

[Second Reprint]

**ASSEMBLY, No. 798**

**STATE OF NEW JERSEY**  
**219th LEGISLATURE**

PRE-FILED FOR INTRODUCTION IN THE 2020 SESSION

**Sponsored by:**

**Assemblyman ANTHONY S. VERRELLI**

**District 15 (Hunterdon and Mercer)**

**Assemblywoman VALERIE VAINIERI HUTTLE**

**District 37 (Bergen)**

**Assemblyman JOHN ARMATO**

**District 2 (Atlantic)**

**Senator ROBERT W. SINGER**

**District 30 (Monmouth and Ocean)**

**Senator LINDA R. GREENSTEIN**

**District 14 (Mercer and Middlesex)**

**Co-Sponsored by:**

**Assemblyman Mazzeo, Assemblywoman Murphy, Assemblyman Benson, Assemblywoman Lopez, Assemblymen Space, Wirths, Assemblywoman McKnight, Assemblymen Johnson, Houghtaling, Assemblywomen Downey, Timberlake, Assemblyman McKeon, Senators Corrado and Gopal**

**SYNOPSIS**

Establishes local drug overdose fatality review teams.

**CURRENT VERSION OF TEXT**

As amended by the Senate on December 2, 2021.



(Sponsorship Updated As Of: 1/10/2022)

1 AN ACT regarding drug overdoses and supplementing Title 26 of  
2 the Revised Statutes.

3

4 **BE IT ENACTED** by the Senate and General Assembly of the State  
5 of New Jersey:

6

7 <sup>1</sup>[1. a. The Local Advisory Committee on Alcohol Use  
8 Disorder and Substance Use Disorder in each county may establish  
9 a local drug overdose fatality review team for that county. A local  
10 drug overdose fatality review team may serve one or more counties  
11 where practicable. Each local drug overdose fatality review team  
12 shall elect a chair.

13 b. Local drug overdose fatality review teams shall consist of  
14 individuals with experience and knowledge regarding health, social  
15 services, law enforcement, education, emergency medicine, mental  
16 health, juvenile delinquency, and drug and alcohol abuse.

17 c. The Commissioner of Health shall develop a mandatory drug  
18 overdose death reporting process, pursuant to which health care  
19 practitioners, medical examiners, hospitals, emergency medical  
20 services providers, local health departments, law enforcement  
21 agencies, substance use disorder treatment programs, and relevant  
22 social services agencies will be required to confidentially report  
23 cases of drug overdose death to the Department of Health in a  
24 standardized, uniform format.

25 d. The department shall transmit to the appropriate local drug  
26 overdose fatality review team such information as the department  
27 has available concerning any drug overdose that occurs within the  
28 county served by the local drug overdose fatality review team,  
29 including, but not limited to: the individual's age, race, gender,  
30 county of residence, and county of death; and the date, manner,  
31 cause, and specific circumstances of the overdose death, as recorded  
32 on the individual's completed death certificate. In addition, the  
33 team may be provided access to the following records related to the  
34 individual:

35 (1) any relevant information and records maintained by a health  
36 care provider related to the individual's physical health, mental  
37 health, and substance use disorder treatment; and

38 (2) any relevant information and records maintained by a State  
39 or local government agency, including criminal history records and  
40 records of probation and parole if the transmission of such records  
41 does not imperil ongoing investigations, medical examiner records,  
42 social service records, and school records and educational histories.

43 e. Upon receipt of a report of drug overdose death that has  
44 been forwarded to a local drug overdose death fatality review team  
45 pursuant to subsection d. of this section, the team shall review the

**EXPLANATION** – Matter enclosed in bold-faced brackets **[thus]** in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

<sup>1</sup>Senate floor amendments adopted June 21, 2021.

<sup>2</sup>Senate floor amendments adopted December 2, 2021.

1 reported case in accordance with the provisions of subsection f. of  
2 this section.

