

Massachusetts Current Opioid Harm Reduction Efforts

Expanding Access to Naloxone

- **Bulk Purchasing Program**

- Established through legislation in 2015 to reduce costs for municipalities and state agencies purchasing naloxone.
- Through the program, first responders, houses of corrections, health departments, schools or other municipal agencies can purchase Naloxone products through the State Office of Pharmacy Services (SOPS). This allows these entities to take advantage of the combined purchasing power of the Commonwealth to obtain naloxone at a reduced price.

Current rates are as follows:

Naloxone 2mg/2ml Syringe	\$ 29.26 each
Nasal Atomizer	\$ 6.03 each
Narcan 4mg Nasal Spray	\$ 71.02 per box of two

- Subject to available funds in the Bulk Purchase Trust Fund, for municipal first responders (fire & police departments) and houses of corrections the cost is discounted even further to \$20.00 for each syringe and \$40.00 for the box of Narcan Nasal Spray.
- Since FY16, 177 entities have purchased through the program.

- **Naloxone Dispensing via Standing Order**

- Chapter 165 of the acts of 2014 authorized pharmacies to provide Naloxone to members of the public if the pharmacy had a standing order on file with the Department of Public Health.
- Chapter 208 of the acts of 2018 has several provisions that further expand access to Naloxone:
 - The law authorizes a statewide standing order, rather than requiring each pharmacy to secure and file one (M.G.L. c. 94C, § 19B);
 - The law protects the physician signing the statewide order, and all practitioners prescribing or dispensing naloxone from criminal or civil liability or any professional disciplinary action. (M.G.L. c. 94C, § 19B(f))
 - The law provides criminal and civil immunity for anyone, acting in good faith, who administers an opioid antagonist to an individual appearing to experience an opioid-related overdose. (M.G.L. c. 94C, § 19B(g))
 - The law requires that for insurance billing and cost-sharing purposes, the pharmacy must treat the transaction as the dispensing of a prescription to the person purchasing naloxone. There is no limit to the amount of naloxone that may be dispensed to an individual. Massachusetts state law specifically allows for an individual to obtain naloxone with the intention to administer it to another person.
- All retail pharmacies located in Massachusetts and licensed by the Board of Pharmacy must stock naloxone in accordance with M.G.L. c. 94C section 19C.

- **Overdose Education and Naloxone Distribution (OEND) Program**

- Operated by DPH, the OEND program provides outreach and engagement services for individuals most at risk of experiencing or witnessing an opioid overdose. OEND

works with existing syringe services programs (SEPs), street outreach programs, overdose prevention groups at DPH-funded treatment programs, etc. The overdose prevention training and education is coupled with naloxone purchased by the DPH and provided to the contracted OEND programs.

- OEND started in 2007 with six agencies selected to participate in the pilot; today, there are 21 agencies that have an OEND program (including Learn to Cope).
 - Number of enrollments since 2007: 79,159
 - Number of bystander rescue reports: 17,726
 - FY18 enrollments: 12,412*
 - FY18 bystander rescue reports: 5,446*
- Funding history: FY16: \$3.87M, FY17: \$4.88M, FY18: \$5.5M, FY19 Planned: \$5.98M

First Responder Naloxone Grant

- Grants provided to police and fire departments in communities with high incidence of opioid overdoses.
- Grants cover a portion of the costs of naloxone, related medical supplies, staff training, and community overdose prevention and response activities.
- Currently funds 33 municipal police and fire departments.
- Since 2015, there have been 7,952 reported rescues from funded municipalities as part of this grant program.
- Funding history: FY16: \$606k, FY17: \$578k, FY18: \$586k, FY19 Planned: \$835k

• Post-Overdose Follow-Up with First Responders

- Grants fund an addiction specialist to partner with local community first responders (i.e. Emergency Medical Services, fire or police departments) to make a home visit shortly after a person overdosed and a 911 call was made.
- The pair provide information on opioid treatment programs and encourage the person coping with addiction to receive treatment. If the individual declines, the team will share harm reduction strategies, such as using naloxone and clean needles, and connect family members or others living in the household to supportive community services in addiction education and naloxone training.
- Funding history: FY 18: \$579k (3 grantees); FY 19 Planned: \$2.1M (7 grantees)

