

[Third 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 December 2, 2021.



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

3

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

6

7 ²**[1.** a. The Local Advisory Committee on Alcohol Use
8 Disorder and Substance Use Disorder in each county ¹**[shall] may**¹
9 establish a local drug overdose fatality review team for that county.
10 A local drug overdose fatality review team may serve one or more
11 counties where practicable. Each local drug overdose fatality
12 review team shall elect a chair ¹**[to administer a process of review**
13 and enact and implement a standard protocol for the collection and
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
18 under this section, which may include, but shall not be limited to,
19 funding sufficient to allow each team to employ appropriate full-
20 time and part-time personnel as may be necessary]¹.

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

25 c. The Commissioner of Health shall develop a mandatory drug
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
31 cases of drug overdose death to the Department of Health in a
32 standardized, uniform format.

33 d. The department shall transmit to the appropriate local drug
34 overdose fatality review team such information as the department
35 has available concerning any drug overdose that occurs within the
36 county served by the local drug overdose fatality review team,
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 health
44 care provider related to the individual's physical health, mental

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 underlined thus is new matter.

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.

³Senate floor amendments adopted December 2, 2021.

1 health, and substance use disorder treatment ¹], if the individual's
2 next of kin or authorized representative consents to the release of
3 the information or records¹ ; and

4 (2) any relevant information and records maintained by a State
5 or local government agency, including criminal history records and
6 records of probation and parole ¹if the transmission of such records
7 does not imperil ongoing investigations¹ , medical examiner
8 records, social service records, and school records and educational
9 histories ¹], if the individual's next of kin or authorized
10 representative consents to the release of the information or
11 records¹ .

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
21 substance use disorders;

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
26 transmitted to the team pursuant to this section, as well as available
27 criminal, educational, substance abuse, and mental health records of
28 the deceased individuals. Local drug overdose fatality review team
29 meetings shall be closed to the public ¹, and information discussed
30 at the meetings shall be deemed confidential¹ .

31 g. As used in this section:

32 "Drug overdose" means an acute condition including, but not
33 limited to, ¹extreme¹ physical illness, coma, ¹[mania, hysteria]
34 decreased level of consciousness, respiratory depression¹ , or death
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
38 believe to require medical assistance.²

39
40 ²[2. Names and individual identification data collected pursuant
41 to the provisions of this act shall not be disclosed by the
42 Department of Health or a local drug overdose fatality review team
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
47 are directed to share, upon request by ¹the Department of Law and

1 Public Safety for integration into its integrated drug awareness
2 dashboard, or by¹ a local drug overdose fatality review team, ¹~~and,~~
3 in the case of confidential or personal identifying information, with
4 the consent of the next of kin or authorized representative of the
5 individual who is the subject of the information or record,~~]~~¹ such
6 information or records as may be necessary and appropriate for the
7 local drug overdose fatality review team to conduct a review of
8 reported drug overdose deaths pursuant to section 1 of this act ¹~~or~~
9 for the Department of Law and Public Safety to integrate into its
10 integrated drug awareness dashboard in order to protect the public
11 health, safety, and welfare¹ .²

12
13 ²~~1~~³. 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.¹²

17
18 ²~~1~~. a. The Local Advisory Committee on Alcohol Use
19 Disorder and Substance Use Disorder in each county ¹~~shall~~ may¹
20 establish a local drug overdose fatality review team for that county.
21 A local drug overdose fatality review team may serve one or more
22 counties where practicable. Each local drug overdose fatality
23 review team shall elect a chair ¹~~to~~ administer a process of review
24 and enact and implement a standard protocol for the collection and
25 maintenance of data that shall be consistent with all teams. The
26 Commissioner of Human Services shall make available to local
27 drug overdose fatality review teams such funding as may be
28 appropriate to enable the teams to undertake the duties required
29 under this section, which may include, but shall not be limited to,
30 funding sufficient to allow each team to employ appropriate full-
31 time and part-time personnel as may be necessary¹ .

