

**ASSEMBLY, No. 652**

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**STATE OF NEW JERSEY**

**220th LEGISLATURE**

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PRE-FILED FOR INTRODUCTION IN THE 2022 SESSION

**Sponsored by:**

**Assemblyman ANTHONY S. VERRELLI**  
**District 15 (Hunterdon and Mercer)**

**Co-Sponsored by:**

**Assemblywoman Murphy, Assemblyman Benson, Assemblywoman Lopez,**  
**Assemblymen Space, Wirths, Assemblywomen McKnight, Timberlake and**  
**Assemblyman McKeon**

**SYNOPSIS**

Establishes local drug overdose fatality review teams.

**CURRENT VERSION OF TEXT**

Introduced Pending Technical Review by Legislative Counsel.



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

3

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

6

7       1. As used in this act:

8       “Confidential case report” means a report created by a local  
9       overdose fatality review team summarizing the data collected and  
10      analyzed regarding a confirmed fatal drug overdose.

11      “De-identifiable data” means data or information not containing  
12      personally identifiable information.

13      “Health care provider” means a physician, advanced practice  
14      nurse, or physician assistant acting within the scope of a valid license  
15      or certification issued pursuant to Title 45 of the Revised Statutes.

16      “Local team” means a local overdose fatality review team.

17      “Mental health provider” means a psychiatrist, a psychologist, an  
18      advanced practice nurse practitioner with a specialty in psychiatric  
19      mental health, a clinical social worker, a professional counselor, or a  
20      marriage and family therapist who is licensed to provide mental  
21      health services pursuant to Title 45 of the Revised Statutes.

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

24      “Personally identifiable information” means any information  
25      about an individual that can be used to distinguish or trace an  
26      individual’s identity, including, but not limited to, an individual’s  
27      name, address, social security number, date and place of birth,  
28      mother’s maiden name, biometric records, and medical, educational,  
29      financial, and employment information.

30      “Public health purpose” means a purpose of protecting and  
31      improving the health of people and their communities. “Public health  
32      purpose” includes, but is not limited to, implementing educational  
33      programs, recommending policies, administering services,  
34      conducting research, and promoting healthcare equity, in an effort to  
35      protect the health of entire populations.

36      “Substance use disorder” shall have the same meaning prescribed  
37      by the American Psychiatric Association in the Diagnostic and  
38      Statistical Manual of Mental Disorders, Fifth Edition, and any  
39      subsequent editions, and shall include the symptoms of withdrawal  
40      from a substance use disorder.

41      “Substance use disorder treatment provider” means any individual  
42      or entity licensed, registered, or certified pursuant to the laws of this  
43      State to treat substance use disorders or who holds a current and valid  
44      waiver under the federal Drug Addiction Treatment Act of 2000  
45      (Pub. L. 106-310) from the federal Substance Abuse and Mental  
46      Health Services Administration to treat individuals with substance  
47      use disorder using medications approved for that indication by the  
48      United States Food and Drug Administration.

1       2. a. (1) A county health department may establish a local  
2 overdose fatality review team to conduct a comprehensive review of  
3 confirmed overdose fatalities, or a sample thereof using an approach  
4 authorized by the Department of Health in consultation with the  
5 Office of the Chief State Medical Examiner, in order to better  
6 understand the individual and population circumstances and the  
7 resources and characteristics of potential overdose victims for the  
8 purposes of preventing future overdose deaths and related harms in a  
9 locality.

10       (2) A local drug overdose fatality review team may be established  
11 to serve one or more counties. The Office of the Chief State Medical  
12 Examiner may direct a local overdose fatality review team to  
13 establish a municipal subcommittee to focus on a municipality with  
14 a population of 100,000 persons or more; or a municipality with a  
15 high overdose rate as determined on annual basis by the Department  
16 of Health and the Office of the Chief State Medical Examiner.