3 f. Each local drug overdose fatality review team shall:

4 (1) develop methods to help prevent drug overdoses;

5 (2) explore methods to promote cooperation among multi-  
6 disciplinary agencies in providing services to individuals with  
7 substance use disorders;

8 (3) develop an understanding of the causes of drug overdoses;

9 (4) recommend possible changes to law and policy to prevent  
10 drug overdoses; and

11 (5) meet at least quarterly to review drug overdose death cases  
12 transmitted to the team pursuant to this section, as well as available  
13 criminal, educational, substance abuse, and mental health records of  
14 the deceased individuals. Local drug overdose fatality review team  
15 meetings shall be closed to the public, and information discussed at  
16 the meetings shall be deemed confidential.

17 g. As used in this section:

18 "Drug overdose" means an acute condition including, but not  
19 limited to, extreme physical illness, coma, decreased level of  
20 consciousness, respiratory depression, or death resulting from the  
21 consumption or use of a controlled dangerous substance or another  
22 substance with which a controlled dangerous substance was  
23 combined and that a layperson would reasonably believe to require  
24 medical assistance.】<sup>1</sup>

25

26 <sup>1</sup>【2. Names and individual identification data collected pursuant  
27 to the provisions of this act shall not be disclosed by the  
28 Department of Health or a local drug overdose fatality review team  
29 member unless required by law, and nothing in this act shall be  
30 construed to require disclosure of any private or confidential health  
31 information in violation of State or federal privacy laws.  
32 Notwithstanding the foregoing, State and local government agencies  
33 are directed to share, upon request by the Department of Law and  
34 Public Safety for integration into its integrated drug awareness  
35 dashboard, or by a local drug overdose fatality review team, such  
36 information or records as may be necessary and appropriate for the  
37 local drug overdose fatality review team to conduct a review of  
38 reported drug overdose deaths pursuant to section 1 of this act or for  
39 the Department of Law and Public Safety to integrate into its  
40 integrated drug awareness dashboard in order to protect the public  
41 health, safety, and welfare.】<sup>1</sup>

42

43 <sup>1</sup>【3. The Department of Health, in collaboration with each local  
44 drug overdose fatality review team, shall report any findings made  
45 pursuant to this act to the Governor and, pursuant to section 2 of  
46 P.L.1991, c.164 (C.52:14-19.1), to the Legislature.】<sup>1</sup>

1       <sup>1</sup>[1. a. The Local Advisory Committee on Alcohol Use  
2 Disorder and Substance Use Disorder in each county may establish  
3 a local drug overdose fatality review team for that county. A local  
4 drug overdose fatality review team may serve one or more counties  
5 where practicable. Each local drug overdose fatality review team  
6 shall elect a chair.

7       b. Local drug overdose fatality review teams shall consist of  
8 individuals with experience and knowledge regarding health, social  
9 services, law enforcement, education, emergency medicine, mental  
10 health, juvenile delinquency, and drug and alcohol abuse.

11       c. The Commissioner of Health shall develop a mandatory drug  
12 overdose death reporting process, pursuant to which health care  
13 practitioners, medical examiners, hospitals, emergency medical  
14 services providers, local health departments, law enforcement  
15 agencies, substance use disorder treatment programs, and relevant  
16 social services agencies will be required to confidentially report  
17 cases of drug overdose death to the Department of Health in a  
18 standardized, uniform format.

19       d. The department shall transmit to the appropriate local drug  
20 overdose fatality review team such information as the department  
21 has available concerning any drug overdose that occurs within the  
22 county served by the local drug overdose fatality review team,  
23 including, but not limited to: the individual's age, race, gender,  
24 county of residence, and county of death; and the date, manner,  
25 cause, and specific circumstances of the overdose death, as recorded  
26 on the individual's completed death certificate. In addition, the  
27 team may be provided access to the following records related to the  
28 individual:

29       (1) any relevant information and records maintained by a health  
30 care provider related to the individual's physical health, mental  
31 health, and substance use disorder treatment; and

32       (2) any relevant information and records maintained by a State  
33 or local government agency, including criminal history records and  
34 records of probation and parole if the transmission of such records  
35 does not imperil ongoing investigations, medical examiner records,  
36 social service records, and school records and educational histories.

