SENATE THIRD READING SB 67 (Seyarto) As Amended September 7, 2023 2/3 vote

SUMMARY

Requires coroners and medical examiners to report actual or suspected overdoses to the Emergency Medical Services Agency (EMSA), which is then required to submit this data to the Overdose Detection Mapping Application Program (ODMAP).

Major Provisions

- Requires a coroner or medical examiner who evaluates an individual who, in their opinion, died as the result of an overdose as a contributing factor, to report the incident to the ODMAP managed by the Washington/Baltimore High Intensity Drug Trafficking Area program.
- 2) Requires the coroner or medical examiner to make the report as soon as possible, but not later than 120 hours after examining the individual who died as the result of an overdose.
- 3) Requires, if the cause of death is still preliminary and pending toxicology screens, the coroner or medical examiner to report the overdose as a preliminary report, and to update the report when the cause of death is confirmed.
- 4) Prohibits overdose information reported to ODMAP by a coroner or medical examiner, or shared with ODMAP by EMSA, from being used for a criminal investigation or prosecution.
- 5) Provides that a person who in good faith makes a report to ODMAP is immune from civil or criminal liability for making the report.
- 6) Defines "overdose" as "a condition, including extreme physical illness, decreased level of consciousness, respiratory depression, coma, or death, resulting from the consumption or use of any controlled dangerous substance that requires medical attention, assistance, or treatment, and clinical suspicion for drug overdose, including respiratory depression, unconsciousness, or altered mental state, without other conditions to explain the clinical condition."
- 7) State legislative intent that the overdose information gathered be used for the purpose of making decisions regarding the allocation of public health and educational resources to communities adversely impacted by the use of drugs that lead to overdoses.
- 8) Make technical, non-substantive changes.

COMMENTS

Background on ODMAP: In 1988, Congress created the High Intensity Drug Trafficking Areas (HIDTA) program to provide assistance to federal, state, local, and tribal law enforcement agencies operating in areas determined to be critical drug-trafficking regions of the United States. There are currently 33 HIDTAs, including four in California: Central Valley, Northern California, Los Angeles, and San Diego/Imperial Valley. In January of 2017, the

Washington/Baltimore HIDTA launched ODMAP as a response to the lack of a consistent methodology to track overdoses, which limited the ability to understand and mobilize against the crisis. According to the Washington/Baltimore HIDTA, ODMAP is an overdose mapping tool that allows first responders to log an overdose in real time into a centralized database in order to support public safety and public health efforts to mobilize an immediate response to a sudden increase, or spike, in overdose events. ODMAP is only available to government agencies serving the interest of public safety and health, and each agency wishing to use the system must sign a participation agreement designed to protect the data within the system. The system currently serves more than 3,700 agencies with more than 28,000 users in all 50 states, and has logged 850,000 overdose events. According to the Washington/Baltimore HIDTA, there are seventeen states with statewide implementation strategies, including several with legislation requiring reporting to ODMAP. (https://www.hidta.org/odmap/)

Reporting Drug Overdoses: According to ESMA, in July of 2022, the agency entered into a data sharing agreement with ODMAP, including developing an application programming interface to allow data sharing from the California Emergency Medical Services Information System (CEMSIS) reporting system. According to EMSA, the system allows near real-time data sharing: as soon as an EMS provider closes out a call and completes the electronic record, the data is submitted to CEMSIS and if the incident is coded as an overdose, that information is then shared with ODMAP (though without personally identifiable information such as name, exact birth date, and exact address). Generally speaking, the data sharing happens nearly instantaneously; however, there could be a delay of one to two days, depending on the region of California and internet connectivity. Once the Los Angeles County EMSA starts reporting via CEMSIS in July of this year, overdose data from all EMS providers will be shared with ODMAP if the incident record is correctly coded as an overdose or suspected overdose. According to EMSA, because the agreement with ODMAP is less than a year old, they are still working out some kinks. For instance, if an EMS provider does not enter the keywords associated with an overdose correctly, the application programming interface may not trigger the system to share the overdose information with ODMAP. EMSA states they are continuing to work with local EMSAs to improve the accuracy of the data shared with ODMAP to ensure the overdose reporting is as complete as possible.

To ensure accurate overdose reporting, this bill would require coroners and medical examiners to report actual or suspected overdoses to the EMSA, which is then required to submit this data to ODMAP.

According to the Author

"Californians are falling victim to drug dealers who prey on the potency and availability of illicit drugs and opioids, like fentanyl. While each state, local, and federal departments [sic] uses its own program to track and report overdose incidents, currently, there is no uniform sharing of overdoses that include emergency medical services agencies, coroners, and fire departments. Limited to only authorized personnel and eliminating all personal identifiable information, ODMAP provides an essential tool for first responders on the frontlines of the opioid epidemic to effectively track and address live patterns of overdoses."

Arguments in Support

According to the *Fresno County Board of Supervisors*, "Currently, there is a web of methods to report overdose incidents that has led to a lack of cohesion in information sharing; as each

department and agency, whether state, local, or federal uses their own program to track and report incidents of overdose.

"In 2017, the Federal Government created an application called ODMAP to tie together reporting into one cohesive system. In order to facilitate the cohesion and not add additional work on first-responders, ODMAP draws upon existing systems to auto-populate information in their reports. ODMAP also has the added feature of being limited to only authorized personnel and scrubbing all personal identifiable information, removing privacy concerns.

"SB 67 will enroll all of California's emergency departments and agencies who are on the frontlines of the opioid epidemic into this free universal information sharing program, ODMAP, in order to effectively track and address live patterns of overdoses."

Arguments in Opposition

Not applicable.

FISCAL COMMENTS

According to the Senate Appropriations Committee, costs (local costs, General Fund) of an unknown but potentially significant amount to counties to make the required reports, potentially exceeding \$150,000 annually statewide. General Fund costs will depend on whether the duties imposed by this bill constitute a reimbursable state mandate, as determined by the Commission on State Mandates.

VOTES

SENATE FLOOR: 40-0-0

YES: Allen, Alvarado-Gil, Archuleta, Ashby, Atkins, Becker, Blakespear, Bradford, Caballero, Cortese, Dahle, Dodd, Durazo, Eggman, Glazer, Gonzalez, Grove, Hurtado, Jones, Laird, Limón, McGuire, Menjivar, Min, Newman, Nguyen, Niello, Ochoa Bogh, Padilla, Portantino, Roth, Rubio, Seyarto, Skinner, Smallwood-Cuevas, Stern, Umberg, Wahab, Wiener, Wilk

ASM PUBLIC SAFETY: 8-0-0

YES: Jones-Sawyer, Alanis, Bonta, Bryan, Lackey, Ortega, Santiago, Jackson

ASM HEALTH: 15-0-0

YES: Wood, Waldron, Aguiar-Curry, Arambula, Boerner, Wendy Carrillo, Flora, Vince Fong, Maienschein, McCarty, Joe Patterson, Rodriguez, Santiago, Villapudua, Weber

ASM APPROPRIATIONS: 16-0-0

YES: Holden, Megan Dahle, Bryan, Calderon, Wendy Carrillo, Dixon, Mike Fong, Hart, Lowenthal, Mathis, Papan, Pellerin, Sanchez, Soria, Weber, Wilson

UPDATED

VERSION: September 7, 2023

CONSULTANT: Andrew Ironside / PUB. S. / (916) 319-3744