[Second Reprint] SENATE, No. 52

STATE OF NEW JERSEY 219th LEGISLATURE

PRE-FILED FOR INTRODUCTION IN THE 2020 SESSION

Sponsored by: Senator ROBERT W. SINGER District 30 (Monmouth and Ocean) Senator LINDA R. GREENSTEIN District 14 (Mercer and Middlesex)

Co-Sponsored by: Senators Corrado and Gopal

SYNOPSIS

Establishes local drug overdose fatality review teams.

CURRENT VERSION OF TEXT

As amended by the Senate on June 21, 2021.



AN ACT regarding drug overdoses and supplementing Title 26 of
 the Revised Statutes.

3 4

5

6

BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

7 ²[1. The Local Advisory Committee on Alcohol Use a. 8 Disorder and Substance Use Disorder in each county ¹[shall] may¹ establish a local drug overdose fatality review team for that county. 9 10 A local drug overdose fatality review team may serve one or more counties where practicable. Each local drug overdose fatality 11 review team shall elect a chair ¹ to administer a process of review 12 and enact and implement a standard protocol for the collection and 13 14 maintenance of data that shall be consistent with all teams. The 15 Commissioner of Human Services shall make available to local 16 drug overdose fatality review teams such funding as may be 17 appropriate to enable the teams to undertake the duties required under this section, which may include, but shall not be limited to, 18 19 funding sufficient to allow each team to employ appropriate full-20 time and part-time personnel as may be necessary $\mathbf{]}^1$.

b. Local drug overdose fatality review teams shall consist of
individuals with experience and knowledge regarding health, social
services, law enforcement, education, emergency medicine, mental
health, juvenile delinquency, and drug and alcohol abuse.

25 The Commissioner of Health shall develop a mandatory drug c. 26 overdose death reporting process, pursuant to which health care 27 practitioners, medical examiners, hospitals, emergency medical 28 services providers, local health departments, law enforcement 29 agencies, substance use disorder treatment programs, and relevant 30 social services agencies will be required to confidentially report cases of drug overdose death to the Department of Health in a 31 32 standardized, uniform format.

33 The department shall transmit to the appropriate local drug d 34 overdose fatality review team such information as the department has available concerning any drug overdose that occurs within the 35 county served by the local drug overdose fatality review team, 36 37 including, but not limited to: the individual's age, race, gender, 38 county of residence, and county of death; and the date, manner, 39 cause, and specific circumstances of the overdose death, as recorded 40 on the individual's completed death certificate. In addition, the 41 team may be provided access to the following records related to the 42 individual:

43 (1) any relevant information and records maintained by a health44 care provider related to the individual's physical health, mental

Matter underlined thus is new matter.

EXPLANATION – Matter enclosed in **bold-faced** brackets **[thus]** in the above bill is not enacted and is intended to be omitted in the law.

Matter enclosed in superscript numerals has been adopted as follows: ¹Senate SHH committee amendments adopted June 10, 2021. ²Senate floor amendments adopted June 21, 2021.

