

MOAR's Policy Priorities

An Act relative to preventing overdose deaths and increasing access to treatment

S.1393 (Senator Julian Cyr) and H.2196 (Representatives Marjorie Decker and John Lawn)

Massachusetts for Overdose Prevention Centers (MA4OPC) is supporting this effort.

Contact: MassachusettsForOPC@gmail.com

- **What it does:** This bill establishes a legal framework for harm reduction programs, which seek to minimize the negative effects of substance use. Examples of harm reduction programs include needle exchanges and overdose care. It also provides legal immunity to program operators, staff, and participants as long as the program is approved by the Department of Public Health (DPH) and follows regulation. This bill states that participation in a harm reduction program is not grounds for search or seizure. DPH will set regulations for the program. This bill also clarifies that healthcare providers in these programs are covered under existing law.
- **Why it is Important:** In Massachusetts, 6 people die from drug overdoses daily. In 2015, 1,750 opioid overdose deaths were recorded, and by 2023, the toll rose to 2,125. Overdose deaths are increasing, with widening racial disparities, especially among Black, non-Hispanic men. Overdose Prevention Centers (OPCs) save lives, offer harm reduction services, and connect people to treatment. Since opening in 2021, New York City's OnPoint program reversed nearly 1,700 overdoses. Rhode Island opened its first state authorized OPC in January 2025, immediately reversing overdose deaths.

An Act relative to treatment, not incarceration

S.1117 (Senator Cindy Friedman) and H.1913 (Representatives Marjorie Decker & Tram Nguyen)

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- **What it does:** This bill allows judges to order a person on pretrial release or probation to receive substance use treatment but prohibits them from sending the person to jail simply for relapsing if the person is otherwise engaged in treatment.
- **Why it is important:** Every year, Massachusetts courts mandate thousands of people suffering from addiction to submit to invasive drug-testing as a condition of pretrial release or probation. If relapse occurs, many are incarcerated – even when they are actively working to achieve long-term recovery. It is both unsafe and unjust to require defendants suffering from addiction to remain relapse-free or else face jail.

An Act requiring clean slate automated record sealing

S.1114 (Senator Cindy Friedman) and H.1811 (Representatives Mary Keefe & Andres Vargas)

Clean Slate Massachusetts (www.cleanslatema.org) is supporting this effort.

Contact: [Andrea Freeman at afreeman@publichealthwm.org](mailto:afreeman@publichealthwm.org)

- **What it does:** Clean Slate policies allow individuals to have certain arrest or conviction records automatically sealed as soon as it becomes possible. These policies offer people who have completed their sentences and remained out of trouble the chance to move forward in their lives without the burden of a record. The specific criteria and procedures may vary depending on the jurisdiction and the nature of the record.
- **Why it is important:** Clean Slate policies primarily aim to tackle the enduring repercussions of a record, which often impede individuals from obtaining employment, finding suitable housing, accessing educational opportunities, and rebuilding their lives. Through record sealing, people are offered a fresh start and face fewer barriers to opportunity due to their past. 1.1 million people in Massachusetts have a record (19% of MA's total population) and 672,000 people with a record in Massachusetts could have their record fully sealed (64% of people with a record in MA could be eligible).

An Act helping overdosing persons in emergencies

S.1410 (Senator Joan Lovely)

- **What it does:** This bill increases access to opioid antagonists (like naloxone) and expands overdose training for first responders. Key provisions include: (1) legal immunity for people who use testing equipment (e.g., fentanyl test strips) to help identify substances, (2) first responders will receive training on how to administer naloxone, with refresher courses every 3 years, and (3) emergency vehicles will be equipped with naloxone. This bill aims to improve response capabilities to opioid overdoses by increasing the availability of overdose-reversal drugs and ensuring proper training and protections for first responders.
- **Why it is important:** This bill expands access to opioid antagonists (like naloxone), which prevent overdose deaths. It ensures law enforcement and emergency medical personnel across the state are fully equipped and properly trained so that they can intervene quickly. This bill also provides legal immunity to those assisting with substance testing or administering opioid antagonists, encouraging more community involvement. By addressing the opioid crisis with prevention, education, and direct intervention, it ensures first responders have the necessary tools and resources to handle overdoses effectively. Overall, this bill strengthens overdose prevention efforts and improves emergency responses.