17       (3) A local overdose fatality review team shall be under the  
18 direction of the county health department and shall be subject to the  
19 regulation of the Department of Health. A local team shall work  
20 cooperatively with the Local Advisory Committee on Alcohol Use  
21 Disorder and Substance Use Disorder, established pursuant to section  
22 4 of P.L.1983, c.531 (C.26:2B-33), if one exists within the local  
23 team's jurisdiction. A local team shall cooperate with and provide  
24 any information as may be requested by the Office of the Chief State  
25 Medical Examiner or the Department of Health for public health  
26 purposes.

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

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

33       (a) the county health officer, or a designee;

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

35       (c) a member of the Local Advisory Committee on Alcohol Use  
36 Disorder and Substance Use Disorder, established pursuant to section  
37 4 of P.L.1983, c.531 (C.26:2B-33), if one exists within the local  
38 team's jurisdiction;

39       (d) a State, county, or municipal law enforcement officer or  
40 county prosecutor;

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

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

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

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

47       (b) an emergency medical services provider;

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

3 (d) a representative of a county jail, detention center, or  
4 corrections department;

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

6 (f) an individual with access to the Prescription Monitoring  
7 Program established pursuant to section 25 of P.L.2007, c.244  
8 (C.45:1-45);

9 (g) a representative of the local office of the Division of Child  
10 Protection and Permanency in the Department of Children and  
11 Families;

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

13 (i) a representative of a harm reduction center, if one is located  
14 in a municipality or county over which the local team exercises  
15 jurisdiction;

16 (j) any individual deemed necessary for the work of the local  
17 team, as recommended by the chair and approved by a majority vote  
18 of the team members and by the Department of Health; and

19 (k) a representative of the office of county probation and parole  
20 services.

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

24 (1) establish and implement appropriate protocols and procedures  
25 that allow the local teams to operate in accordance with applicable  
26 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 overdose  
31 deaths, which information shall be maintained by the local team in  
32 accordance with all appropriate and industry-standard technical,  
33 administrative, and physical controls necessary to protect the privacy  
34 and security of the information;

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

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

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

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

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

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

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

18 (b) the number of fatal overdose cases investigated by the local  
19 overdose fatality team;

20 (c) any recommendations for action by State agencies, local  
21 agencies, or the Legislature for preventing fatal overdoses in this  
22 State; and

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

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

36 c. A local team may only request, collect, analyze, and share  
37 information for public health purposes directly related to the review  
38 of confirmed fatal drug overdoses and, except as otherwise provided  
39 in this act, in compliance with all applicable State and federal laws  
40 or regulations.

41  
42 4. a. To the extent not otherwise inconsistent with State and  
43 federal laws and only upon written request of the chair of a local  
44 overdose fatality review team and as necessary to carry out the  
45 official functions of the local team and the provisions of this act, the  
46 entities listed in subsection b. of this section may provide a local team  
47 with the following information:

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

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

9 b. The following individuals and entities may disclose, within a  
10 reasonable period of time following a request, medical records and  
11 information requested pursuant to subsection a. of this section:

- 12 (1) county medical examiners;  
13 (2) paid fire departments or volunteer fire companies;  
14 (3) hospitals and health systems;  
15 (4) law enforcement agencies;  
16 (5) State and local government agencies;  
17 (6) mental health providers;  
18 (7) health care practitioners;  
19 (8) substance use disorder treatment programs and providers;  
20 (9) public and private schools and institutions of higher  
21 education;  
22 (10) emergency medical services providers;  
23 (11) social services agencies and providers; and  
24 (12) the Prescription Monitoring Program.

25 c. An individual or entity subject to a request for information or  
26 records by a local overdose fatality review team pursuant to this  
27 section may charge the local team a reasonable fee for the service of  
28 duplicating any records.

29 d. (1) The chair of a local overdose fatality review team, or the  
30 chair's designee, may request individuals authorized under 42 C.F.R.  
31 Part 2 to provide consent for the release of confidential information  
32 protected pursuant to 42 U.S.C. s.290dd-2 and 42 C.F.R. Part 2.

