lack of treatment services for parents during the pandemic, inadequate childcare services, and lack of education about safe storage of controlled substance medication and especially of edibles, which are becoming more prevalent in homes across America and are visually appealing to small children. Click here to read the study.

**Test Strips for “Tranq”:** Public health workers will soon have access to new kits that will include xylazine test strips, capable of detecting the presence of the potent sedative that is more commonly referred to as “tranq.” The substance is used in veterinary practice but is increasingly showing up in the U.S. illicit drug supply. In addition to causing severe skin wounds when injected, it can cause a person to stop breathing. The test technology is the same concept as fentanyl test strips, which allow a drug user to test his or her personal supply for the presence of fentanyl and, soon, xylazine. Fentanyl has dominated the country’s illicit opioid market for years, and xylazine is following a similar trend, now showing up in 90 percent of illicit opioid samples in at least one city, Philadelphia. The test strips will be distributed by BTNX, a Canada-based company that also manufacturers a popular brand of fentanyl test strips and will be priced at about $200 for a box of 100 strips.

**Methadone Dosing Outdated:** Guidelines currently recommend that clinicians start patients who are being treated for opioid use disorder on a 30 milligram dosage of methadone, one of the most common medications used to treat opioid withdrawal symptoms. That recommendation was arrived at long before the rise of the fentanyl crisis in this country – and the 30 milligram dosage is now leaving patients who regularly use fentanyl in significant discomfort as they begin treatment. In the fentanyl era, daily methadone dosing reaches as high as 150 and sometimes 200 milligrams, meaning that the initial dose of 30 milligrams may be as little as one-fifth of what an individual patient may need. According to treatment providers, forcing a patient into unbearable withdrawal will ultimately lead to many turning back to illicit substances despite an initial desire to start recovery. The Substance Abuse and Mental Health Services Administration has proposed regulatory changes that will allow prescribers at methadone clinics to select an appropriate starting dosage (even if it is above 30 milligrams) if the reason for the selection is noted in the patient’s record. This proposed change is part of a long-standing and ongoing debate about the use of methadone to treat opioid use disorder. Methadone treatment is highly regulated in the U.S. and, even if regulations become less restrictive, many prescribers may continue to adhere to more stringent dosing for fear of attracting attention from local law enforcement or the Drug Enforcement Administration.

**Medicaid to Cover Some Drug Treatment for Jail Population:** States will soon be able to use Medicaid dollars to pay for drug treatment for those who are incarcerated. Drug treatment advocates welcome this change and say it could result in major inroads in combatting the opioid crisis, which is rampant in U.S. jails and prisons. Former inmates in particular are at an extremely high risk of suffering a fatal overdose, but those who receive treatment for opioid use disorder while incarcerated are around 75 percent less likely to die from an
overdose after release. Dr. Rahul Gupta, Director of the White House Office of National Drug Control Policy, recently announced that by the end of summer 2023, all federal prisons will offer medication to treat substance use disorder, something for which treatment advocates have long been championing. Research has repeatedly shown that treatment of the incarcerated population saves money, reduces recidivism, and most importantly, saves lives.

STATE NEWS BITS

**Alaska:** In an effort to combat high overdose death rates, the state of Alaska is considering “getting ahead of the problem” by implementing a targeted education program at the elementary school level. The new curriculum would educate children in public schools about the dangers of opioids. The initial recommendation is for a lesson plan to be developed that is one hour long and tailored to each grade level. Legislation requiring the state to develop such a curriculum has been introduced, but the bill does not include a requirement that individual school districts actually teach the lessons.

**Michigan:** The state's department of health and human services is launching a smartphone app that will help Michigan residents reduce the harm caused by opioids. The OpiRescue app is designed to help prevent opioid misuse and reduce overdose deaths by providing: (1) educational content to identify and reverse overdoses; (2) a naloxone finder to locate medication nearby; (3) a treatment locator; and (4) information on how to report an overdose reversal. The app is available on both Android and IOS platforms.

**Mississippi:** Mississippi Governor Tate Reeves signed legislation reclassifying tianeptine, also known as gas station heroin, as a Schedule III drug – effectively banning its sale and distribution throughout the state. Because products containing the substance can be bought over the counter in gas stations, many wrongly believe those products to be a safe alternative to other scheduled drugs, but studies show tianeptine can case opioid-like addiction and withdrawal symptoms. Mississippi’s move follows a recent state trend that is seeing more and more states consider regulating and/or banning the sale of products containing tianeptine.