An Act relative to the prescription monitoring program

S.1406 (Senator John Keenan) and H.2200 (Representative Marjorie Decker)

- **What it does:** This bill enhances the monitoring and coordination of opioid maintenance treatments through the prescription monitoring program. Key provisions include: (1) DPH will create a process for including information about opioid maintenance treatment in the state's prescription monitoring program. This aims to help licensed healthcare professionals access data about a patient's participation in opioid maintenance treatment before prescribing other opioids, ensuring better-informed decision-making, (2) opioid treatment programs will provide a consent form to individuals entering treatment which would allow individuals to agree to share information about their opioid maintenance treatment via the prescription monitoring program, and (3) facilities will maintain a record of whether an individual consents to the sharing of their treatment information. Overall, this bill seeks to improve the coordination of care for individuals in opioid treatment programs by sharing key treatment information with authorized prescribers through the prescription monitoring system, while respecting patient privacy and consent.
- **Why it is important:** By including opioid maintenance treatment in the prescription monitoring program (PMP), healthcare providers can better assess a patient's treatment history, ensuring responsible opioid prescribing and reducing the risk of misuse or overdose. Patients can voluntarily consent to share their treatment information, fostering trust and transparency while maintaining control over their data. This improved coordination between providers leads to more effective, integrated care, reducing gaps in treatment. This bill promotes safer prescribing, better care coordination, and supports efforts to combat the opioid crisis by reducing misuse and harm.

An Act ensuring access to addiction services

S.1402 (Senator Cindy Friedman) and H.2197 (Representatives Marjorie Decker & Margaret Scarsdale)

- **What it does:** This bill ends the practice of incarcerating men who have not been charged with a crime but have nonetheless been committed for involuntary treatment for alcohol and substance use disorders under M.G.L. c. 123 § 35 (Section 35). Instead of sending these men to correctional custody, it would require there to be enough treatment capacity in settings administered by DPH and the Department of Mental Health (DMH).
- **Why it is important:** Being sent to MA Department of Correction custody reinforces the shame and stigma that addiction carries in the community, both of which prevent people from seeking help. The

harsh and punitive environment in these facilities is traumatizing and not conducive to recovery. For many, the shame and trauma of incarceration continue to harm even after release. This bill requires that all Section 35 beds (both for men and women) be in healthcare facilities approved by DPH or DMH, not in correctional facilities. It requires that people with substance use disorder (SUD) be treated as patients, not inmates.

An Act relative to Narcan availability in schools

S.1422 (Senator John Velis)

- **What it does:** This bill requires school committees in cities, towns, and regional school districts to create a naloxone overdose prevention program. The program mandates that every school nurse be trained in administering naloxone and have it available in their office. Additionally, this bill calls for public schools to offer extracurricular training for secondary students on how to use naloxone nasal spray, with instruction provided by qualified individuals and based on nationally recognized standards. The program can be developed with assistance from the departments of education and public health.
- **Why it is important:** This bill prepares schools to respond to overdoses by providing them naloxone and training nurses to administer it. It also trains secondary students in naloxone use, empowering them to act in emergencies too. Involving the education and public health departments ensures schools are well-supported and follow best practices. Ultimately, this bill aims to protect students and the community by increasing preparedness and awareness of opioid overdose prevention.