37       e. Upon receipt of a report of drug overdose death that has  
38 been forwarded to a local drug overdose death fatality review team  
39 pursuant to subsection d. of this section, the team shall review the  
40 reported case in accordance with the provisions of subsection f. of  
41 this section.

42       f. Each local drug overdose fatality review team shall:

43       (1) develop methods to help prevent drug overdoses;

44       (2) explore methods to promote cooperation among multi-  
45 disciplinary agencies in providing services to individuals with  
46 substance use disorders;

47       (3) develop an understanding of the causes of drug overdoses;

1 (4) recommend possible changes to law and policy to prevent  
2 drug overdoses; and

3 (5) meet at least quarterly to review drug overdose death cases  
4 transmitted to the team pursuant to this section, as well as available  
5 criminal, educational, substance abuse, and mental health records of  
6 the deceased individuals. Local drug overdose fatality review team  
7 meetings shall be closed to the public, and information discussed at  
8 the meetings shall be deemed confidential.

9 g. As used in this section:

10 "Drug overdose" means an acute condition including, but not  
11 limited to, extreme physical illness, coma, decreased level of  
12 consciousness, respiratory depression, or death resulting from the  
13 consumption or use of a controlled dangerous substance or another  
14 substance with which a controlled dangerous substance was  
15 combined and that a layperson would reasonably believe to require  
16 medical assistance.】<sup>1</sup>

17

18 <sup>1</sup>1. As used in this act:

19 "Confidential case report" means a report created by a local  
20 overdose fatality review team summarizing the data collected and  
21 analyzed regarding a confirmed fatal drug overdose.

22 "De-identifiable data" means data or information not containing  
23 personally identifiable information.

24 <sup>2</sup>2["Drug" means a substance which produces a physiological  
25 effect when ingested or otherwise introduced into the body.】<sup>2</sup>

26 "Health care provider" means a physician, advanced practice  
27 nurse, or physician assistant acting within the scope of a valid  
28 license or certification issued pursuant to Title 45 of the Revised  
29 Statutes.

30 "Local team" means a local overdose fatality review team.

31 "Mental health provider" means a psychiatrist, a psychologist, an  
32 advanced practice nurse practitioner with a specialty in psychiatric  
33 mental health, a clinical social worker, a professional counselor, or  
34 a marriage and family therapist who is licensed to provide mental  
35 health services pursuant to Title 45 of the Revised Statutes.

36 "Overdose" means "drug overdose" as that term is defined in  
37 section 3 of P.L.2013, c.46 (C.24:6J-3).

38 "Personally identifiable information" means any information  
39 about an individual that can be used to distinguish or trace an  
40 individual's identity, including, but not limited to, an individual's  
41 name, address, social security number, date and place of birth,  
42 mother's maiden name, biometric records, and medical,  
43 educational, financial, and employment information.

44 "Public health purpose" means a purpose of protecting and  
45 improving the health of people and their communities. "Public  
46 health purpose" includes, but is not limited to, implementing  
47 educational programs, recommending policies, administering

1 services, conducting research, and promoting healthcare equity, in  
2 an effort to protect the health of entire populations.

3 “Substance use disorder” shall have the same meaning prescribed  
4 by the American Psychiatric Association in the Diagnostic and  
5 Statistical Manual of Mental Disorders, Fifth Edition, and any  
6 subsequent editions, and shall include the symptoms of withdrawal  
7 from a substance use disorder.

8 “Substance use disorder treatment provider” means any  
9 individual or entity licensed, registered, or certified pursuant to the  
10 laws of this State to treat substance use disorders or who holds a  
11 current and valid waiver under the federal Drug Addiction  
12 Treatment Act of 2000 (Pub. L. 106-310) from the federal  
13 Substance Abuse and Mental Health Services Administration to  
14 treat individuals with substance use disorder using medications  
15 approved for that indication by the United States Food and Drug  
16 Administration.<sup>1</sup>

