

# NEWS BITES

## LAPPA NEWS

#### New Team Member

LAPPA has welcomed a new Legislative Attorney to its staff, Cody Nagle. Cody is a former advisor for the White House Office of National Drug Control Policy (ONDCP), where she worked in public engagement on issues of substance use disorder recovery, criminal justice reform, and stigma reduction. Prior to her recent graduation from Syracuse University College of Law, Cody started her legal career as a paralegal in a civil litigation practice. While attending law school, Cody served on the Executive Board for the Journal for Global Rights and Organizations. Cody brings unique expertise to LAPPA as a woman in long-term recovery.

#### Rx and Illicit Drug Summit

Visit LAPPA's booth in the Exhibit Hall at the Rx and Illicit Drug Summit in Atlanta the first week in April. Our team members would love to talk to you about the 17 Model Acts LAPPA drafted through ONDCP's Model Acts Program and the many other tools LAPPA provides that can be used by national, state, and local public safety and health practitioners. Two of our expert attorneys will be presenting at the Summit - on Tuesday April 2<sup>nd</sup>, LAPPA's Heather Gray, along with Joseph Longley from the O'Neill Institute for National and Global Health Law at Georgetown University School of Law, will be discussing the collateral consequences of convictions as well as the model act LAPPA will soon be publishing on this topic; and on Thursday April 4<sup>th</sup>, LAPPA's Jon Woodruff will be part of a panel tackling the issue of over-the-counter naloxone and the various implications and consequences of opioid overdose reversal medications no longer requiring a prescription.

#### PUBLICATIONS

#### 50-State Summaries

There are two newly updated 50-state summaries available on LAPPA's website. The first, <u>Kratom: Summary</u> of <u>State Laws</u> focuses on the substance kratom, an herb derived from a leafy Southeast Asian tree that contains two psychoactive compounds capable of binding to opioid receptors in the brain to produce a pharmacological response similar to effects produced by other opioid agonists, such as morphine. As of February 2024, 22 states and the District of Columbia regulate kratom. The second summary, <u>Drug Checking Equipment</u>, <u>Needles/Syringes, and Drug Paraphernalia: Summary of State Laws</u>, is one that LAPPA first undertook to determine how drug paraphernalia laws throughout the 50 states, the District of Columbia, and all U.S.

territories treat drug checking equipment (including fentanyl test strips and other items) and needles/syringes. Given the increased emphasis in recent years on using harm reduction strategies to slow the overdose crisis, the hurdle posed by state drug paraphernalia laws to freely allow drug checking services or establish syringe services programs is not inconspicuous. This January 2024 version, which sets forth a summary of state and territory laws as of December 2023, is an update to the original report.

#### Toolkits

There are new fact sheets available on the Comprehensive Opioid, Stimulant, and Substance Use Program (COSSUP) <u>website</u>. LAPPA, in partnership with the Institute for Intergovernmental Research (IIR), developed a series of information sharing fact sheets to provide guidance for <u>overdose fatality review (OFR) teams</u>, public safety and public health agencies utilizing the <u>Overdose Detection Mapping Application Program (ODMAP)</u>, and law enforcement <u>deflection partnership efforts</u> on what can and cannot be legally shared regarding federal law, (such as 42 Code of Federal Regulation (CFR) Part 2 and the Health Insurance Portability and Accountability Act (HIPAA)).

#### Podcasts

Jac Charlier, Executive Director of the Police Treatment and Community Collaborative (PTACC) and Executive Director of the Center for Health and Justice at Treatment Alternatives for Safe Communities (TASC) recently recorded an episode for LAPPA's podcast series, One-on-One with LAPPA. Mr. Charlier highlights preventive approaches to substance use and mental health that offer pathways for a community-based response to occur *before* an event such as an overdose, arrest, or mental health crisis. You can listen to this important conversation about deflection and pre-arrest diversion, as well as every other episode of One-on-One with LAPPA by visiting LAPPA's <u>Media Gallery</u> page, where individual episodes can now be downloaded for listening on the go!

### FEDERAL NEWS BITS

**National Take Back Day:** The Drug Enforcement Administration (DEA) has announced that its next National Prescription Drug Take Back Day will take place on Saturday April 27, 2024. On this day, citizens in participating communities across the country can drop off unneeded, unwanted, and expired medications at designated locations. Since the DEA began hosting these take back days in 2018, nearly 9,000 tons of medications have been collected, and at each event almost 5,000 law enforcement agencies participate in collection efforts. For more information, visit <u>https://www.dea.gov/takebackday</u>.