• Needle Exchange Programs

- There are 20 needle exchange programs currently operating in MA and 10 additional cities and towns have recently approved needle exchange programs to operate in their communities. (See Table 1 below)
- These programs provide access to sterile injection equipment and syringe disposal services, referrals to substance use disorder treatment; harm reduction education, including vein and wound care; HIV and HCV education and risk reduction counseling; HIV, HCV, and sexually transmitted infection (STI) testing and referrals; overdose prevention and access to naloxone; and linkages to primary care and case management services.
- In 1993 the legislature authorized one needle exchange program on a pilot basis. In 1996, the cap was raised to 10. Section 65 of chapter 133 of the acts of 2016 removed the cap. Today a needle exchange can operate within a city or town as long as the board of health in the hosting city or town approved.

* Estimates; data still processing

Table 1: Needle Exchange Programs by City/Town

City/Town	Agency	Operational Date
Boston	Boston Public Health Commission	1994
Cambridge	AIDS Action Committee	1994
Brockton	BAMSI	April 2016
Holyoke	Tapestry	2012
Northampton	Tapestry	1996
Provincetown	AIDS Support Group of Cape Cod	1997
Worcester	AIDS Project Worcester	March 2016
Implementation of OS 65		
Chelsea	MAPS/Health Innovation	August 2017
Dartmouth	Seven Hills Behavioral Health	May 2017
Fairhaven	Seven Hills Behavioral Health	May 2017
Fall River	Seven Hills Behavioral Health and SSTAR	April 2017
Gloucester	North Shore Health Project	December 2016
Greenfield	Tapestry	April 2017
Lawrence	Greater Lawrence Family Health Center	January 2017
Lynn	Lynn CHC and MAPS/Health Innovations	June 2017
North Adams	Tapestry	December 2016
Pittsfield	Berkshire Medical Center	September 2017
Taunton	Seven Hills Behavioral Health	January 2017
Wareham	Seven Hills Behavioral Health	May 2017
Salem	Lynn CHC and MAPS/Health Innovations	December 2017
Approval Letter Sent to DPH		
Braintree	June 1, 2018	October-November 2018
Chilmark	January 5, 2018	October-November 2018
Edgartown	July 24, 2018	October-November 2018
Framingham	June 12, 2018	October-November 2018
Lowell	June 13, 2018	October-November 2018
Oak Bluffs	December 27, 2017	October-November 2018
Quincy	June 18, 2018	October-November 2018
Springfield	July 10, 2018	October-November 2018
Tisbury	June 12, 2018	October-November 2018
West Tisbury	December 18, 2017	October-November 2018

Supportive Place for Observation and Treatment (SPOT)

In April 2016, Boston Health Care for the Homeless Program began implementing a privately-funded program called Supportive Place for Observation and Treatment (SPOT). SPOT offers support and medical monitoring for a limited number of individuals (8-10) who are over-sedated from the use of substances and who would otherwise be outside on a street corner, alleyway, or alone in a public bathroom at high risk of overdose. The facility is staffed by an addiction nurse, a public health advocate who specializes in community-based harm reduction services, and peers who are in recovery themselves.

Public Awareness Campaigns

- ***Make the Right Call***
 - Public awareness campaign launched in May 2016, encouraging bystanders witnessing an overdose to seek emergency medical assistance without fear of prosecution. The campaign highlights the state's expanded Good Samaritan law, stressing that people calling in a drug overdose will not be prosecuted for drug use or possession.
- ***State Without StigMA***
 - Campaign to reduce stigma associated with drug abuse focused on supporting residents actively in recovery, as well as those currently addicted to seek out treatment.

Other Relevant Programming and Legislation

- **Health Resources in Action (HRiA) - Opioid Overdose Prevention Training Project**
 - Offers free training and technical assistance on opioid overdose prevention, response, and after-care to providers that serve individuals involved with the criminal justice system and providers that serve people who are experiencing homelessness or at-risk of homelessness.
 - To date, HRiA has completed 47 training events, including 415 individuals trained in overdose prevention and response topics.
- **2016 Expansion of 911 Good Samaritan Law**
 - The Massachusetts Good Samaritan Law (Chapter 94C, Section 34A) protects individuals experiencing an overdose and those who call 911 for help from charge, prosecution, and conviction for possession or use of controlled substances.