17  
18 <sup>1</sup>2. Names and individual identification data collected pursuant  
19 to the provisions of this act shall not be disclosed by the  
20 Department of Health or a local drug overdose fatality review team  
21 member unless required by law, and nothing in this act shall be  
22 construed to require disclosure of any private or confidential health  
23 information in violation of State or federal privacy laws.  
24 Notwithstanding the foregoing, State and local government agencies  
25 are directed to share, upon request by the Department of Law and  
26 Public Safety for integration into its integrated drug awareness  
27 dashboard, or by a local drug overdose fatality review team, such  
28 information or records as may be necessary and appropriate for the  
29 local drug overdose fatality review team to conduct a review of  
30 reported drug overdose deaths pursuant to section 1 of this act or for  
31 the Department of Law and Public Safety to integrate into its  
32 integrated drug awareness dashboard in order to protect the public  
33 health, safety, and welfare.<sup>1</sup>

34  
35 <sup>1</sup>2. a. (1) A county health department <sup>2</sup>or a local board of  
36 health<sup>2</sup> may establish a local overdose fatality review team to  
37 conduct a comprehensive review of confirmed overdose fatalities <sup>2</sup>,  
38 or a sample thereof using an approach authorized by the Department  
39 of Health in consultation with the Office of the Chief State Medical  
40 Examiner,<sup>2</sup> in order to better understand the individual and  
41 population circumstances and the resources and characteristics of  
42 potential overdose victims for the purposes of preventing future  
43 overdose deaths and related harms in a locality.

44 (2) A local drug overdose fatality review team may be  
45 established to serve <sup>2</sup>:

46 (a)<sup>2</sup> one or more counties <sup>2</sup>;

1       **(b)]** . The Office of the Chief State Medical Examiner may  
2 direct a local overdose fatality review team to establish a municipal  
3 subcommittee to focus on<sup>2</sup> a municipality with a population of  
4 100,000 persons or more; or

5       <sup>2</sup>**[(c)]<sup>2</sup>** a municipality with a high overdose rate as determined  
6 on annual basis by the Department of Health and the Office of the  
7 Chief State Medical Examiner.

8       (3) A local overdose fatality review team shall be under the  
9 direction of the county health department <sup>2</sup>**[or the local board of**  
10 health, as appropriate.]<sup>2</sup> and shall be subject to the regulation of the  
11 Department of Health. A local team shall work cooperatively with  
12 the Local Advisory Committee on Alcohol Use Disorder and  
13 Substance Use Disorder, established pursuant to section 4 of  
14 P.L.1983, c.531 (C.26:2B-33), if one exists within the local team's  
15 jurisdiction. A local team shall cooperate with and provide any  
16 information as may be requested by the Office of the Chief State  
17 Medical Examiner or the Department of Health <sup>2</sup>**[through the**  
18 Deputy Commissioner for Public Health Services]<sup>2</sup> for public  
19 health purposes.

20       b. A local overdose fatality review team shall consist of  
21 individuals with experience and knowledge regarding health, social  
22 services, law enforcement, education, emergency medicine, mental  
23 health, juvenile delinquency, and substance use disorders.

24       (1) At a minimum, each local overdose fatality review team  
25 shall include:

26       (a) the <sup>2</sup>**[municipal or]<sup>2</sup> county health officer, or a designee;**

27       (b) the regional or county medical examiner, or a designee;

28       (c) a member of the Local Advisory Committee on Alcohol Use  
29 Disorder and Substance Use Disorder, established pursuant to  
30 section 4 of P.L.1983, c.531 (C.26:2B-33), if one exists within the  
31 local team's jurisdiction;

32       (d) a State, county, or municipal law enforcement officer or  
33 county prosecutor;

34       (e) a substance use disorder health care professional; and

35       (f) the county or municipal director of behavioral health  
36 services, or a designee.