**New Hampshire:** Residents of and visitors to Dover, New Hampshire will begin noticing green boxes placed strategically around the city. The boxes are part of a new pilot project for syringe disposal aimed at decreasing the amount of improperly disposed of medical waste. The effort has broad support in the community, was voted for unanimously by the Dover City Council, and is being funded by contributions from a variety of organizations. New Hampshire can also lay claim to being the first state in the nation to make a coordinated effort to distribute hundreds of boxes filled with naloxone to every county. The so-called NaloxBoxes are filled with all the tools necessary to assist someone who is experiencing symptoms of an overdose, with the goal of preventing fatal overdoses, and making lifesaving overdose reversal medication more accessible.

**North Carolina:** State lawmakers are proposing harsher punishments for people charged with causing an overdose death. Specifically, the proposal targets drug traffickers and stiffens penalties in proportion to how many grams of fentanyl are involved in a particular crime. Drug dealers are the intended targets of the measure, however, those who share fentanyl-containing substances can also be held liable. The bill contains a Good Samaritan clause which can lessen liability for someone who renders aid to an individual experiencing an overdose.

**Ohio:** The state recently launched new data dashboards in all 88 of its counties that are intended to provide communities with better tools to battle the ongoing opioid crisis. The dashboards track and report data on overdose deaths and other drug-related issues, including high risk prescribing, overdoses treated in emergency departments, naloxone units distributed, individuals receiving and being continuously enrolled in treatment, and emergency medical services events involving naloxone. Eventually, the dashboards will be expanded to provide data, not just on opioid use disorders, but on all substance use disorders.
Pennsylvania: Governor Josh Shapiro recently announced that Pennsylvania will join several other states in categorizing the powerful veterinary sedative xylazine as a Schedule III controlled substance. Xylazine, also known as “tranq,” is commonly used to sedate large animals such as horses, but in recent years the drug has spread into fentanyl supplies across the country. Classifying it as a Schedule III drug would allow the state to require more stringent record keeping, require that the drug be kept in locked storage, and give law enforcement the ability to prosecute people for illegally possessing and selling it. Xylazine overdoses are on the rise and are difficult to reverse because they do not respond to naloxone.

Tennessee: A new website is available to the citizens of Tennessee that helps people recovering from substance use disorders by linking them with available resources across the state. FindHelpNowTN.org asks users simple questions and provides search results that include the names of nearby facilities with treatment openings, including a description of services provided at a particular facility. Contact information for each facility is also provided. There are nearly 250 facilities listed on the website, which was developed five years ago and funded through a grant from the Centers for Disease Control and Prevention.

Virginia: The Virginia Department of Corrections (VADOC) is expanding its medication for addiction treatment (MAT) program in an effort to serve more inmates and probationers struggling with opioid use disorder. The expanded program will now allow use of buprenorphine for both men and women entering VADOC facilities who have verified prescriptions for medication to treat opioid use disorder. Injectable naltrexone will continue to be an option for individuals being released from VADOC facilities, and those being released will also be offered free two-dose naloxone kits.

ABOUT LEGISLATIVE ANALYSIS AND PUBLIC POLICY ASSOCIATION

The Legislative Analysis and Public Policy Association (LAPPA) is a 501(c)(3) nonprofit organization whose mission is to conduct legal and legislative research and analysis and draft legislation on effective law and policy in the areas of public safety and health, substance use disorders, and the criminal justice system.

LAPPA produces up-to-the-minute comparative analyses, publications, educational brochures, and other tools ranging from podcasts to model laws and policies that can be used by national, state, and local criminal justice and substance use disorder practitioners who want the latest comprehensive information on law and policy. Examples of topics on which LAPPA has assisted stakeholders include naloxone laws, law enforcement/community engagement, alternatives to incarceration for those with substance use disorders, medication for addiction treatment in correctional settings, and the involuntary commitment and guardianship of individuals with alcohol or substance use disorders.

For more information about LAPPA, please visit: https://legislativeanalysis.org/.

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