**Grant Funding to Expand Treatment Services for SUD:** The Biden-Harris Administration recently announced two funding opportunities totaling \$28 million for grants expanding treatment services for substance use disorder (SUD). Of that amount, \$24.4 million is being set aside through the Grants to Expand Substance Use Disorder Treatment Capacity in Adult and Family Treatment Drug Court program. This money will expand treatment access and recovery support services in existing drug courts – the grant awards will support a continuum of care, including prevention, harm reduction, treatment, and recovery services. Another \$3.6 million is intended for the State Pilot Grant Program for Treatment for Pregnant and Postpartum Women to help state agencies specifically address the needs of pregnant and postpartum people who have an SUD.

**DEA Issues Reminder re: Pill Press Regulations:** The DEA recently issued a letter to e-commerce companies related to the sale of pill press machines which can be used to make deadly fentanyl pills widely being offered for sale on the Internet. The letter reminded businesses that e-commerce entities selling pill press machines are generally considered "regulated persons" under the Controlled Substances Act (the Act) and thus

subject to all of the Act's recordkeeping, identification, and reporting requirements. This would include recordkeeping and reporting requirements related to all individuals who buy and sell pill press machines. In 2023 alone, the DEA seized nearly 80 million fake pills containing fentanyl, so being able to track who is in possession of the machines capable of creating these pills is an important tool for federal law enforcement. Several major online retailers already ban the sale of pill presses, including Amazon and Etsy, and the DEA continues to encourage other online retailers to do their part and remove pill presses from their inventory, or at a minimum, comply with federal regulations pertaining to their sale. For more information on this topic, read LAPPA's recently updated <u>Pill Presses: Summary of State Laws</u> and LAPPA's fact sheet <u>Pill Press Laws: a Forgotten Aspect of Counterfeit Drug-making</u>.

## NATIONAL NEWS BITS

**OUD Treatment for Teens Lacking:** Data from a recent study indicates that about one in 100 teenagers in the U.S. struggles with opioid use disorder (OUD); fewer than five percent of those children identified as having an OUD receive an approved medication to treat it, such as buprenorphine or naltrexone, despite the fact that the American Academy of Pediatrics recommends the treatments. Researchers surveyed more than 1,600 pediatricians, 474 of whom were primary care pediatricians with teenage patients. Almost all respondents agreed that it was their responsibility to identify substance use disorders and refer patients to treatment. However, only 20 percent felt a responsibility to treat an SUD, and less than 13 percent felt they should prescribe medications available to treat SUD. As recently as 2019, fewer than one third of pediatric residency training programs included education on prescribing medication for OUD, which could explain some of the hesitancy pediatricians are showing. For more information and to access the study, which was published in JAMA's *Pediatrics*, click here.

## STATE NEWS BITS

**California:** Voters in San Francisco approved Proposition F, a ballot measure requiring residents receiving cash welfare payments to undergo drug testing; those found to be struggling with substance use will undergo mandatory treatment or lose their monthly welfare benefit. Critics of the measure are concerned that coercive care will exacerbate the struggles of those suffering with SUD, while proponents, including Mayor London Breed, are pleased to have a new tool for getting people into treatment. The executive director of the city's human services agency says that 30 percent of welfare recipients are believed to have an SUD, and the proposed screening process will eventually confirm that number. Cost estimates for implementing Proposition F range from \$500,000 to \$1.4 million annually.

**Colorado:** The state department of corrections has been awarded \$3.94 million to deliver medications for opioid use disorder (MOUD) to inmates in state prisons. The monies will support medication delivery, behavioral health counseling, and care coordination for inmates during incarceration through their release from prison. Data show that around two thirds of America's incarcerated population struggle with an SUD and that individuals who leave prison after not having received treatment are 40 times more likely to die of an overdose than members of the general population, within two weeks of release.

**District of Columbia:** D.C.'s first sobering center, the Stabilization Center, offers a safe place for someone who has used drugs or alcohol to safely recover, for up to 24 hours, under the care of nurses and mentors who have lived experience. In the three months since the center has opened, over 1,000 individuals have been admitted, often brought in by paramedics who previously did not have any choice but to take them to an emergency room. D.C.'s facility is one of about 60 across the country and part of a growing trend to provide options to overburdened emergency responders and alleviate strain on hospitals that continue to grapple with staffing shortages.

**Idaho:** The Boise Police Department recently served two branches of the state's harm reduction project with search warrants as part of an ongoing investigation into the distribution of drug paraphernalia. A spokesperson for the police department told the press that the seized items were limited to packaged drug paraphernalia and electronic devices related to the investigation. The Idaho Harm Reduction Project provides opioid overdose reversal medication, a syringe exchange, syringe disposal services, at-home HIV testing kits, and sexually transmitted infection and hepatitis C testing. According to public records, syringes used as part of the syringe exchange program were not sought during the service of the warrants.