37       (2) A local overdose fatality review team may also include any  
38 of the following:

39       (a) the superintendent of schools, or a designee;

40       (b) an emergency medical services provider;

41       (c) a representative of a health care facility, including a hospital,  
42 health system, or federally qualified health center;

43       (d) a representative of a county jail, detention center, or  
44 corrections department;

45       (e) a representative of a county social services agency;

1       (f) <sup>2</sup>[a pharmacy permit holder or another] <sup>2</sup>an individual with  
2       access to the Prescription Monitoring Program established pursuant  
3       to section 25 of P.L.2007, c.244 (C.45:1-45);

4       (g) a representative of the local office of the Division of Child  
5       Protection and Permanency in the Department of Children and  
6       Families;

7       (h) a representative of a county healthcare facility;

8       (i) a representative of a harm reduction center, if one is located  
9       in a municipality or county over which the local team exercises  
10       jurisdiction; <sup>2</sup>[and]<sup>2</sup>

11       (j) any individual deemed necessary for the work of the local  
12       team, as recommended by the chair and approved by a majority vote  
13       of the team members and by the Department of Health <sup>2</sup>; and

14       (k) a representative of the office of county probation and parole  
15       services <sup>2</sup>.<sup>1</sup>

16  
17       <sup>1</sup>[3. The Department of Health, in collaboration with each local  
18       drug overdose fatality review team, shall report any findings made  
19       pursuant to this act to the Governor and, pursuant to section 2 of  
20       P.L.1991, c.164 (C.52:14-19.1), to the Legislature.]<sup>1</sup>

21  
22       <sup>1</sup>3. a. A local overdose fatality review team established  
23       pursuant to section 2 of this act shall:

24       (1) establish and implement appropriate protocols and  
25       procedures that allow the local teams to operate in accordance with  
26       applicable State and federal laws;

27       (2) elect, in accordance with the procedures established pursuant  
28       to paragraph (1) of this subsection and on an annual basis, a chair,  
29       who shall be a member of the local team;

30       (3) collect, analyze, interpret, and maintain local data on  
31       overdose deaths, which information shall be maintained by the local  
32       team in accordance with all appropriate and industry-standard  
33       technical, administrative, and physical controls necessary to protect  
34       the privacy and security of the information;

35       (4) conduct, in accordance with Department of Health  
36       regulations and guidance, a multidisciplinary review of the  
37       information collected pursuant to this section regarding a decedent  
38       of a confirmed fatal drug overdose, as selected by the office of the  
39       county medical examiner in the county in which the <sup>2</sup>[decedent was  
40       pronounced dead] <sup>2</sup>overdose fatality was primarily investigated <sup>2</sup> and  
41       at the direction of the Office of Chief State Medical Examiner,  
42       which review shall include, but need not be limited to:

43       (a) consideration of the decedent's points of contact with health  
44       care systems, social services, educational institutions, child and  
45       family services, the criminal justice system, including law  
46       enforcement, and any other systems with which the decedent had  
47       contact prior to death; and



1 (b) identification of the specific factors and social determinants  
2 of health that put the decedent at risk for an overdose;

3 (5) recommend prevention and intervention strategies to  
4 improve the coordination of services and investigations among  
5 member agencies in an effort to reduce overdose deaths;

6 (6) produce confidential case reports based on information  
7 received, which shall be transmitted to the Department of Health in  
8 a form and manner prescribed by the department. The reports and  
9 the data used therefor shall only be accessed by the department for  
10 public health purposes, in a form and format that is secured to  
11 prevent disclosure of personally identifiable information,  
12 <sup>2</sup>[determined by the department and]<sup>2</sup> in accordance with  
13 applicable State and federal laws; and

14 (7) submit to the Department of Health an annual report <sup>2</sup>, in a  
15 manner prescribed the department,<sup>2</sup> containing only de-identified  
16 data associated with the jurisdiction served by the local team, which  
17 reports may be made available to the public pursuant to P.L.1963,  
18 c.73 (C.47:1A-1 et seq.) and shall include, but need not be limited  
19 to:

20 (a) the total number of fatal overdoses that occurred within the  
21 jurisdiction of the local team;

22 (b) the number of fatal overdose cases investigated by the local  
23 overdose fatality team;

24 (c) any recommendations for action by State agencies, local  
25 agencies, or the Legislature for preventing fatal overdoses in this  
26 State; and

27 (d) any assessable results of any recommendations made by the  
28 local team, including, but not limited to, changes in local, county,  
29 or State law, policy, or funding made as a result of the local team's  
30 recommendations.