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

36 c. The Commissioner of Health shall develop a mandatory drug
37 overdose death reporting process, pursuant to which health care
38 practitioners, medical examiners, hospitals, emergency medical
39 services providers, local health departments, law enforcement
40 agencies, substance use disorder treatment programs, and relevant
41 social services agencies will be required to confidentially report
42 cases of drug overdose death to the Department of Health in a
43 standardized, uniform format.

44 d. The department shall transmit to the appropriate local drug
45 overdose fatality review team such information as the department
46 has available concerning any drug overdose that occurs within the
47 county served by the local drug overdose fatality review team,

1 including, but not limited to: the individual's age, race, gender,
2 county of residence, and county of death; and the date, manner,
3 cause, and specific circumstances of the overdose death, as recorded
4 on the individual's completed death certificate. In addition, the
5 team may be provided access to the following records related to the
6 individual:

7 (1) any relevant information and records maintained by a health
8 care provider related to the individual's physical health, mental
9 health, and substance use disorder treatment ¹["], if the individual's
10 next of kin or authorized representative consents to the release of
11 the information or records¹ ; and

12 (2) any relevant information and records maintained by a State
13 or local government agency, including criminal history records and
14 records of probation and parole ¹if the transmission of such records
15 does not imperil ongoing investigations¹ , medical examiner
16 records, social service records, and school records and educational
17 histories ¹["], if the individual's next of kin or authorized
18 representative consents to the release of the information or
19 records¹ .

20 e. Upon receipt of a report of drug overdose death that has
21 been forwarded to a local drug overdose death fatality review team
22 pursuant to subsection d. of this section, the team shall review the
23 reported case in accordance with the provisions of subsection f. of
24 this section.

25 f. Each local drug overdose fatality review team shall:

26 (1) develop methods to help prevent drug overdoses;

27 (2) explore methods to promote cooperation among multi-
28 disciplinary agencies in providing services to individuals with
29 substance use disorders;

30 (3) develop an understanding of the causes of drug overdoses;

31 (4) recommend possible changes to law and policy to prevent
32 drug overdoses; and

33 (5) meet at least quarterly to review drug overdose death cases
34 transmitted to the team pursuant to this section, as well as available
35 criminal, educational, substance abuse, and mental health records of
36 the deceased individuals. Local drug overdose fatality review team
37 meetings shall be closed to the public ¹, and information discussed
38 at the meetings shall be deemed confidential¹ .

39 g. As used in this section:

40 "Drug overdose" means an acute condition including, but not
41 limited to, ¹extreme¹ physical illness, coma, ¹["mania, hysteria]
42 decreased level of consciousness, respiratory depression¹ , or death
43 resulting from the consumption or use of a controlled dangerous
44 substance or another substance with which a controlled dangerous
45 substance was combined and that a layperson would reasonably
46 believe to require medical assistance.²

1 ²1. As used in this act:

2 “Confidential case report” means a report created by a local
3 overdose fatality review team summarizing the data collected and
4 analyzed regarding a confirmed fatal drug overdose.

5 “De-identifiable data” means data or information not containing
6 personally identifiable information.

7 ³“Drug” means a substance which produces a physiological
8 effect when ingested or otherwise introduced into the body.]³

9 “Health care provider” means a physician, advanced practice
10 nurse, or physician assistant acting within the scope of a valid
11 license or certification issued pursuant to Title 45 of the Revised
12 Statutes.

13 “Local team” means a local overdose fatality review team.

14 “Mental health provider” means a psychiatrist, a psychologist, an
15 advanced practice nurse practitioner with a specialty in psychiatric
16 mental health, a clinical social worker, a professional counselor, or
17 a marriage and family therapist who is licensed to provide mental
18 health services pursuant to Title 45 of the Revised Statutes.

19 “Overdose” means “drug overdose” as that term is defined in
20 section 3 of P.L.2013, c.46 (C.24:6J-3).