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

40 e. A local overdose fatality review team shall develop a  
41 confidentiality policy and form establishing: the requirements for  
42 maintaining the confidentiality of any information disclosed during a  
43 meeting, during review, or at any other time; the responsibilities  
44 concerning those requirements; and any penalties associated with  
45 failure to maintain such confidentiality. Such requirements shall be  
46 in accordance with all applicable State and federal laws and any best  
47 practices identified by the Department of Health. An individual shall  
48 review the confidentiality policy and form, purpose, and goals of the



1 local team prior to participating in any review. All necessary and  
2 reasonable measures shall be taken to prevent the disclosure of a  
3 decedent's name or initials at any team meeting.

4 f. Information received pursuant to this act may be shared with  
5 local team members at a meeting of the local team, provided that each  
6 individual present, including staff, has signed and abides by the  
7 provisions of the confidentiality policy and form developed pursuant  
8 to subsection e. of this section. Such information may be shared with  
9 any non-member attendees who meet the criteria of subsection b. of  
10 section 2 of this act and whose attendance is approved in accordance  
11 with this act, provided that such attendees also sign and abide by the  
12 provisions of the confidentiality policy and form.

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

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

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

33 i. A member of the local overdose fatality review team may  
34 contact, interview, or obtain information by request from a family  
35 member or friend of an individual whose death is being reviewed by  
36 the local team.

37 j. To the extent not otherwise inconsistent with State and federal  
38 laws, an entity that provides, in good faith, information or records to  
39 a local overdose fatality review team shall not be subject to civil or  
40 criminal liability or any professional disciplinary action as a result of  
41 providing the information or records.

42  
43 5. a. Information and records acquired by a local overdose  
44 fatality review team, except for information contained within the  
45 annual report submitted pursuant to paragraph (7) of subsection a. of  
46 section 3 of this act, shall be confidential and shall not be subject to  
47 subpoena, discovery, or introduction into evidence in a civil or  
48 criminal proceeding or disciplinary or other administrative action.

1 Information and records that are otherwise available from other  
2 sources shall not be immune from subpoena, discovery, or  
3 introduction into evidence through those sources solely due to the  
4 presentation or review of the information or record to or by a local  
5 team.

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

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

16 d. Local overdose fatality review team members, and any  
17 individual who presents or provides information to a local team, may  
18 not be questioned in any civil or criminal proceeding or disciplinary  
19 action regarding the information presented or provided, except in an  
20 action contesting the validity of the disclosure itself. This subsection  
21 shall not prevent an individual from testifying regarding information  
22 obtained independently of the local team, public information, or  
23 publicly available information.

24 e. The county health department shall ensure the privacy,  
25 confidentiality, and security of the information provided to a local  
26 overdose fatality review team shall be maintained as required by  
27 State and federal laws and any local ordinances.

28 f. An individual damaged by the negligent or knowing and willful  
29 disclosure of confidential information by a local team or its members  
30 may bring an action for damages, costs, and attorney fees consistent  
31 with State law. Additionally, the Department of Health may establish  
32 penalties for the negligent or knowing and willful disclosure of  
33 confidential information by a local team or its members.

34 g. Nothing in this act shall be construed to require the disclosure  
35 of any private or confidential health information in violation of State  
36 or federal privacy laws.

37

38 6. a. The Department of Health, the Office of the Chief State  
39 Medical Examiner, applicable county and local health departments,  
40 applicable county medical examiner offices, and local overdose  
41 fatality review teams may pursue all sources of federal funding,  
42 matching funds, and foundation funding available to implement the  
43 provisions of this act.

44 b. The Department of Health, the Office of the Chief State  
45 Medical Examiner, county medical examiner offices, and local  
46 overdose fatality review teams may accept such gifts, grants, and  
47 endowments, from public or private sources, as may be made, in trust



1 or otherwise, or any income derived according to the terms of a gift,  
2 grant, or endowment, to implement the provisions of this act.