31 b. A local overdose fatality review team shall establish policies  
32 and procedures to ensure that all records <sup>2</sup>in their possession<sup>2</sup>  
33 containing personally identifiable information are <sup>2</sup>properly handled  
34 and retained and are securely and permanently<sup>2</sup> destroyed within  
35 one year <sup>2</sup>of,<sup>2</sup> or within a reasonable period of time <sup>2</sup>, as determined  
36 by the Department of Health,<sup>2</sup> after <sup>2</sup>,<sup>2</sup> the conclusion of a local  
37 team's review of a decedent's case. The annual report and other  
38 public records shall be destroyed in accordance to the requirements  
39 of P.L.1953, c.410 (C.47:3-15 et seq.).

40 c. A local team may only request, collect, analyze, and share  
41 information for public health purposes directly related to the review  
42 of confirmed fatal drug overdoses and, except as otherwise provided  
43 in this act, in compliance with all applicable State and federal laws  
44 or regulations.<sup>1</sup>

45  
46 <sup>1</sup>4. a. To the extent not otherwise inconsistent with State and  
47 federal laws and only upon written request of the chair of a local

1 overdose fatality review team and as necessary to carry out the  
2 official functions of the local team and the provisions of this act, the  
3 entities listed in subsection b. of this section may provide a local  
4 team with the following information:

5 (1) any relevant information and records maintained by a health  
6 care provider related to an individual's physical health, mental  
7 health, and substance use disorder treatment; and

8 (2) any relevant information and records maintained by a State  
9 or local government agency, including criminal history records and  
10 records of probation and parole if the transmission of such records  
11 does not imperil ongoing investigations, medical examiner records,  
12 social service records, and school records and educational histories.

13 b. The following individuals and <sup>2</sup>entities<sup>2</sup> may disclose, within a  
14 reasonable period of time following a request, medical records and  
15 information requested pursuant to subsection a. of this section:

16 (1) county medical examiners;

17 (2) paid fire departments or volunteer fire companies;

18 (3) hospitals and health systems;

19 (4) law enforcement agencies;

20 (5) State and local government agencies;

21 (6) mental health providers;

22 (7) health care practitioners;

23 (8) substance use disorder treatment programs and providers;

24 (9) public and private schools and institutions of higher  
25 education;

26 (10) emergency medical services providers;

27 (11) social services agencies and providers; and

28 (12) the Prescription Monitoring Program.

29 c. An individual or entity subject to a request for information or  
30 records by a local overdose fatality review team pursuant to this  
31 section may charge the local team a reasonable fee for the service of  
32 duplicating any records.

33 d. <sup>2</sup>(1)<sup>2</sup> The chair of a local overdose fatality review team, or the  
34 chair's designee, may request individuals authorized under 42  
35 C.F.R. Part 2 to provide consent for the release of confidential  
36 information protected pursuant to 42 U.S.C. s.290dd-2 and 42  
37 C.F.R. Part 2.

38 <sup>2</sup>(2) To the extent not otherwise inconsistent with State and  
39 federal laws, and as necessary to carry out the official functions of  
40 the local team and the provisions of this act, other individuals and  
41 entities identified by a local overdose fatality review team as having  
42 relevant data for a confidential case report may also provide a local  
43 team with relevant information in their possession that may contain  
44 personally identifiable information.<sup>2</sup>

45 e. A local overdose fatality review team shall develop a  
46 confidentiality <sup>2</sup>policy and<sup>2</sup> form establishing: the requirements for  
47 maintaining the confidentiality of any information disclosed during

1 a meeting, during review, or at any other time; the responsibilities  
2 concerning those requirements; and any penalties associated with  
3 failure to maintain such confidentiality. Such requirements shall be  
4 in accordance with all applicable State and federal laws and any  
5 best practices identified by the Department of Health. An  
6 individual shall review the confidentiality <sup>2</sup>policy and<sup>2</sup> form,  
7 purpose, and goals of the local team prior to participating in any  
8 review. All necessary and reasonable measures shall be taken to  
9 prevent the disclosure of a decedent's name or initials at any team  
10 meeting.