21 “Personally identifiable information” means any information
22 about an individual that can be used to distinguish or trace an
23 individual’s identity, including, but not limited to, an individual’s
24 name, address, social security number, date and place of birth,
25 mother’s maiden name, biometric records, and medical,
26 educational, financial, and employment information.

27 “Public health purpose” means a purpose of protecting and
28 improving the health of people and their communities. “Public
29 health purpose” includes, but is not limited to, implementing
30 educational programs, recommending policies, administering
31 services, conducting research, and promoting healthcare equity, in
32 an effort to protect the health of entire populations.

33 “Substance use disorder” shall have the same meaning prescribed
34 by the American Psychiatric Association in the Diagnostic and
35 Statistical Manual of Mental Disorders, Fifth Edition, and any
36 subsequent editions, and shall include the symptoms of withdrawal
37 from a substance use disorder.

38 “Substance use disorder treatment provider” means any
39 individual or entity licensed, registered, or certified pursuant to the
40 laws of this State to treat substance use disorders or who holds a
41 current and valid waiver under the federal Drug Addiction
42 Treatment Act of 2000 (Pub. L. 106-310) from the federal
43 Substance Abuse and Mental Health Services Administration to
44 treat individuals with substance use disorder using medications
45 approved for that indication by the United States Food and Drug
46 Administration.²

1 ²[2. Names and individual identification data collected pursuant
2 to the provisions of this act shall not be disclosed by the
3 Department of Health or a local drug overdose fatality review team
4 member unless required by law, and nothing in this act shall be
5 construed to require disclosure of any private or confidential health
6 information in violation of State or federal privacy laws.
7 Notwithstanding the foregoing, State and local government agencies
8 are directed to share, upon request by ¹the Department of Law and
9 Public Safety for integration into its integrated drug awareness
10 dashboard, or by¹ a local drug overdose fatality review team, ¹[and,
11 in the case of confidential or personal identifying information, with
12 the consent of the next of kin or authorized representative of the
13 individual who is the subject of the information or record,]¹ such
14 information or records as may be necessary and appropriate for the
15 local drug overdose fatality review team to conduct a review of
16 reported drug overdose deaths pursuant to section 1 of this act ¹or
17 for the Department of Law and Public Safety to integrate into its
18 integrated drug awareness dashboard in order to protect the public
19 health, safety, and welfare¹ .]²

20
21 ²2. a. (1) A county health department ³[or a local board of
22 health]³ may establish a local overdose fatality review team to
23 conduct a comprehensive review of confirmed overdose fatalities ³,
24 or a sample thereof using an approach authorized by the Department
25 of Health in consultation with the Office of the Chief State Medical
26 Examiner,³ in order to better understand the individual and
27 population circumstances and the resources and characteristics of
28 potential overdose victims for the purposes of preventing future
29 overdose deaths and related harms in a locality.

30 (2) A local drug overdose fatality review team may be
31 established to serve ³[;

32 (a)]³ one or more counties ³[;

33 (b)] . The Office of the Chief State Medical Examiner may
34 direct a local overdose fatality review team to establish a municipal
35 subcommittee to focus on³ a municipality with a population of
36 100,000 persons or more; or

37 ³[(c)]³ a municipality with a high overdose rate as determined
38 on annual basis by the Department of Health and the Office of the
39 Chief State Medical Examiner.

40 (3) A local overdose fatality review team shall be under the
41 direction of the county health department ³[or the local board of
42 health, as appropriate,]³ and shall be subject to the regulation of the
43 Department of Health. A local team shall work cooperatively with
44 the Local Advisory Committee on Alcohol Use Disorder and
45 Substance Use Disorder, established pursuant to section 4 of
46 P.L.1983, c.531 (C.26:2B-33), if one exists within the local team's

1 jurisdiction. A local team shall cooperate with and provide any
2 information as may be requested by the Office of the Chief State
3 Medical Examiner or the Department of Health ³through the
4 Deputy Commissioner for Public Health Services³ for public
5 health purposes.