3  
4 7. a. The Department of Health shall analyze and compile  
5 reports from each local overdose fatality review team and submit one  
6 Statewide annual overdose fatality report containing information  
7 from each local team. The report shall be submitted to the Governor  
8 and, pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1), to the  
9 Legislature. The report shall be considered a government record  
10 pursuant to P.L.1963, c.73 (C.47:1A-1 et seq.). Each publication of  
11 the Statewide annual report shall be in a format that does not identify  
12 any individual or decedent and does not contain personally  
13 identifiable or personal identifying information.

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

17 c. The Department of Health may share data containing de-  
18 identified data at any time. The department may only share data  
19 containing personally identifiable information if the data is being  
20 shared for public health purposes, the sharing of the data is permitted  
21 by this act and other applicable laws, and the data is in a form and  
22 format that is secured to prevent the disclosure of personally  
23 identifiable information. Any publication made available to the  
24 public shall be in a format that does not identify any individual or  
25 decedent and does not contain personally identifiable information.

26  
27 8. Any local overdose fatality review team in existence on the  
28 date of enactment of this act shall conform to the requirements of,  
29 and operate in accordance with, the provisions of this act no later than  
30 90 days after the date of enactment of this act.

31  
32 9. The Department of Health may adopt any rules and regulations  
33 necessary to effectuate the provisions of this act, which rules and  
34 regulations shall be effective immediately upon filing with the Office  
35 of Administrative Law for a period not to exceed six months and  
36 which may thereafter be adopted pursuant to the "Administrative  
37 Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.).

38  
39 10. This act shall take effect 90 days after the date of enactment.  
40  
41

#### 42 STATEMENT

43  
44 This bill provides that a county health department may establish a  
45 local overdose fatality review team to conduct a comprehensive review  
46 of confirmed overdose fatalities, or a sample thereof using an approach  
47 authorized by the Department of Health in consultation with the Office  
48 of the Chief State Medical Examiner, in order to better understand the

1 individual and population circumstances, and the resources and  
2 characteristics, of potential overdose victims for the purposes of  
3 preventing future overdose deaths and related harms in a locality.

4 A local drug overdose fatality review team may be established to  
5 serve one or more counties. The Office of the Chief State Medical  
6 Examiner may direct a local overdose fatality review team to  
7 establish a municipal subcommittee to focus on a municipality with a  
8 population of 100,000 persons or more; or a municipality with a high  
9 overdose rate, as determined on an annual basis by the Department of  
10 Health and the Office of the Chief State Medical Examiner.

11 The bill requires that a local overdose fatality review team is to be  
12 under the direction of the county health department and subject to the  
13 regulation of the Department of Health. A local team is required to:  
14 work cooperatively with the Local Advisory Committee on Alcohol Use  
15 Disorder and Substance Use Disorder, if one exists within the local  
16 team's jurisdiction; and provide any information as may be requested  
17 by the Office of the Chief State Medical Examiner or the Department of  
18 Health for public health purposes.

19 Under the bill, a local overdose fatality review team is to consist of  
20 individuals with experience and knowledge regarding health, social  
21 services, law enforcement, education, emergency medicine, mental  
22 health, juvenile delinquency, and substance use disorders. At a  
23 minimum, each local overdose fatality review team is to include: the  
24 county health officer, or a designee; the regional or county medical  
25 examiner, or a designee; a member of the Local Advisory Committee  
26 on Alcohol Use Disorder and Substance Use Disorder, if one exists  
27 within the local team's jurisdiction; a State, county, or municipal law  
28 enforcement officer or county prosecutor; a substance use disorder  
29 health care professional; and the county or municipal director of  
30 behavioral health services, or a designee.

