

Date of Hearing: April 19, 2023

ASSEMBLY COMMITTEE ON APPROPRIATIONS

Chris Holden, Chair

AB 1233 (Waldron) – As Amended March 23, 2023

Policy Committee: Health

Vote: 14 - 0

Urgency: No

State Mandated Local Program: No

Reimbursable: No

**SUMMARY:**

This bill requires the Department of Health Care Services (DHCS) to conduct an outreach program to each of the tribal governments in California for the purpose of advising them of the availability of naloxone hydrochloride or another opioid antagonist through DHCS' Naloxone Distribution Project (NDP), and to provide technical assistance if requested. This bill also requires DHCS to annually report specified data to the Legislature and repeals its provisions on March 31, 2027.

**FISCAL EFFECT:**

Costs to DHCS are unknown, but expected to be less than \$30,000 per year (General Fund and opioid settlement funds).

According to the California Tribal Court-State Court Forum, there are approximately 110 federally recognized tribes and 81 groups seeking federal recognition in California. Because NDP already reports program data on the California MAT [medication-assisted treatment] Expansion Project website, the requirement to annually report data to the Legislature is not expected to add significant cost.

**COMMENTS:**

1) **Purpose.** According to the author:

The fentanyl epidemic that is sweeping our beautiful state is unfortunately no stranger to tribal lands. We have seen a push for opioid antigens in schools, libraries, and other public places, but sadly, Native American reservations have been left out. It is important we ensure that communities struggling with drug misuse are able to properly apply for and obtain medical supplies while also recognizing the importance of letting individual tribal governments do what is best for their tribes.

2) **California Tribal Communities.** There are approximately 110 federally recognized American Indian/Alaska Native (AI/AN) tribes in California and 81 non-federally recognized tribes petitioning for federal recognition through the Bureau of Indian Affairs. Tribes in California currently have nearly 100 separate reservations or Rancherias.

- 3) **Opioid Overdoses/Overdose Deaths among AI/AN.** AI/AN are more likely to die from an overdose of opioids, including prescription painkillers and heroin, than are members of other groups in the US. In 2022, the Journal of the American Medical Association reported that drug overdose mortality had increased from 2018 through the COVID-19 pandemic for almost all groups examined, with increases primarily attributed to fentanyl and fentanyl analogs, and methamphetamine. By March to August 2021, the highest drug overdose death rates were among AI/AN men age 15 to 34 years and Black and AI/AN men age 35 to 64 years. Abuse of opioid prescription pain relievers has widespread effects throughout AI/AN communities, including overdose, overdose death, opioid use disorder, and neonatal abstinence syndrome (a postnatal drug withdrawal syndrome that may result in lower weight and higher mortality rates, and require pharmacotherapy to mitigate withdrawal).
- 3) **NDP.** Established in October 2018, the NDP aims to reduce opioid overdose deaths through the provision of free naloxone in nasal spray and intramuscular formulations. The NDP is funded by state the General Fund, Opioid Settlement Funds, and federal grants and is administered by DHCS. Eligible entities, including law enforcement agencies, emergency medical services, schools and universities, county public health and behavioral health departments, tribal agencies, and community organizations, apply to DHCS to have naloxone shipped directly to their addresses.

As of April 5, 2023, the NDP had approved 7,532 applications, distributed more than 2.27 million naloxone kits, and reported more than 143,000 opioid overdose reversals. Of the 7,389 applications, 11% were from the “Other” category of organizations that would include tribal governments. Of the 96,588 naloxone kits distributed to “Other” organizations, 14% were distributed to tribal entities.

4) **Related Legislation.**

- a) AB 24 (Haney) requires a person or entity that owns, manages, or is responsible for a designated facility such as a bar, gas station, public library, residential hotel, in a county that is experiencing an opioid overdose crisis, to acquire and post an opioid antagonist kit. AB 24 is pending in this committee.
- b) AB 33 (Bains) establishes the Fentanyl Addiction and Overdose Prevention Task Force to collect and organize data on fentanyl abuse in California and evaluate approaches to increase public awareness. AB 33 is pending in Assembly Public Safety Committee.
- c) SB 10 (Cortese) requires local educational agencies and county offices of education to include strategies for the prevention and treatment of an opioid overdose in school safety plans, and requires the California Department of Education to develop training materials for school personnel, parents and guardians, and pupils. SB 10 is pending in Senate Health Committee.
- d) SB 641 (Roth) requires DHCS, as part of the NDP, to make all FDA-approved formulations and dosage strengths of naloxone that are indicated for the emergency treatment of opioid overdose available to NDP applicants. SB 641 is pending in Senate Health Committee.