6 b. A local overdose fatality review team shall consist of
7 individuals with experience and knowledge regarding health, social
8 services, law enforcement, education, emergency medicine, mental
9 health, juvenile delinquency, and substance use disorders.

10 (1) At a minimum, each local overdose fatality review team
11 shall include:

12 (a) the ³ municipal or³ county health officer, or a designee;

13 (b) the regional or county medical examiner, or a designee;

14 (c) a member of the Local Advisory Committee on Alcohol Use
15 Disorder and Substance Use Disorder, established pursuant to
16 section 4 of P.L.1983, c.531 (C.26:2B-33), if one exists within the
17 local team's jurisdiction;

18 (d) a State, county, or municipal law enforcement officer or
19 county prosecutor;

20 (e) a substance use disorder health care professional; and

21 (f) the county or municipal director of behavioral health
22 services, or a designee.

23 (2) A local overdose fatality review team may also include any
24 of the following:

25 (a) the superintendent of schools, or a designee;

26 (b) an emergency medical services provider;

27 (c) a representative of a health care facility, including a hospital,
28 health system, or federally qualified health center;

29 (d) a representative of a county jail, detention center, or
30 corrections department;

31 (e) a representative of a county social services agency;

32 (f) ³ a pharmacy permit holder or another³ an³ individual with
33 access to the Prescription Monitoring Program established pursuant
34 to section 25 of P.L.2007, c.244 (C.45:1-45);

35 (g) a representative of the local office of the Division of Child
36 Protection and Permanency in the Department of Children and
37 Families;

38 (h) a representative of a county healthcare facility;

39 (i) a representative of a harm reduction center, if one is located
40 in a municipality or county over which the local team exercises
41 jurisdiction; ³ and³

42 (j) any individual deemed necessary for the work of the local
43 team, as recommended by the chair and approved by a majority vote
44 of the team members and by the Department of Health ³; and

45 (k) a representative of the office of county probation and parole
46 services^{3, 2}.

1 ²13. The Department of Health, in collaboration with each local
2 drug overdose fatality review team, shall report any findings made
3 pursuant to this act to the Governor and, pursuant to section 2 of
4 P.L.1991, c.164 (C.52:14-19.1), to the Legislature.¹²

5
6 ²3. a. A local overdose fatality review team established
7 pursuant to section 2 of this act shall:

8 (1) establish and implement appropriate protocols and
9 procedures that allow the local teams to operate in accordance with
10 applicable State and federal laws;

11 (2) elect, in accordance with the procedures established pursuant
12 to paragraph (1) of this subsection and on an annual basis, a chair,
13 who shall be a member of the local team;

14 (3) collect, analyze, interpret, and maintain local data on
15 overdose deaths, which information shall be maintained by the local
16 team in accordance with all appropriate and industry-standard
17 technical, administrative, and physical controls necessary to protect
18 the privacy and security of the information;

19 (4) conduct, in accordance with Department of Health
20 regulations and guidance, a multidisciplinary review of the
21 information collected pursuant to this section regarding a decedent
22 of a confirmed fatal drug overdose, as selected by the office of the
23 county medical examiner in the county in which the³decedent was
24 pronounced dead³ overdose fatality was primarily investigated³ and
25 at the direction of the Office of Chief State Medical Examiner,
26 which review shall include, but need not be limited to:

27 (a) consideration of the decedent's points of contact with health
28 care systems, social services, educational institutions, child and
29 family services, the criminal justice system, including law
30 enforcement, and any other systems with which the decedent had
31 contact prior to death; and

32 (b) identification of the specific factors and social determinants
33 of health that put the decedent at risk for an overdose;

34 (5) recommend prevention and intervention strategies to
35 improve the coordination of services and investigations among
36 member agencies in an effort to reduce overdose deaths;