31 A local overdose fatality review team established under the bill is  
32 required to: 1) establish and implement appropriate protocols and  
33 procedures that allow the local teams to operate in accordance with  
34 applicable State and federal laws; 2) elect, in accordance with the  
35 procedures established under the bill and on an annual basis, a chair,  
36 who is required be a member of the local team; 3) collect, analyze,  
37 interpret, and maintain local data on overdose deaths; 4) conduct, in  
38 accordance with Department of Health regulations and guidance, a  
39 multidisciplinary review of the information collected pursuant to the bill  
40 regarding a decedent of a confirmed fatal drug overdose, as selected by  
41 the office of the county medical examiner in the county in which the  
42 overdose fatality was primarily investigated and at the direction of the  
43 Office of Chief State Medical Examiner; 5) recommend prevention and  
44 intervention strategies to improve the coordination of services and  
45 investigations among member agencies in an effort to reduce overdose  
46 deaths; 6) produce confidential case reports based on information  
47 received, which are to be transmitted to the Department of Health for  
48 public health purposes; and 7) submit to the Department of Health an

1 annual report, in a manner prescribed by the department, containing  
2 only de-identified data associated with the jurisdiction served by the  
3 local team, which reports may be made available to the public.

4 A local overdose fatality review team is to establish policies and  
5 procedures to ensure that all records in their possession containing  
6 personally identifiable information are properly handled and retained  
7 and are securely and permanently destroyed within one year of, or within  
8 a reasonable period of time after, as determined by the Department of  
9 Health, the conclusion of a local team's review of a decedent's case.  
10 The annual report and other public records are to be destroyed in  
11 accordance to the requirements of P.L.1953, c.410 (C.47:3-15 et seq.).

12 To the extent not otherwise inconsistent with State and federal laws  
13 and only upon written request of the chair and as necessary to carry out  
14 the official functions of the local team and the provisions of the bill,  
15 certain entities, as enumerated in the bill or otherwise identified by a  
16 local overdose fatality team in compliance with State and federal law,  
17 may provide a local team with the following information:

18 1) any relevant information and records maintained by a health care  
19 provider related to an individual's physical health, mental health, and  
20 substance use disorder treatment; and

21 2) any relevant information and records maintained by a State or  
22 local government agency, including criminal history records and  
23 records of probation and parole if the transmission of such records does  
24 not imperil ongoing investigations, medical examiner records, social  
25 service records, and school records and educational histories.

26 An individual or entity subject to a request for information or  
27 records by a local overdose fatality review team may charge the local  
28 team a reasonable fee for the service of duplicating any records.

29 The chair of a local overdose fatality review team, or the chair's  
30 designee, may request individuals authorized under 42 C.F.R. Part 2 to  
31 provide consent for the release of confidential information protected  
32 pursuant to 42 U.S.C. s.290dd-2 and 42 C.F.R. Part 2.

33 A local overdose fatality review team is required to develop a  
34 confidentiality policy and form establishing: the requirements for  
35 maintaining the confidentiality of any information disclosed during a  
36 meeting, during review, or at any other time; the responsibilities  
37 concerning those requirements; and any penalties associated with failure  
38 to maintain such confidentiality. Information received pursuant to  
39 the bill may be shared with local team members at a meeting of the local  
40 team, provided that each individual present, including staff, has signed  
41 and abides by the provisions of the confidentiality policy and form.  
42 Such information may be shared with any non-member attendees who  
43 meet the criteria of subsection b. of section 2 of the bill and whose  
44 attendance is approved in accordance with the bill, provided that such  
45 attendees also sign and abide by the provisions of the confidentiality  
46 policy and form.

47 Meetings of a local team during which confidential information is  
48 discussed are required to be closed to the public, except that, upon a

1 majority vote of the local team members present, a local team may  
2 request and permit an individual who has information relevant to the  
3 exercise of the team's duties to attend a team meeting, regardless of  
4 whether the individual meets the criteria set forth in subsection b. of  
5 section 2 of the bill or is a permanent member of the local team.

