26:2K-71 LEGISLATIVE HISTORY CHECKLIST

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LAWS OF: 2021 CHAPTER: 153 NJSA: 26:2K-71 (Permits certain paramedics to administer buprenorphine.) **BILL NO:** S3803 (Substituted for A5495 (1R)) **SPONSOR(S)** Vitale, Joseph F. and others DATE INTRODUCED: 5/20/2021 **COMMITTEE: ASSEMBLY:** Health, Human Services & Senior Citizens SENATE: AMENDED DURING PASSAGE: Yes DATE OF PASSAGE: ASSEMBLY: 6/21/2021 SENATE: 6/21/2021 DATE OF APPROVAL: 7/2/2021 FOLLOWING ARE ATTACHED IF AVAILABLE: FINAL TEXT OF BILL (First Reprint enacted) Yes S3803 **INTRODUCED BILL (INCLUDES SPONSOR'S STATEMENT):** Yes **COMMITTEE STATEMENT:** ASSEMBLY: No SENATE: Yes (Audio archived recordings of the committee meetings, corresponding to the date of the committee statement, may possibly be found at www.njleg.state.nj.us) FLOOR AMENDMENT STATEMENT: No **LEGISLATIVE FISCAL ESTIMATE:** No A5495 (1R) INTRODUCED BILL (INCLUDES SPONSOR'S STATEMENT): Yes **COMMITTEE STATEMENT: ASSEMBLY:** Yes SENATE: No (Audio archived recordings of the committee meetings, corresponding to the date of the committee statement, may possibly be found at www.njleg.state.nj.us) FLOOR AMENDMENT STATEMENT: Nο **LEGISLATIVE FISCAL ESTIMATE:** No **VETO MESSAGE:** No

Yes

GOVERNOR'S PRESS RELEASE ON SIGNING:

FOLLOWING WERE PRINTED:

To check for circulating copies, contact New Jersey State Government Publications at the State Library (609) 278-2640 ext.103 or mailto:refdesk@njstatelib.org

REPORTS: No

HEARINGS: No

NEWSPAPER ARTICLES: Yes

Serrano, Ken. "MURPHY SIGNS BILLS TAKING AIM AT OPIOIDS - THEY TARGET EPIDEMIC AS OVERDOSE DEATHSINCREASE." Record, The (Hackensack, NJ), July 3, 2021: A3.

Livio, Susan K. and Brent Johnson. "Murphy signs bills to fight opioid addiction More than3,000 people in the state died last year from suspected drug overdoses.." Times, The (Trenton, NJ), July 4, 2021: 007.

RH/CL

P.L. 2021, CHAPTER 153, approved July 2, 2021 Senate, No. 3803 (First Reprint)

1 AN ACT concerning mobile intensive care paramedics and 2 buprenorphine and supplementing Title 26 of the Revised 3 Statutes.

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

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1. a. As used in this section:

"Mobile intensive care paramedic" and "mobile intensive care unit" shall have the same meaning as provided in section 1 of P.L.1984, c.146 (C.26:2K-7).

"Opioid antidote" shall have the same meaning as provided in section 1 of P.L.2017, c.116 (C.26:2K-66).

- b. Subject to the requirements of federal law, a mobile intensive care paramedic in this State who has responded to an emergency as a member of a dispatched mobile intensive care unit may administer buprenorphine ¹, under the medical direction of a licensed, supervising physician, ¹ to an individual ¹ [if a member of the mobile intensive care unit administered an opioid antidote to that individual ¹ following the emergency administration of an opioid antidote to that individual ¹ provided that the mobile intensive care paramedic administering the buprenorphine:
- (1) is providing emergency medical services through a program that is registered with the United States Attorney General pursuant to subsection (j) of 21 U.S.C. s.823;
- (2) administers the buprenorphine consistent with all applicable requirements of federal law; and
- (3) has completed supervised comprehensive training and competency assessments within a mobile intensive care unit regarding which specific medical conditions necessitate the administration of buprenorphine, buprenorphine dosage requirements, and required medical documentation following the administration of buprenorphine.

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2. The Commissioner of Health may adopt rules and regulations, in accordance with the "Administrative Procedure Act,"

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 <u>thus</u> is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

Senate SHH committee amendments adopted June 10, 2021.

S3803 [1R]

1	P.L.1968, c.410 (C.52:14B-1 et seq.), as are necessary to effectuate								
2	the provisions of this act.								
3									
4	3. This act shall take effect immediately.								
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9	Permits certain paramedics to administer buprenorphine.								

CHAPTER 153

AN ACT concerning mobile intensive care paramedics and buprenorphine and supplementing Title 26 of the Revised Statutes.

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

C.26:2K-71 Definitions relative to mobile intensive care paramedics.

1. a. As used in this section:

"Mobile intensive care paramedic" and "mobile intensive care unit" shall have the same meaning as provided in section 1 of P.L.1984, c.146 (C.26:2K-7).