37 (6) produce confidential case reports based on information
38 received, which shall be transmitted to the Department of Health in
39 a form and manner prescribed by the department. The reports and
40 the data used therefor shall only be accessed by the department for
41 public health purposes, in a form and format that is secured to
42 prevent disclosure of personally identifiable information,
43 ³determined by the department and³ in accordance with
44 applicable State and federal³law³ laws³; and

45 (7) submit to the Department of Health an annual report³, in a
46 manner prescribed the department,³ containing only de-identified
47 data associated with the jurisdiction served by the local team, which

1 reports may be made available to the public pursuant to P.L.1963,
2 c.73 (C.47:1A-1 et seq.) and shall include, but need not be limited
3 to:

4 (a) the total number of fatal overdoses that occurred within the
5 jurisdiction of the local team;

6 (b) the number of fatal overdose cases investigated by the local
7 overdose fatality team;

8 (c) any recommendations for action by State agencies, local
9 agencies, or the Legislature for preventing fatal overdoses in this
10 State; and

11 (d) any assessable results of any recommendations made by the
12 local team, including, but not limited to, changes in local, county,
13 or State law, policy, or funding made as a result of the local team's
14 recommendations.

15 b. A local overdose fatality review team shall establish policies
16 and procedures to ensure that all records ³in their possession³
17 containing personally identifiable information are ³properly handled
18 and retained and are securely and permanently³ destroyed within
19 one year ³of,³ or within a reasonable period of time ³, as determined
20 by the Department of Health,³ after ^{3,3} the conclusion of a local
21 team's review of a decedent's case. The annual report and other
22 public records shall be destroyed in accordance to the requirements
23 of P.L.1953, c.410 (C.47:3-15 et seq.).

24 c. A local team may only request, collect, analyze, and share
25 information for public health purposes directly related to the review
26 of confirmed fatal drug overdoses and, except as otherwise provided
27 in this act, in compliance with all applicable State and federal laws
28 or regulations.²

29
30 ²4. a. To the extent not otherwise inconsistent with State and
31 federal laws and only upon written request of the chair of a local
32 overdose fatality review team and as necessary to carry out the
33 official functions of the local team and the provisions of this act, the
34 entities listed in subsection b. of this section may provide a local
35 team with the following information:

36 (1) any relevant information and records maintained by a health
37 care provider related to an individual's physical health, mental
38 health, and substance use disorder treatment; and

39 (2) any relevant information and records maintained by a State
40 or local government agency, including criminal history records and
41 records of probation and parole if the transmission of such records
42 does not imperil ongoing investigations, medical examiner records,
43 social service records, and school records and educational histories.

44 b. The following individuals and entities may disclose, within a
45 reasonable period of time following a request, medical records and
46 information requested pursuant to subsection a. of this section:

47 (1) county medical examiners;