health, and substance use disorder treatment ${}^{1}\mathbf{I}$, if the individual's 1 2 next of kin or authorized representative consents to the release of the information or records $]^1$; and 3 (2) any relevant information and records maintained by a State 4 5 or local government agency, including criminal history records and records of probation and parole ¹if the transmission of such records 6 does not imperil ongoing investigations¹, medical examiner 7 8 records, social service records, and school records and educational histories ¹[, if the individual's next of kin or authorized 9 10 representative consents to the release of the information or 11 records]¹. 12 e. Upon receipt of a report of drug overdose death that has 13 been forwarded to a local drug overdose death fatality review team 14 pursuant to subsection d. of this section, the team shall review the 15 reported case in accordance with the provisions of subsection f. of 16 this section. 17 f. Each local drug overdose fatality review team shall: 18 (1) develop methods to help prevent drug overdoses; 19 (2) explore methods to promote cooperation among multi-20 disciplinary agencies in providing services to individuals with substance use disorders; 21 22 (3) develop an understanding of the causes of drug overdoses; 23 (4) recommend possible changes to law and policy to prevent 24 drug overdoses; and 25 (5) meet at least quarterly to review drug overdose death cases transmitted to the team pursuant to this section, as well as available 26 criminal, educational, substance abuse, and mental health records of 27 the deceased individuals. Local drug overdose fatality review team 28 meetings shall be closed to the public 1, and information discussed 29 at the meetings shall be deemed confidential¹. 30 g. As used in this section: 31 32 "Drug overdose" means an acute condition including, but not limited to, ¹<u>extreme</u>¹ physical illness, coma, ¹[mania, hysteria] 33 decreased level of consciousness, respiratory depression¹, or death 34 35 resulting from the consumption or use of a controlled dangerous 36 substance or another substance with which a controlled dangerous 37 substance was combined and that a layperson would reasonably believe to require medical assistance.]² 38 39 ²[2. Names and individual identification data collected pursuant 40 to the provisions of this act shall not be disclosed by the 41 Department of Health or a local drug overdose fatality review team 42 43 member unless required by law, and nothing in this act shall be 44 construed to require disclosure of any private or confidential health 45 information in violation of State or federal privacy laws. 46 Notwithstanding the foregoing, State and local government agencies

are directed to share, upon request by ¹the Department of Law and

47

4

1 Public Safety for integration into its integrated drug awareness dashboard, or by¹ a local drug overdose fatality review team, ¹[and, 2 in the case of confidential or personal identifying information, with 3 4 the consent of the next of kin or authorized representative of the 5 individual who is the subject of the information or record, \mathbf{J}^1 such information or records as may be necessary and appropriate for the 6 7 local drug overdose fatality review team to conduct a review of reported drug overdose deaths pursuant to section 1 of this act 1 or8 9 for the Department of Law and Public Safety to integrate into its 10 integrated drug awareness dashboard in order to protect the public health, safety, and welfare¹.]² 11 12 13 ²[¹3. The Department of Health, in collaboration with each local 14 drug overdose fatality review team, shall report any findings made 15 pursuant to this act to the Governor and, pursuant to section 2 of 16 P.L.1991, c.164 (C.52:14-19.1), to the Legislature.¹]² 17 18 ²<u>1. As used in this act:</u> "Confidential case report" means a report created by a local 19 20 overdose fatality review team summarizing the data collected and analyzed regarding a confirmed fatal drug overdose. 21 22 "De-identifiable data" means data or information not containing 23 personally identifiable information. 24 "Drug" means a substance which produces a physiological effect when ingested or otherwise introduced into the body. 25 26 "Health care provider" means a physician, advanced practice nurse, or physician assistant acting within the scope of a valid 27 license or certification issued pursuant to Title 45 of the Revised 28 29 Statutes. 30 "Local team" means a local overdose fatality review team. 31 "Mental health provider" means a psychiatrist, a psychologist, an 32 advanced practice nurse practitioner with a specialty in psychiatric mental health, a clinical social worker, a professional counselor, or 33 a marriage and family therapist who is licensed to provide mental 34 35 health services pursuant to Title 45 of the Revised Statutes. 36 "Overdose" means "drug overdose" as that term is defined in 37 section 3 of P.L.2013, c.46 (C.24:6J-3). 38 "Personally identifiable information" means any information 39 about an individual that can be used to distinguish or trace an 40 individual's identity, including, but not limited to, an individual's 41 name, address, social security number, date and place of birth, 42 mother's maiden name, biometric records, and medical, 43 educational, financial, and employment information. "Public health purpose" means a purpose of protecting and 44 improving the health of people and their communities. "Public 45 health purpose" includes, but is not limited to, implementing 46 47 educational programs, recommending policies, administering