An Act requiring opioid use disorder education

S.382 (Senator John Keenan) and H.530 (Representative Michelle Ciccolo)

- **What it does:** This bill requires schools to integrate education about opioid use disorder (OUD) into their curriculum. The education standards must include topics like understanding opioids and opiates, recognizing opioid overdoses, using naloxone to reverse overdoses, and destigmatizing naloxone possession. It also highlights the state's medical amnesty laws for those who administer naloxone or call emergency services during an overdose. Schools such as districts, charter schools, and approved private institutions are required to incorporate this education into existing health curriculums.
- **Why it is important:** This bill equips students with critical knowledge about OUD, which is essential in addressing the ongoing opioid crisis. By teaching students how opioids affect the body, how to recognize overdoses, and how to use naloxone, it empowers them to respond effectively in emergencies. It also helps reduce stigma and ensures students are aware of medical amnesty protection when intervening in an overdose. Incorporating this education into school curricula prepares the next generation to make informed decisions, act in crisis situations, and contribute to the broader effort to combat opioid misuse and its consequences.

An Act to support college students in recovery

S.951 (Senator Rebecca Rausch) and H.1462 (Representative Joshua Tarsky)

- **What it does:** This bill mandates that public colleges and universities with student housing create recovery-focused housing programs for students recovering from SUD. These programs must offer services like trauma-informed counseling, mentoring, and peer support in an alcohol- and drug-free environment. Additionally, this bill requires that all students, faculty, and staff receive overdose training, and that naloxone be made available on campus for overdose treatment when necessary.
- **Why it is important:** This bill supports students in recovery by providing a safe, alcohol- and drug-free environment. The inclusion of trauma-informed counseling, mentoring, and peer support helps students maintain their recovery while navigating the challenges of college life. Additionally, mandatory overdose training for students, faculty, and staff and the availability of naloxone on campus ensures that the campus community is prepared to respond quickly and effectively in the

event of an overdose, fostering a safer campus environment.

An Act establishing a naloxone purchase trust fund

S.1551 (Senator John Keenan) and H.2535 (Representatives Greg Schwartz and Kate Donaghue)

- **What it does:** This bill establishes a Naloxone Purchase Trust Fund to support naloxone distribution in Massachusetts. The trust fund would support a universal system for purchasing and distributing naloxone. It would receive money from the Executive Office of Health and Human Services, voluntary contributions, and interest earnings. The fund would be used solely for distribution costs, with no more than 10% allocated for storage and distribution if not covered by federal funds. Any remaining balance will carry over to the next year and cannot revert to the General Fund.
- **Why it is important:** This bill establishes a dedicated funding source to ensure the widespread availability of opioid antagonists (like naloxone), which save lives by reversing opioid overdoses, in healthcare settings. By supporting a universal distribution system, it helps ensure that high-risk individuals, including those with SUD or a history of overdoses, have access to life-saving medication when needed.

An Act relative to the fair taxation of alcoholic beverages

S.2029 (Senator Jason Lewis)

- **What it does:** This bill adjusts the excise taxes on alcoholic beverages, which have not been increased since 1980, by an additional 10 cents per drink. It is expected to bring in nearly \$300 million in new revenues. These additional funds will be used for public health, wellness, and educational purposes (10% for alcohol and drug prevention, 10% for alcohol and drug treatment, 10% for mental health treatment and prevention, 10% for domestic violence prevention, 20% for community schools, and 17% for local public health departments).
- **Why it is important:** This bill updates alcohol taxes and directs revenue to public health programs, including drug prevention, mental health services, and domestic violence prevention. It also promotes fair industry practices by placing a higher tax specifically on unlicensed alcohol. Overall, this bill strengthens public health infrastructure and provides long-term funding for programs that improve community well-being.

An Act replacing archaic and stigmatizing language for substance use

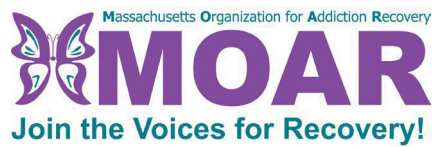
H.2227 (Representative Jim O'Day)

- **What it does:** This bill proposes amendments to various sections of the General Laws, primarily replacing the terminology related to alcohol and substance abuse with more modern, destigmatizing, and clinically accurate language. This bill seeks to standardize and update language used in health-related laws to reflect the current understanding of substance use disorders, moving away from outdated terms like "substance abuse."
- **Why it is important:** This bill modernizes the language used in state laws to reflect a more accurate and respectful understanding of substance use disorders. By replacing terms like "substance abuse" with "substance use disorder," the bill aligns with current medical and psychological standards, helping reduce stigma and promoting a more compassionate approach to treatment and recovery.