11 f. Information received pursuant to this act may be shared with  
12 local team members at a meeting of the local team, provided that  
13 each individual present, including staff, has signed and abides by  
14 the provisions of the confidentiality <sup>2</sup>policy and<sup>2</sup> form developed  
15 pursuant to subsection e. of this section. Such information may be  
16 shared with any non-member attendees who meet the criteria of  
17 subsection b. of section 2 of this act and whose attendance is  
18 approved in accordance with this act, provided that such attendees  
19 also sign and abide by the provisions of the confidentiality <sup>2</sup>policy  
20 and<sup>2</sup> form.

21 g. (1) Meetings of a local team during which confidential  
22 information is discussed shall be closed to the public, except that,  
23 upon a majority vote of the local team members present, a local  
24 team may request and permit an individual who has information  
25 relevant to the exercise of the team's duties to attend a team  
26 meeting, regardless of whether the individual meets the criteria set  
27 forth in subsection b. of section 2 of this act or is a permanent  
28 member of the local team. Notice concerning the individual's  
29 attendance shall be provided to members of the local team not later  
30 than 10 days prior to the meeting at which the individual will be  
31 present.

32 (2) A representative from the Department of Health, as  
33 designated by the Deputy Commissioner for Public Health Services,  
34 and a representative from the Office of the Chief State Medical  
35 Examiner may attend any meeting of a local overdose fatality  
36 review team. Notice concerning a representative's attendance shall  
37 be provided to members of the local team not later than 10 days  
38 prior to the meeting at which the representative will be present.

39 h. Meetings of a local overdose fatality review team shall be  
40 exempt from the "Senator Byron M. Baer Open Public Meetings  
41 Act," P.L.1975, c.231 (C.10:4-6 et seq.).

42 i. A member of the local overdose fatality review team may  
43 contact, interview, or obtain information by request from a family  
44 member or friend of an individual whose death is being reviewed by  
45 the local team.

46 j. To the extent not otherwise inconsistent with State and federal  
47 laws, an entity that provides, in good faith, information or records  
48 to a local overdose fatality review team shall not be subject to civil

1 or criminal liability or any professional disciplinary action as a  
2 result of providing the information or records.<sup>1</sup>

3  
4 <sup>1</sup>5. a. Information and records acquired by a local overdose  
5 fatality review team, except for information contained within the  
6 annual report submitted pursuant to paragraph (7) of subsection a.  
7 of section 3 of this act, shall be confidential and shall not be subject  
8 to subpoena, discovery, or introduction into evidence in a civil or  
9 criminal proceeding or disciplinary or other administrative action.  
10 Information and records that are otherwise available from other  
11 sources shall not be immune from subpoena, discovery, or  
12 introduction into evidence through those sources solely due to the  
13 presentation or review of the information or record to or by a local  
14 team.

15 b. Information and records created by a local overdose fatality  
16 review team shall be considered confidential and shall not be  
17 disclosed to the public or considered a government record pursuant  
18 to P.L.1963, c.73 (C.47:1A-1 et seq.).

19 c. Substance use disorder treatment records requested by or  
20 provided to a local overdose fatality review team shall be subject to  
21 any additional limitations on the redisclosure of a medical record  
22 developed in connection with the provision of substance use  
23 disorder treatment services under State or federal law, including,  
24 but not limited to, 42 U.S.C. s.290dd-2 and 42 C.F.R. Part 2.

25 d. Local overdose fatality review team members, and any  
26 individual who presents or provides information to a local team,  
27 may not be questioned in any civil or criminal proceeding or  
28 disciplinary action regarding the information presented or provided,  
29 except in an action contesting the validity of the disclosure itself.  
30 This subsection shall not prevent an individual from testifying  
31 regarding information obtained independently of the local team,  
32 public information, or publicly available information.