1 services, conducting research, and promoting healthcare equity, in 2 an effort to protect the health of entire populations. 3 "Substance use disorder" shall have the same meaning prescribed 4 by the American Psychiatric Association in the Diagnostic and 5 Statistical Manual of Mental Disorders, Fifth Edition, and any subsequent editions, and shall include the symptoms of withdrawal 6 7 from a substance use disorder. 8 "Substance use disorder treatment provider" means any 9 individual or entity licensed, registered, or certified pursuant to the 10 laws of this State to treat substance use disorders or who holds a 11 current and valid waiver under the federal Drug Addiction 12 Treatment Act of 2000 (Pub. L. 106-310) from the federal Substance Abuse and Mental Health Services Administration to 13 14 treat individuals with substance use disorder using medications 15 approved for that indication by the United States Food and Drug Administration.² 16 17 18 ²2. a. (1) A county health department or a local board of health 19 may establish a local overdose fatality review team to conduct a comprehensive review of confirmed overdose fatalities in order to 20 21 better understand the individual and population circumstances and 22 the resources and characteristics of potential overdose victims for 23 the purposes of preventing future overdose deaths and related harms 24 in a locality. (2) A local drug overdose fatality review team may be 25 26 established to serve: 27 (a) one or more counties; 28 (b) a municipality with a population of 100,000 persons or 29 more; or 30 (c) a municipality with a high overdose rate as determined on 31 annual basis by the Department of Health and the Office of the 32 Chief State Medical Examiner. 33 (3) A local overdose fatality review team shall be under the 34 direction of the county health department or the local board of 35 health, as appropriate, and shall be subject to the regulation of the 36 Department of Health. A local team shall work cooperatively with 37 the Local Advisory Committee on Alcohol Use Disorder and Substance Use Disorder, established pursuant to section 4 of 38 39 P.L.1983, c.531 (C.26:2B-33), if one exists within the local team's 40 jurisdiction. A local team shall cooperate with and provide any 41 information as may be requested by the Office of the Chief State 42 Medical Examiner or the Department of Health through the Deputy 43 Commissioner for Public Health Services for public health 44 purposes. 45 b. A local overdose fatality review team shall consist of 46 individuals with experience and knowledge regarding health, social 47 services, law enforcement, education, emergency medicine, mental 48 health, juvenile delinquency, and substance use disorders.

1	(1) At a minimum, each local overdose fatality review team
2	shall include:
3	(a) the municipal or county health officer, or a designee;
4	(b) the regional or county medical examiner, or a designee;
5	(c) a member of the Local Advisory Committee on Alcohol Use
6	Disorder and Substance Use Disorder, established pursuant to
7	section 4 of P.L.1983, c.531 (C.26:2B-33), if one exists within the
8	local team's jurisdiction;
9	(d) a State, county, or municipal law enforcement officer or
10	county prosecutor;
11	(e) a substance use disorder health care professional; and
12	(f) the county or municipal director of behavioral health
13	services, or a designee.
14	(2) A local overdose fatality review team may also include any
15	of the following:
16	(a) the superintendent of schools, or a designee;
17	(b) an emergency medical services provider;
18	(c) a representative of a health care facility, including a hospital,
19	health system, or federally qualified health center;
20	(d) a representative of a county jail, detention center, or
21	corrections department;
22	(e) a representative of a county social services agency;
23	(f) a pharmacy permit holder or another individual with access to
24	the Prescription Monitoring Program established pursuant to section
25	<u>25 of P.L.2007, c.244 (C.45:1-45);</u>
26	(g) a representative of the local office of the Division of Child
27	Protection and Permanency in the Department of Children and
28	<u>Families;</u>
29	(h) a representative of a county healthcare facility;
30	(i) a representative of a harm reduction center, if one is located
31	in a municipality or county over which the local team exercises
32	jurisdiction; and
33	(j) any individual deemed necessary for the work of the local
34	team, as recommended by the chair and approved by a majority vote
35	of the team members and by the Department of Health. ²
36	2
37	² <u>3. a. A local overdose fatality review team established</u>
38	pursuant to section 2 of this act shall:
39	(1) establish and implement appropriate protocols and
40	procedures that allow the local teams to operate in accordance with
41	applicable State and federal laws;
42	(2) elect, in accordance with the procedures established pursuant
43	to paragraph (1) of this subsection and on an annual basis, a chair,
44	who shall be a member of the local team;
45	(3) collect, analyze, interpret, and maintain local data on
46	overdose deaths, which information shall be maintained by the local
47	team in accordance with all appropriate and industry-standard