- 1 (2) paid fire departments or volunteer fire companies;
2 (3) hospitals and health systems;
3 (4) law enforcement agencies;
4 (5) State and local government agencies;
5 (6) mental health providers;
6 (7) health care practitioners;
7 (8) substance use disorder treatment programs and providers;
8 (9) public and private schools and institutions of higher
9 education;
10 (10) emergency medical services providers;
11 (11) social services agencies and providers; and
12 (12) the Prescription Monitoring Program.
13 c. An individual or entity subject to a request for information or
14 records by a local overdose fatality review team pursuant to this
15 section may charge the local team a reasonable fee for the service of
16 duplicating any records.
17 d. ³(1)³ The chair of a local overdose fatality review team, or the
18 chair's designee, may request individuals authorized under 42
19 C.F.R. Part 2 to provide consent for the release of confidential
20 information protected pursuant to 42 U.S.C. s.290dd-2 and 42
21 C.F.R. Part 2.
22 ³(2) To the extent not otherwise inconsistent with State and
23 federal laws, and as necessary to carry out the official functions of
24 the local team and the provisions of this act, other individuals and
25 entities identified by a local overdose fatality review team as having
26 relevant data for a confidential case report may also provide a local
27 team with relevant information in their possession that may contain
28 personally identifiable information.³
29 e. A local overdose fatality review team shall develop a
30 confidentiality ³policy and³ form establishing: the requirements for
31 maintaining the confidentiality of any information disclosed during
32 a meeting, during review, or at any other time; the responsibilities
33 concerning those requirements; and any penalties associated with
34 failure to maintain such confidentiality. Such requirements shall be
35 in accordance with all applicable State and federal laws and any
36 best practices identified by the Department of Health. An
37 individual shall review the confidentiality ³policy and³ form,
38 purpose, and goals of the local team prior to participating in any
39 review. All necessary and reasonable measures shall be taken to
40 prevent the disclosure of a decedent's name or initials at any team
41 meeting.
42 f. Information received pursuant to this act may be shared with
43 local team members at a meeting of the local team, provided that
44 each individual present, including staff, has signed and abides by
45 the provisions of the confidentiality ³policy and³ form developed
46 pursuant to subsection e. of this section. Such information may be
47 shared with any non-member attendees who meet the criteria of

1 subsection b. of section 2 of this act and whose attendance is
2 approved in accordance with this act, provided that such attendees
3 also sign and abide by the provisions of the confidentiality ³policy
4 and³ form.

5 g. (1) Meetings of a local team during which confidential
6 information is discussed shall be closed to the public, except that,
7 upon a majority vote of the local team members present, a local
8 team may request and permit an individual who has information
9 relevant to the exercise of the team's duties to attend a team
10 meeting, regardless of whether the individual meets the criteria set
11 forth in subsection b. of section 2 of this act or is a permanent
12 member of the local team. Notice concerning the individual's
13 attendance shall be provided to members of the local team not later
14 than 10 days prior to the meeting at which the individual will be
15 present.

16 (2) A representative from the Department of Health, as
17 designated by the Deputy Commissioner for Public Health Services,
18 and a representative from the Office of the Chief State Medical
19 Examiner may attend any meeting of a local overdose fatality
20 review team. Notice concerning a representative's attendance shall
21 be provided to members of the local team not later than 10 days
22 prior to the meeting at which the representative will be present.

23 h. Meetings of a local overdose fatality review team shall be
24 exempt from the "Senator Byron M. Baer Open Public Meetings
25 Act," P.L.1975, c.231 (C.10:4-6 et seq.).

26 i. A member of the local overdose fatality review team may
27 contact, interview, or obtain information by request from a family
28 member or friend of an individual whose death is being reviewed by
29 the local team.

30 j. To the extent not otherwise inconsistent with State and federal
31 ³[law] laws³, an entity that provides, in good faith, information or
32 records to a local overdose fatality review team shall not be subject
33 to civil or criminal liability or any professional disciplinary action
34 as a result of providing the information or records.²
35

36 ²5. a. Information and records acquired by a local overdose
37 fatality review team, except for information contained within the
38 annual report submitted pursuant to paragraph (7) of subsection a.
39 of section 3 of this act, shall be confidential and shall not be subject
40 to subpoena, discovery, or introduction into evidence in a civil or
41 criminal proceeding or disciplinary or other administrative action.
42 Information and records that are otherwise available from other
43 sources shall not be immune from subpoena, discovery, or
44 introduction into evidence through those sources solely due to the
45 presentation or review of the information or record to or by a local
46 team.

1 b. Information and records created by a local overdose fatality
2 review team shall be considered confidential and shall not be
3 disclosed to the public or considered a government record pursuant
4 to P.L.1963, c.73 (C.47:1A-1 et seq.).

5 c. Substance use disorder treatment records requested by or
6 provided to a local overdose fatality review team shall be subject to
7 any additional limitations on the redisclosure of a medical record
8 developed in connection with the provision of substance use
9 disorder treatment services under State or federal law, including,
10 but not limited to, 42 U.S.C. s.290dd-2 and 42 C.F.R. Part 2.