**Indiana:** A bill decriminalizing the use of fentanyl test strips passed the full state house by a vote of 92-1, yet never even came up for a vote in the Senate Committee on Corrections and Criminal Law. House Bill 1053 would have removed state provisions that allow prosecutors in Indiana to consider possession of the test strips as possession of drug paraphernalia, punishable by up to 60 days in jail and a \$500 fine. According to the state's drug overdose dashboard, synthetic opioids like fentanyl have killed almost 10,000 Indianans since 2016.

**Massachusetts:** Boston is planning to create an annual fund, using a portion of the \$22 million that the city expects to receive from opioid settlement funds, to help families of overdose victims with funeral costs, legal expenses, and childcare. The city will set aside \$250,000 a year, which represents about four percent of the first installment that Boston received. Groups who are tracking how jurisdictions are using opioid settlement funds state that they do not know of any other municipalities setting aside money for bereaved families.

**Nevada:** Pharmacists in the state will soon be able to prescribe medication for addiction treatment (MAT) to patients with opioid use disorder. In order to write prescriptions for drugs like buprenorphine and naltrexone, which can reduce cravings for and withdrawal symptoms from opioids, pharmacists will have to register with the state board of pharmacy and will have to complete eight hours of addiction training, a federal requirement from the DEA. Not everyone is embracing the idea of pharmacy-prescribing of MAT; the state psychiatric association asserts that patients may not receive the full continuum of services they need, including in-person therapy, if they receive their drug therapy from a pharmacist instead of a treatment provider.

**North Carolina:** The department of health and human services recently launched a statewide peer support hotline, "Peer Warmline," for people struggling with SUD and other mental health issues. It will work with the 988 Suicide and Crisis Lifeline, providing callers with an opportunity to speak with a peer support specialist who has had similar experiences. Data shows that over 40 percent of callers to support lines are repeat callers who are helped by being able to talk to their peers.

**Rhode Island:** Project leaders have secured a location and are ready to launch the country's first stateregulated overdose prevention center, also known as a safe consumption site. The facility, which will be located adjacent to the Rhode Island Hospital campus, will operate in a 20,500 square-foot space and will deliver medical, clinical, and social support services while trying to prevent overdose deaths and connect people struggling with SUD to treatment providers. While at the center, people will be able to safely use illicit substances under the supervision of trained professionals who will help test for fentanyl, help prevent overdoses, and administer treatment to reverse an overdose if one occurs.

**Virginia:** In an effort to combat a steep rise in overdoses on school grounds, Loudon County Public Schools will begin a partnership with the county sheriff's office and the police department in the city of Leesburg to start randomly searching the county's 18 high school buildings with police dogs. The dogs, trained to sniff out narcotics, will be permitted to search the school grounds and student lockers but not the students themselves. Loudon County made national headlines when nine students in one county school overdosed in a span of only a couple of weeks. A spokesman for the sheriff's office explained that the goal of the program is deterrence and not disruption or student engagement.

# UPCOMING EVENTS



Registration is now open for the annual Police, Treatment, and Community Collaborative (PTACC) International Deflection and Pre-Arrest Diversion Summit. This year's event is being held in Seattle, Washington from October 29<sup>th</sup> through November 1<sup>st</sup>. This is a one-of-a-kind opportunity to learn and network with peers in the field of deflection. More

information and the registration portal can be found <u>here</u>. PTACC is looking for panels and presentations from deflection practitioners, trainers, researchers, and partners to support the field of deflection and is offering discounted registration for presenters. Click <u>here</u> for more information about submitting a presentation proposal.



Interested in driving change in addiction policy? Learn more about the <u>Master of Science in Addiction</u> <u>Policy and Practice</u> from Georgetown University's Graduate School of Arts & Sciences. Hear from Professor and Program Director Regina LaBelle about the innovative curriculum, careers in addiction policy, details of how to apply, financial aid, and

more. The information session is Monday, March 25<sup>th</sup> from 12:00 – 1:00 p.m. EST. Click here to <u>RSVP</u>.

# ABOUT THE 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, treatment in emergency settings, alternatives to incarceration for those with substance use disorders, medication for addiction treatment in correctional settings, and syringe services programs.

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

© Legislative Analysis and Public Policy Association - This project is funded by a grant from the Office of National Drug Control Policy. Neither the Office of National Drug Control Policy, nor any other federal instrumentality operate, control, or are responsible for, or necessarily endorse this project.