7

1 technical, administrative, and physical controls necessary to protect 2 the privacy and security of the information; 3 (4) conduct, in accordance with Department of Health 4 regulations and guidance, a multidisciplinary review of the 5 information collected pursuant to this section regarding a decedent of a confirmed fatal drug overdose, as selected by the office of the 6 7 county medical examiner in the county in which the decedent was 8 pronounced dead and at the direction of the Office of Chief State 9 Medical Examiner, which review shall include, but need not be 10 limited to: 11 (a) consideration of the decedent's points of contact with health 12 care systems, social services, educational institutions, child and family services, the criminal justice system, including law 13 14 enforcement, and any other systems with which the decedent had 15 contact prior to death; and 16 (b) identification of the specific factors and social determinants 17 of health that put the decedent at risk for an overdose; 18 (5) recommend prevention and intervention strategies to 19 improve the coordination of services and investigations among member agencies in an effort to reduce overdose deaths; 20 21 (6) produce confidential case reports based on information 22 received, which shall be transmitted to the Department of Health in 23 a form and manner prescribed by the department. The reports and 24 the data used therefor shall only be accessed by the department for 25 public health purposes, in a form and format that is secured to prevent disclosure of personally identifiable information, 26 27 determined by the department and in accordance with applicable 28 State and federal law; and 29 (7) submit to the Department of Health an annual report 30 containing only de-identified data associated with the jurisdiction served by the local team, which reports may be made available to 31 32 the public pursuant to P.L.1963, c.73 (C.47:1A-1 et seq.) and shall 33 include, but need not be limited to: 34 (a) the total number of fatal overdoses that occurred within the 35 jurisdiction of the local team; 36 (b) the number of fatal overdose cases investigated by the local 37 overdose fatality team; 38 (c) any recommendations for action by State agencies, local 39 agencies, or the Legislature for preventing fatal overdoses in this 40 State; and 41 (d) any assessable results of any recommendations made by the 42 local team, including, but not limited to, changes in local, county, 43 or State law, policy, or funding made as a result of the local team's 44 recommendations. 45 b. A local overdose fatality review team shall establish policies 46 and procedures to ensure that all records containing personally 47 identifiable information are destroyed within one year or within a reasonable period of time after the conclusion of a local team's 48

8

1 review of a decedent's case. The annual report and other public 2 records shall be destroyed in accordance to the requirements of 3 P.L.1953, c.410 (C.47:3-15 et seq.). 4 c. A local team may only request, collect, analyze, and share 5 information for public health purposes directly related to the review 6 of confirmed fatal drug overdoses and, except as otherwise provided 7 in this act, in compliance with all applicable State and federal laws or regulations.² 8 9 10 ²<u>4. a. To the extent not otherwise inconsistent with State and</u> federal laws and only upon written request of the chair of a local 11 overdose fatality review team and as necessary to carry out the 12 official functions of the local team and the provisions of this act, the 13 14 entities listed in subsection b. of this section may provide a local 15 team with the following information: 16 (1) any relevant information and records maintained by a health 17 care provider related to an individual's physical health, mental 18 health, and substance use disorder treatment; and 19 (2) any relevant information and records maintained by a State or 20 local government agency, including criminal history records and 21 records of probation and parole if the transmission of such records 22 does not imperil ongoing investigations, medical examiner records, 23 social service records, and school records and educational histories. b. The following individuals and entities may disclose, within a 24 25 reasonable period of time following a request, medical records and information requested pursuant to subsection a. of this section: 26 27 (1) county medical examiners; 28 (2) paid fire departments or volunteer fire companies; 29 (3) hospitals and health systems; 30 (4) law enforcement agencies; 31 (5) State and local government agencies; 32 (6) mental health providers; 33 (7) health care practitioners; 34 (8) substance use disorder treatment programs and providers; 35 (9) public and private schools and institutions of higher 36 education; 37 (10) emergency medical services providers; 38 (11) social services agencies and providers; and 39 (12) the Prescription Monitoring Program. 40 c. An individual or entity subject to a request for information or 41 records by a local overdose fatality review team pursuant to this 42 section may charge the local team a reasonable fee for the service of 43 duplicating any records. 44 d. The chair of a local overdose fatality review team, or the 45 chair's designee, may request individuals authorized under 42 46 C.F.R. Part 2 to provide consent for the release of confidential 47 information protected pursuant to 42 U.S.C. s.290dd-2 and 42 C.F.R. Part 2. 48

