

MAXINE E. DEXTER
STATE REPRESENTATIVE

DISTRICT 33



HOUSE OF REPRESENTATIVES

To: Members of the Senate Committee on Rules

Date: June 16, 2023

Subject: Support HB 2395 A and the -A9

Chair Lieber, Vice Chair Knopp, and members of the Committee,

For the record, my name is Dr. Maxine Dexter, and I am honored to be the State Representative for House District 33, which includes NW & Downtown Portland, Linnton, and Cathedral Park. I am grateful for this opportunity today to present HB 2395 A with the -A9 consensus amendment for the Opioid Harm Reduction Omnibus Bill, and ask for your support. This bill comes to your committee with a unanimous vote out of the House Committee on Behavioral Health and Health Care (with one member absent), and a strong bipartisan 48-9 vote on the House floor, as well as a unanimous vote of attending members of the Senate Committee on Health Care. Since moving out of Senate Health Care it has been the subject of further negotiation and I am grateful for your considering the negotiated amendment and the bill here today.

It is impossible to ignore the profoundly tragic impact illicitly-manufactured fentanyl is having across Oregon. The threat it poses to every member of our community is very real. Our responsibility, as elected leaders, is to ensure the health and safety of Oregonians. This comprehensive package presents an opportunity to take immediate, data-driven action that will save lives. I am deeply grateful to testify to you in solidarity with a broad coalition of partners who have worked with my team for many months to bring to you this omnibus package that centers harm reduction using a public-health approach. Courageous leaders across many sectors have leaned in and elevated the importance of this work to get to where we are today - a well-considered, **bipartisan** package that has earned the support of harm reduction advocates, law enforcement, clinicians, students, educators, local governments and our public health system.

Over the last two weeks my office has engaged in constructive and sincere discussions about this bill with Senator Hayden and his Chief of Staff, Julie Parrish. The -A9 amendment is the outcome of this collaborative discussion. Although our coalition and I did not achieve everything we had hoped for, **this bill will immediately start saving lives** once it becomes law. I look forward to working with Senator Hayden in coming sessions should this statute need further refinement to make sure substance use disorder treatment and reversal agents are readily available to all of Oregon's most vulnerable populations, including minors. I'm grateful for his commitment to this ongoing work.

The -A9 amendment makes the following changes to the engrossed version of HB 2395:

- School Administration of Short-Acting Opioid Antagonists

- Schools will be required to provide information on short-acting opioid antagonists to parents and guardians with a disclaimer that in an emergency, they may be administered to a student suspected of suffering from an overdose to avoid delay in administering this life-saving antidote.
- Schools will be required to immediately inform parents and guardians if a short-acting opioid antagonist has been administered to their student.
- The -A9 better aligns liability protections for school staff and the district with Oregon's existing Good Samaritan law.
- Minor Access to Treatment
 - The provision allowing minors of any age to receive substance use disorder treatment without parental consent has been removed.
 - The -A9 amendment clarifies the drug paraphernalia statute, ensuring that minors can only receive certain tools as prescribed by a medical or mental health provider and with parental consent if the minor is 14 years old or younger.
- Technical Fixes
 - The -A9 amendment corrects a drafting error that previously required counties to report the "manner of death" instead of the "cause of death" when a youth with significant contacts in multiple counties passes away due to a suspected drug overdose.
 - The bulk purchasing section has been removed in the -A9 as the Oregon Health Authority informed my office that the language was unnecessary.

In addition to serving my community as a legislator, I have the privilege of working as a practicing pulmonary and critical care physician. Being in medical practice for over 20 years, I have experienced first-hand the implementation of policies that led to dramatically increased opiate use, and the consequence this has had on my patients. These presumably well-intentioned policies have contributed to nearly a million deaths due to drug overdoses since 1999¹. I very much understand how policies can influence the public's health, and too often, we don't understand the enormous impact we as policymakers can have - both good and bad. Today I hope you will join me in pursuit of policy changes that can help undo the harm that has evolved for over 30 years.

As a reminder, this package will help protect all Oregonians through the following policy changes:

- We will decriminalize the distribution of fentanyl test strips and other tools, which are proven interventions to reduce the risk of overdose and drug-related death^{2,3}.
- We will remove barriers to naloxone availability in publicly-accessible buildings and will allow OHA to issue standing prescriptions for short-acting opioid antagonists. The concept ensures the building owner, and anyone who may utilize the available naloxone are protected from civil and criminal liability.

¹ <https://www.cdc.gov/drugoverdose/deaths/index.html>

² Krieger, M. S., Goedel, W. C., Buxton, J. A., Lysyshyn, M., Bernstein, E., Sherman, S. G., Rich, J. D., Hadland, S. E., Green, T. C., & Marshall, B. D. L. (2018). Use of rapid fentanyl test strips among young adults who use drugs. *The International journal on drug policy*, 61, 52–58. <https://doi.org/10.1016/j.drugpo.2018.09.009>

³ Darke, S., Hall, W. Heroin overdose: Research and evidence-based intervention. *J Urban Health* 80, 189–200 (2003). <https://doi.org/10.1093/jurban/jtg022>

- We will allow first responders to distribute short-acting opioid antagonist kits to any individual who may need or request one. This will free up capacity to respond to other emergency situations and ensure better access in the community to this lifesaving category of medications.
- We will allow cross-county notification when a youth dies as a result of an overdose outside of their home county. This will allow for a localized public health response in the decedent's community.
- We will provide protection for school staff from civil and criminal liability should they administer naloxone to students suspected to be suffering from an overdose.
- We will change any reference to "naloxone" in current statute to "short-acting opioid antagonist".

I am grateful for the many partners who have engaged in this meaningful work, and to each of you for your attention and consideration today.

Sincerely,

A handwritten signature in black ink, appearing to read 'Maxine Dexter', written in a cursive style.

Representative Maxine Dexter, M.D.
House District 33
NW & Downtown Portland, Linnton, & Cathedral Park