An Act to save lives by distributing naran to individuals at risk for an overdose

S.1709 (Senator John Keenan) and H.2606 (Representative Mindy Domb)

- **What it does:** This bill requires state or county correctional facilities to take specific actions when an individual is discharged. These actions are for individuals who: (1) have a history of using opioids, (2) have been diagnosed with OUD, or (3) have experienced an opioid-related overdose. Upon discharge, these facilities must: (1) educate the individual on how to use opioid antagonists (i.e., naloxone), (2) provide information on where they can access opioid antagonists in the community, and (3) dispense at least two doses of an opioid antagonist to the individual.



- **Why it is important:** Opioid overdoses are a major public health crisis, and correctional facilities often house individuals at high risk. Providing education on how to use opioid antagonists (like naloxone), where to access them in the community, and at least two doses of the medication upon discharge can reduce overdose deaths, especially during the vulnerable period after release. This support also reduces the risk of re-offending and re-incarceration. Ultimately, this bill not only helps individuals but also benefits the community by decreasing overdose incidents and easing the strain on emergency medical services.
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If you like any of the policy priorities above, you can email, call, or visit your elected state representative and/or senator and ask them to cosponsor the bill, which means adding their name as a supporter.

Who is your elected state representative and senator?

Go to: <https://malegislature.gov/Search/FindMyLegislator>

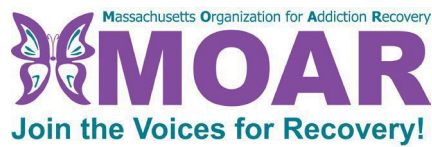
Put in your location and your legislators' contact information appears.

Your email to your legislator:

Dear [legislator's name],

My name is [your name], I live in [your town] in your district. Please know that I would appreciate you cosponsoring [insert bill number] because [your reason(s); feel free to use the ones above]. I look forward to hearing from you. Thank you for your consideration.

Thank you,
[your name]



What towns do the legislators above represent?

Sen. Julian Cyr: Barnstable, Brewster, Chatham, Dennis, Eastham, Harwich, Orleans, Provincetown, Truro, Wellfleet, Yarmouth, Dukes, Nantucket

Rep. Marjorie Decker: Harvard-area of Cambridge

Rep. John Lawn: Newton, Waltham, Watertown

Sen. Cindy Friedman: Billerica, Burlington, Lexington, Woburn, Arlington

Rep. Tram Nguyen: Andover, Boxford, North Andover, Tewksbury

Rep. Mary Keefe: Worcester

Rep. Andres Vargas: Haverhill

Sen. Joan Lovely: Beverly, Danvers, Salem

Sen. John Keenan: Quincy, Holbrook, Abington, Rockland, Hanover

Rep. Margaret Scarsdale: Ashby, Townsend, Lunenburg, Pepperell, Groton, Dunstable

Sen. John Velis: Russell, Montgomery, Southampton, Easthampton, Holyoke, Westfield, West Springfield, Agawam

Sen. Rebecca Rausch: Milford, Bellingham, Franklin, Wrentham, Plainville, Norfolk, Millis, Medfield, Sherborn, Dover, Needham

Rep. Joshua Tarsky: Medfield, Dover, Needham

Rep. Greg Schwartz: South Newton & South Brookline

Rep. Kate Donoghue: Framingham, Northborough, Southborough, Westborough

Sen. Jason Lewis: Malden, Melrose, Reading, Stoneham, Wakefield, and parts of Winchester

Rep. Jim O'Day: W. Boylston and Worcester

Rep. Mindy Domb: Amherst and Granby