e. A local overdose fatality review team shall develop a 1 2 confidentiality form establishing: the requirements for maintaining 3 the confidentiality of any information disclosed during a meeting, 4 during review, or at any other time; the responsibilities concerning 5 those requirements; and any penalties associated with failure to 6 maintain such confidentiality. Such requirements shall be in 7 accordance with all applicable State and federal laws and any best 8 practices identified by the Department of Health. An individual 9 shall review the confidentiality form, purpose, and goals of the local 10 team prior to participating in any review. All necessary and 11 reasonable measures shall be taken to prevent the disclosure of a 12 decedent's name or initials at any team meeting. 13 f. Information received pursuant to this act may be shared with 14 local team members at a meeting of the local team, provided that 15 each individual present, including staff, has signed and abides by 16 the provisions of the confidentiality form developed pursuant to 17 subsection e. of this section. Such information may be shared with 18 any non-member attendees who meet the criteria of subsection b. of section 2 of this act and whose attendance is approved in 19 20 accordance with this act, provided that such attendees also sign and 21 abide by the provisions of the confidentiality form. 22 g. (1) Meetings of a local team during which confidential 23 information is discussed shall be closed to the public, except that, 24 upon a majority vote of the local team members present, a local 25 team may request and permit an individual who has information 26 relevant to the exercise of the team's duties to attend a team 27 meeting, regardless of whether the individual meets the criteria set 28 forth in subsection b. of section 2 of this act or is a permanent 29 member of the local team. Notice concerning the individual's 30 attendance shall be provided to members of the local team not later 31 than 10 days prior to the meeting at which the individual will be 32 present. 33 (2) A representative from the Department of Health, as 34 designated by the Deputy Commissioner for Public Health Services, 35 and a representative from the Office of the Chief State Medical 36 Examiner, may attend any meeting of a local overdose fatality 37 review team. Notice concerning a representative's attendance shall 38 be provided to members of the local team not later than 10 days 39 prior to the meeting at which the representative will be present. 40 h. Meetings of a local overdose fatality review team shall be exempt from the "Senator Byron M. Baer Open Public Meetings 41 42 Act," P.L.1975, c.231 (C.10:4-6 et seq.). i. A member of the local overdose fatality review team may 43 44 contact, interview, or obtain information by request from a family 45 member or friend of an individual whose death is being reviewed by 46 the local team. 47 j. To the extent not otherwise inconsistent with State and federal 48 law, an entity that provides, in good faith, information or records to