6 A representative from the Department of Health, as designated by  
7 the Deputy Commissioner for Public Health Services, and a  
8 representative from the Office of the Chief State Medical Examiner may  
9 attend any meeting of a local overdose fatality review team.

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

13 A member of the local overdose fatality review team may contact,  
14 interview, or obtain information by request from a family member or  
15 friend of an individual whose death is being reviewed by the local team.

16 To the extent not otherwise inconsistent with State and federal laws,  
17 an entity that provides, in good faith, information or records to a local  
18 overdose fatality review team is not to be subject to civil or criminal  
19 liability or any professional disciplinary action as a result of providing  
20 the information or records.

21 Information and records acquired by a local overdose fatality review  
22 team, except for information contained within the annual report  
23 submitted pursuant to this bill, are to be confidential and not be subject  
24 to subpoena, discovery, or introduction into evidence in a civil or  
25 criminal proceeding or disciplinary or other administrative action.  
26 Information and records that are otherwise available from other sources  
27 are not to be immune from subpoena, discovery, or introduction into  
28 evidence through those sources solely due to the presentation or review  
29 of the information or record to or by a local team.

30 Substance use disorder treatment records requested by or provided  
31 to a local overdose fatality review team are to be subject to any  
32 additional limitations on the redisclosure of a medical record developed  
33 in connection with the provision of substance use disorder treatment  
34 services under State or federal law, including, but not limited to, 42  
35 U.S.C. s.290dd-2 and 42 C.F.R. Part 2.

36 Local overdose fatality review team members, and any individual  
37 who presents or provides information to a local team, may not be  
38 questioned in any civil or criminal proceeding or disciplinary action  
39 regarding the information presented or provided, except in an action  
40 contesting the validity of the disclosure itself. This provision does not  
41 prevent an individual from testifying regarding information obtained  
42 independently of the local team, public information, or publicly  
43 available information.

44 The county health department is to ensure the privacy,  
45 confidentiality, and security of the information provided to a local  
46 overdose fatality review team is maintained as required by State and  
47 federal laws and any local ordinances.

1       An individual damaged by the negligent or knowing and willful  
2 disclosure of confidential information by a local team or its members  
3 may bring an action for damages, costs, and attorney fees consistent  
4 with State law. Additionally, the Department of Health may establish  
5 penalties for the negligent or knowing and willful disclosure of  
6 confidential information by a local team or its members.

7       Nothing in this bill is to be construed to require the disclosure of any  
8 private or confidential health information in violation of State or federal  
9 privacy laws.

10       The Department of Health, the Office of the Chief State Medical  
11 Examiner, applicable county and local health departments, applicable  
12 county medical examiner offices, and local overdose fatality review  
13 teams may pursue all sources of federal funding, matching funds, and  
14 foundation funding available to implement the provisions of the bill.  
15 Furthermore, the Department of Health, the Office of the Chief State  
16 Medical Examiner, county medical examiner offices, and local overdose  
17 fatality review teams may accept such gifts, grants, and endowments,  
18 from public or private sources to implement the provisions of the bill.

19       The Department of Health is required to analyze and compile reports  
20 from each local overdose fatality review team and submit one Statewide  
21 annual overdose fatality report containing information from each local  
22 team. The report is to be submitted to the Governor and to the  
23 Legislature, and is considered a government record pursuant to  
24 P.L.1963, c.73 (C.47:1A-1 et seq.). Each publication of the Statewide  
25 annual report is required to be in a format that does not identify any  
26 individual or decedent and does not contain personally identifiable or  
27 personal identifying information.

28       The Office of the Chief State Medical Examiner may direct all local  
29 teams to assist with the coordination of all the relevant information  
30 necessary to review a specific decedent case.

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

40       Any local overdose fatality review team in existence on the date of  
41 enactment of this bill is required to conform to the requirements of, and  
42 operate in accordance with, the provisions of this bill no later than 90  
43 days after the date of enactment.