11 d. Local overdose fatality review team members, and any
12 individual who presents or provides information to a local team,
13 may not be questioned in any civil or criminal proceeding or
14 disciplinary action regarding the information presented or provided,
15 except in an action contesting the validity of the disclosure itself.
16 This subsection shall not prevent an individual from testifying
17 regarding information obtained independently of the local team,
18 public information, or publicly available information.

19 e. The county health department ³[or local board of health, as
20 appropriate,]³ shall ensure the privacy, confidentiality, and security
21 of the information provided to a local overdose fatality review team
22 shall be maintained as required by State and federal laws and any
23 local ordinances.

24 f. An individual damaged by the negligent or knowing and
25 willful disclosure of confidential information by a local team or its
26 members may bring an action for damages, costs, and attorney fees
27 consistent with State law. Additionally, the Department of Health
28 may establish penalties for the negligent or knowing and willful
29 disclosure of confidential information by a local team or its
30 members.

31 g. Nothing in this act shall be construed to require the disclosure
32 of any private or confidential health information in violation of
33 State or federal privacy laws.²

34
35 ²6. a. The Department of Health, the Office of the Chief State
36 Medical Examiner, ³applicable county and local health
37 departments,³ applicable county medical examiner offices, and local
38 overdose fatality review teams may pursue all sources of federal
39 funding, matching funds, and foundation funding available to
40 implement the provisions of this act.

41 b. The Department of Health, the Office of the Chief State
42 Medical Examiner, county medical examiner offices, and local
43 overdose fatality review teams may accept such gifts, grants, and
44 endowments, from public or private sources, as may be made, in
45 trust or otherwise, or any income derived according to the terms of
46 a gift, grant, or endowment, to implement the provisions of this
47 act.²

1 ²7. a. The Department of Health shall analyze and compile
2 reports from each local overdose fatality review team and submit
3 one Statewide annual overdose fatality report containing
4 information from each local team. The report shall be submitted to
5 the Governor and, pursuant to section 2 of P.L.1991, c.164
6 (C.52:14-19.1), to the Legislature. The report shall be considered a
7 government record pursuant to P.L.1963, c.73 (C.47:1A-1 et seq.).
8 Each publication of the Statewide annual report shall be in a format
9 that does not identify any individual or decedent and does not
10 contain personally³ identifiable or personal³ identifying information.

11 b. The Office of the Chief State Medical Examiner may direct
12 all local teams to assist with the coordination of all the relevant
13 information necessary to review a specific decedent case.

14 c. The Department of Health may share data containing de-
15 identified data at any time. The department may only share data
16 containing personally identifiable information if the data is being
17 shared for public health purposes, the sharing of the data is
18 permitted by this act and other applicable laws, and the data is in a
19 form and format that is secured to prevent the disclosure of
20 personally identifiable information. Any publication made
21 available to the public shall be in a format that does not identify any
22 individual or decedent and does not contain personally identifiable
23 information.²

24
25 ²8. Any local overdose fatality review team in existence on the
26 date of enactment of this act shall conform to the requirements of,
27 and operate in accordance with, the provisions of this act no later
28 than 90 days after the date of enactment of this act.²

29
30 ²[¹[3.] 4.¹] 9.² The Department of Health²[shall] may² adopt
31 ²any² rules and regulations² necessary to effectuate the provisions
32 of this act² , ²which rules and regulations shall be effective
33 immediately upon filing with the Office of Administrative Law for
34 a period not to exceed six months and which may thereafter be
35 adopted² pursuant to the "Administrative Procedure Act," P.L.1968,
36 c.410 (C.52:14B-1 et seq.)²[, to implement the provisions of this
37 act]² .

38
39 ²[¹[4.] 5.¹] 10.² This act shall take effect²[180] 90² days after
40 the date of enactment.