10

1 a local overdose fatality review team shall not be subject to civil or 2 criminal liability or any professional disciplinary action as a result 3 of providing the information or records.² 4 5 ²5. a. Information and records acquired by a local overdose 6 fatality review team, except for information contained within the 7 annual report submitted pursuant to paragraph (7) of subsection a. 8 of section 3 of this act, shall be confidential and shall not be subject 9 to subpoena, discovery, or introduction into evidence in a civil or 10 criminal proceeding or disciplinary or other administrative action. Information and records that are otherwise available from other 11 12 sources shall not be immune from subpoena, discovery, or 13 introduction into evidence through those sources solely due to the 14 presentation or review of the information or record to or by a local 15 team. 16 b. Information and records created by a local overdose fatality 17 review team shall be considered confidential and shall not be 18 disclosed to the public or considered a government record pursuant 19 to P.L.1963, c.73 (C.47:1A-1 et seq.). 20 c. Substance use disorder treatment records requested by or 21 provided to a local overdose fatality review team shall be subject to 22 any additional limitations on the redisclosure of a medical record developed in connection with the provision of substance use 23 24 disorder treatment services under State or federal law, including, but not limited to, 42 U.S.C. s.290dd-2 and 42 C.F.R. Part 2. 25 d. Local overdose fatality review team members, and any 26 27 individual who presents or provides information to a local team, 28 may not be questioned in any civil or criminal proceeding or 29 disciplinary action regarding the information presented or provided, 30 except in an action contesting the validity of the disclosure itself. 31 This subsection shall not prevent an individual from testifying 32 regarding information obtained independently of the local team, 33 public information, or publicly available information. 34 e. The county health department or local board of health, as 35 appropriate, shall ensure the privacy, confidentiality, and security of 36 the information provided to a local overdose fatality review team 37 shall be maintained as required by State and federal laws and any 38 local ordinances. 39 f. An individual damaged by the negligent or knowing and 40 willful disclosure of confidential information by a local team or its 41 members may bring an action for damages, costs, and attorney fees 42 consistent with State law. Additionally, the Department of Health 43 may establish penalties for the negligent or knowing and willful 44 disclosure of confidential information by a local team or its 45 members. 46 g. Nothing in this act shall be construed to require the disclosure 47 of any private or confidential health information in violation of 48 State or federal privacy laws.²

²6. a. The Department of Health, the Office of the Chief State 1 2 Medical Examiner, applicable county medical examiner offices, and local overdose fatality review teams may pursue all sources of 3 4 federal funding, matching funds, and foundation funding available 5 to implement the provisions of this act. b. The Department of Health, the Office of the Chief State 6 7 Medical Examiner, county medical examiner offices, and local 8 overdose fatality review teams may accept such gifts, grants, and 9 endowments, from public or private sources, as may be made, in 10 trust or otherwise, or any income derived according to the terms of 11 a gift, grant, or endowment, to implement the provisions of this act.² 12 13 14 ²7. a. The Department of Health shall analyze and compile 15 reports from each local overdose fatality review team and submit 16 one Statewide annual overdose fatality report containing information from each local team. The report shall be submitted to 17 the Governor and, pursuant to section 2 of P.L.1991, c.164 18 19 (C.52:14-19.1), to the Legislature. The report shall be considered a government record pursuant to P.L.1963, c.73 (C.47:1A-1 et seq.). 20 21 Each publication of the Statewide annual report shall be in a format 22 that does not identify any individual or decedent and does not 23 contain personally identifying information. 24 b. The Office of the Chief State Medical Examiner may direct 25 all local teams to assist with the coordination of all the relevant 26 information necessary to review a specific decedent case. c. The Department of Health may share data containing de-27 28 identified data at any time. The department may only share data 29 containing personally identifiable information if the data is being 30 shared for public health purposes, the sharing of the data is 31 permitted by this act and other applicable laws, and the data is in a 32 form and format that is secured to prevent the disclosure of personally identifiable information. Any publication made 33 available to the public shall be in a format that does not identify any 34 35 individual or decedent and does not contain personally identifiable information.² 36 37 38 ²<u>8. Any local overdose fatality review team in existence on the</u> 39 date of enactment of this act shall conform to the requirements of, 40 and operate in accordance with, the provisions of this act no later than 90 days after the date of enactment of this act.² 41 42 ²[¹[3.] <u>4.</u>¹] <u>9.</u>² The Department of Health ²[shall] \underline{may}^2 adopt 43 ²<u>any</u>² rules and regulations ²<u>necessary to effectuate the provisions</u> 44 of this act², ²which rules and regulations shall be effective 45 immediately upon filing with the Office of Administrative Law for 46 47 a period not to exceed six months and which may thereafter be

12

- 1 <u>adopted</u>² pursuant to the "Administrative Procedure Act," P.L.1968,
- c.410 (C.52:14B-1 et seq.) ²[, to implement the provisions of this
 act]².
- 4
- 5 ${}^{2}[1[4], \underline{5}, \underline{1}], \underline{10}, \underline{2}$ This act shall take effect ${}^{2}[180], \underline{90}^{2}$ days after
- 6 the date of enactment.