

1 SENATE MEMORIAL 105

2 **54TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2019**

3 INTRODUCED BY

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10 A MEMORIAL

11 REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A THREE BRANCH  
12 TASK FORCE AND REPORT RECOMMENDATIONS FOR IMPLEMENTING  
13 LEGISLATION TO ALLOW FOR THE ADMINISTRATION OF FACILITIES WHERE  
14 CERTAIN PATIENTS WITH OPIOID DEPENDENCE WHO DO NOT RESPOND TO  
15 ORAL TREATMENT MAY RECEIVE MEDICALLY PRESCRIBED INJECTABLE  
16 OPIOID AGONIST TREATMENT.

17  
18 WHEREAS, according to the department of health, in 2017  
19 New Mexico had the seventeenth-highest drug overdose death rate  
20 in the nation; and

21 WHEREAS, heroin and prescription opioids such as  
22 methadone, oxycodone and morphine caused ninety-seven percent  
23 of the unintentional overdose deaths between November 2017 and  
24 December 2018; and

25 WHEREAS, between 2013 and 2017, opioid-overdose-related

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1 emergency department visits increased by fifty-one percent in  
2 New Mexico; and

3 WHEREAS, in Rio Arriba county alone, opioid-overdose-  
4 related emergency department visits accounted for more than one  
5 hundred fifty-five visits per one hundred thousand people  
6 between 2013 and 2017; and

7 WHEREAS, despite some recent gains, the most vulnerable  
8 New Mexicans continue to suffer the effects of the opioid  
9 crisis, which are far-reaching, placing enormous burdens on  
10 individuals, their children and their families, as well as  
11 health care providers, social services agencies, state and  
12 local governments and law enforcement agencies; and

13 WHEREAS, House Memorial 56, passed during the second  
14 session of the fifty-third legislature, charged the legislative  
15 health and human services committee with the task of hearing  
16 testimony regarding injectable opioid agonist treatment; and

17 WHEREAS, on November 8, 2018, the legislative health and  
18 human services committee heard testimony from Dr. Martin T.  
19 Schechter, the founding director of the school of population  
20 and public health in the faculty of medicine at the university  
21 of British Columbia and chief scientific officer of the Michael  
22 Smith foundation for health research; and

23 WHEREAS, Dr. Schechter testified to the success of  
24 injection-assisted opioid agonist treatment programs such as  
25 the study to assess longer-term opioid medication effectiveness

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1 and the North American opiate medication initiative,  
2 particularly for chronic injection opioid users who have not  
3 benefited from available therapies; and

4 WHEREAS, Dr. Schechter emphasized the importance of  
5 attracting those users into treatment; and

6 WHEREAS, injectable opioid agonist treatment can be  
7 administered safely under the supervision of a medical  
8 professional, as demonstrated in a presentation by Dr. Scott  
9 MacDonald, lead physician of Providence crosstown clinic,  
10 during the 2017 opioid use disorder in primary care conference;  
11 and

12 WHEREAS, Dr. MacDonald showed that after eighty-eight  
13 thousand four hundred fifty-one injections, there were only  
14 fourteen opioid overdoses that required naloxone and eleven  
15 seizures, all of which were successfully treated on site  
16 without hospitalization; and

17 WHEREAS, the data show that dosages administered to  
18 patients stay well under maximum dangerous levels and do not  
19 continually rise over time, but instead plateau and even fall;  
20 and

21 WHEREAS, the costs of an injectable opioid agonist  
22 treatment program are minimal when compared to savings to the  
23 public related to medical costs, decreased crime and decreased  
24 pressure on law enforcement; and

25 WHEREAS, a successful injectable opioid agonist treatment

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1 program may include diacetylmorphine, which is a Schedule I  
2 opioid, or hydromorphone, which is a Schedule II opioid; and

3 WHEREAS, a state-supervised network of facilities where  
4 patients could receive injectable opioid agonist treatments  
5 would require significant cooperation between the legislative  
6 and executive branches of the state government and coordination  
7 with federal regulatory bodies, such as the national institute  
8 on drug abuse and the drug enforcement administration; and

9 WHEREAS, such a network of injectable opioid treatment  
10 facilities may require enactment and amendment of safe harbor  
11 provisions and carveouts from state criminal law and civil and  
12 professional liability statutes to minimize risk and  
13 incentivize professionals to administer to and care for  
14 patients; and

15 WHEREAS, rules for the approval and operation of such  
16 facilities may include minimum standards of safety, licensing  
17 requirements, funding, coordination among various public  
18 agencies and community service providers;

19 NOW, THEREFORE, BE IT RESOLVED BY THE SENATE OF THE STATE  
20 OF NEW MEXICO that the department of health be requested to  
21 convene an injectable opioid treatment task force consisting of  
22 members from all three branches of state government,  
23 representatives of federal governmental stakeholders and  
24 community service providers that work with substance-using  
25 populations to create a demonstration project to explore the

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1 feasibility of implementing and maintaining a state-supervised  
2 network of facilities where certain patients who do not respond  
3 to current oral opioid agonist options may receive injection  
4 opioid agonist treatments; and

5 BE IT FURTHER RESOLVED that the injectable opioid  
6 treatment task force be composed of the following members, at a  
7 minimum, or the designees of those members:

8 A. a representative of the behavioral health  
9 services division of the human services department, appointed  
10 by the secretary of human services;

11 B. the attorney general;

12 C. the chief public defender;

13 D. a representative of the New Mexico supreme  
14 court;

15 E. the director of the administrative office of the  
16 courts;

17 F. the secretary of human services;

18 G. the secretary of health;

19 H. the secretary of corrections;

20 I. the secretary of public safety;

21 J. the secretary of Indian affairs;

22 K. the director of the risk management division of  
23 the general services department;

24 L. the executive director of the New Mexico  
25 sentencing commission;

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1 M. the chair of the prosecutors section of the  
2 state bar of New Mexico;

3 N. the executive director of the New Mexico  
4 criminal defense lawyers association;

5 O. the executive director of the drug policy  
6 alliance;

7 P. the executive director of the amity foundation  
8 almas de amistad;

9 Q. the executive director of the life link;

10 R. the executive director of the New Mexico medical  
11 society; and

12 S. the executive director of the New Mexico nurses  
13 association; and

14 BE IT FURTHER RESOLVED that the injectable opioid  
15 treatment task force seek the input of nationwide experts and  
16 state, county and municipal stakeholders; and

17 BE IT FURTHER RESOLVED that by November 1, 2019, the  
18 injectable opioid treatment task force present a report of its  
19 findings and recommendations to the legislative health and  
20 human services committee, the legislative finance committee and  
21 the appropriate interim committee that studies issues  
22 pertaining to courts, corrections and justice; and

23 BE IT FURTHER RESOLVED that copies of this memorial be  
24 transmitted to the secretary of health, the secretary of human  
25 services, the secretary of corrections, the secretary of

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1 general services, the secretary of public safety, the secretary  
2 of Indian affairs, the attorney general, the administrative  
3 office of the courts, the executive director of the New Mexico  
4 sentencing commission, the chair of the prosecutors section of  
5 the state bar of New Mexico, the chief public defender, the  
6 executive director of the New Mexico criminal defense lawyers  
7 association, the executive director of the drug policy  
8 alliance, the executive director of the amity foundation almas  
9 de amistad, the executive director of the life link, the  
10 executive director of the New Mexico medical society and the  
11 executive director of the New Mexico nurses association.

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