33 e. The county health department <sup>2</sup>[or local board of health, as  
34 appropriate,]<sup>2</sup> shall ensure the privacy, confidentiality, and security  
35 of the information provided to a local overdose fatality review team  
36 shall be maintained as required by State and federal laws and any  
37 local ordinances.

38 f. An individual damaged by the negligent or knowing and  
39 willful disclosure of confidential information by a local team or its  
40 members may bring an action for damages, costs, and attorney fees  
41 consistent with State law. Additionally, the Department of Health  
42 may establish penalties for the negligent or knowing and willful  
43 disclosure of confidential information by a local team or its  
44 members.

45 g. Nothing in this act shall be construed to require the disclosure  
46 of any private or confidential health information in violation of  
47 State or federal privacy laws.<sup>1</sup>

1 <sup>1</sup>6. a. The Department of Health, the Office of the Chief State  
2 Medical Examiner, <sup>2</sup>applicable county and local health  
3 departments, <sup>2</sup> applicable county medical examiner offices, and local  
4 overdose fatality review teams may pursue all sources of federal  
5 funding, matching funds, and foundation funding available to  
6 implement the provisions of this act.

7 b. The Department of Health, the Office of the Chief State  
8 Medical Examiner, county medical examiner offices, and local  
9 overdose fatality review teams may accept such gifts, grants, and  
10 endowments, from public or private sources, as may be made, in  
11 trust or otherwise, or any income derived according to the terms of  
12 a gift, grant, or endowment, to implement the provisions of this  
13 act.<sup>1</sup>

14  
15 <sup>1</sup>7. a. The Department of Health shall analyze and compile  
16 reports from each local overdose fatality review team and submit  
17 one Statewide annual overdose fatality report containing  
18 information from each local team. The report shall be submitted to  
19 the Governor and, pursuant to section 2 of P.L.1991, c.164  
20 (C.52:14-19.1), to the Legislature. The report shall be considered a  
21 government record pursuant to P.L.1963, c.73 (C.47:1A-1 et seq.).  
22 Each publication of the Statewide annual report shall be in a format  
23 that does not identify any individual or decedent and does not  
24 contain personally <sup>2</sup>identifiable or personal<sup>2</sup> identifying information.

25 b. The Office of the Chief State Medical Examiner may direct  
26 all local teams to assist with the coordination of all the relevant  
27 information necessary to review a specific decedent case.

28 c. The Department of Health may share data containing de-  
29 identified data at any time. The department may only share data  
30 containing personally identifiable information if the data is being  
31 shared for public health purposes, the sharing of the data is  
32 permitted by this act and other applicable laws, and the data is in a  
33 form and format that is secured to prevent the disclosure of  
34 personally identifiable information. Any publication made  
35 available to the public shall be in a format that does not identify any  
36 individual or decedent and does not contain personally identifiable  
37 information.<sup>1</sup>

38  
39 <sup>1</sup>8. Any local overdose fatality review team in existence on the  
40 date of enactment of this act shall conform to the requirements of,  
41 and operate in accordance with, the <sup>2</sup>【requirements】 provisions<sup>2</sup> of  
42 this act no later than 90 days after the date of enactment of this act.<sup>1</sup>

43  
44 <sup>1</sup>【4.】 <sup>1</sup>9.<sup>1</sup> The Department of Health <sup>1</sup>【shall】 may<sup>1</sup> adopt <sup>1</sup>any<sup>1</sup>  
45 rules and regulations <sup>1</sup>necessary to effectuate the provisions of this  
46 act<sup>1</sup>, <sup>1</sup>which rules and regulations shall be effective immediately  
47 upon filing with the Office of Administrative Law for a period not

1 to exceed six months and which may thereafter be adopted<sup>1</sup>  
2 pursuant to the "Administrative Procedure Act," P.L.1968, c.410  
3 (C.52:14B-1 et seq.) <sup>1</sup>**[**, to implement the provisions of this act **]**<sup>1</sup> .  
4  
5 <sup>1</sup>**[5.]** 10.<sup>1</sup> This act shall take effect <sup>1</sup>**[180]** 90<sup>1</sup> days after the  
6 date of enactment.