"Opioid antidote" shall have the same meaning as provided in section 1 of P.L.2017, c.116 (C.26:2K-66).

- b. Subject to the requirements of federal law, a mobile intensive care paramedic in this State who has responded to an emergency as a member of a dispatched mobile intensive care unit may administer buprenorphine, under the medical direction of a licensed, supervising physician, to an individual following the emergency administration of an opioid antidote to that individual provided that the mobile intensive care paramedic administering the buprenorphine:
- (1) is providing emergency medical services through a program that is registered with the United States Attorney General pursuant to subsection (j) of 21 U.S.C. s.823;
- (2) administers the buprenorphine consistent with all applicable requirements of federal law; and
- (3) has completed supervised comprehensive training and competency assessments within a mobile intensive care unit regarding which specific medical conditions necessitate the administration of buprenorphine, buprenorphine dosage requirements, and required medical documentation following the administration of buprenorphine.
- 2. The Commissioner of Health may adopt rules and regulations, in accordance with the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), as are necessary to effectuate the provisions of this act.
 - 3. This act shall take effect immediately.

Approved July 2, 2021.

SENATE, No. 3803

STATE OF NEW JERSEY

219th LEGISLATURE

INTRODUCED MAY 20, 2021

Sponsored by:

Senator JOSEPH F. VITALE

District 19 (Middlesex)

Senator HOLLY T. SCHEPISI

District 39 (Bergen and Passaic)

SYNOPSIS

Permits certain paramedics to administer buprenorphine.

CURRENT VERSION OF TEXT

As introduced.



S3803 VITALE, SCHEPISI

1	AN ACT concerning	g mobile	intensive	care	para	amedi	cs and
2	buprenorphine and	d supplen	nenting Ti	itle 26	of	the	Revised
3	Statutes.						

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

1. a. As used in this section:

"Mobile intensive care paramedic" and "mobile intensive care unit" shall have the same meaning as provided in section 1 of P.L.1984, c.146 (C.26:2K-7).

"Opioid antidote" shall have the same meaning as provided in section 1 of P.L.2017, c.116 (C.26:2K-66).

- b. Subject to the requirements of federal law, a mobile intensive care paramedic in this State who has responded to an emergency as a member of a dispatched mobile intensive care unit may administer buprenorphine to an individual if a member of the mobile intensive care unit administered an opioid antidote to that individual provided that the mobile intensive care paramedic administering the buprenorphine:
- (1) is providing emergency medical services through a program that is registered with the United States Attorney General pursuant to subsection (j) of 21 U.S.C. s.823;
- (2) administers the buprenorphine consistent with all applicable requirements of federal law; and
- (3) has completed supervised comprehensive training and competency assessments within a mobile intensive care unit regarding which specific medical conditions necessitate the administration of buprenorphine, buprenorphine dosage requirements, and required medical documentation following the administration of buprenorphine.

2. The Commissioner of Health may adopt rules and regulations, in accordance with the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), as are necessary to effectuate the provisions of this act.

3. This act shall take effect immediately.

STATEMENT

This bill permits certain paramedics to administer buprenorphine.
Under the bill, the bill provides that a paramedic who has
responded to an emergency as a member of a dispatched mobile
intensive care unit may administer buprenorphine to an individual if
a member of the mobile intensive care unit administered an opioid
antidote to that individual provided that the paramedic

S3803 VITALE, SCHEPISI

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1 administering the buprenorphine: (1) is providing emergency 2 medical services through a program that is registered with the 3 United States Attorney General pursuant to subsection (j) of 21 U.S.C. s.823; (2) administers the buprenorphine consistent with all 4 applicable requirements of federal law; and (3) has completed 5 6 supervised comprehensive training and competency assessments 7 within a mobile intensive care unit regarding which specific medical conditions necessitate the administration of buprenorphine, 8 9 buprenorphine dosage requirements, and required medical 10 documentation following the administration of buprenorphine.

SENATE HEALTH, HUMAN SERVICES AND SENIOR CITIZENS COMMITTEE

STATEMENT TO

SENATE, No. 3803

with committee amendments

STATE OF NEW JERSEY

DATED: JUNE 10, 2021

The Senate Health, Human Services and Senior Citizens Committee reports favorably and with committee amendments Senate Bill No. 3803.

As amended, this bill permits paramedics to administer buprenorphine, which is a form of medication-assisted treatment that helps curb cravings resulting from opioid use disorder and partially blocks the effects of opioid use.

Under the bill, a paramedic who has responded to an emergency as a member of a dispatched mobile intensive care unit may administer buprenorphine, under the medical direction of a licensed, supervising physician, to an individual following the emergent administration of an opioid antidote to the individual, provided that the paramedic administering the buprenorphine: (1) is providing emergency medical services through a program that is registered with the United States Attorney General pursuant to subsection (j) of 21 U.S.C. s.823; (2) administers the buprenorphine consistent with all applicable requirements of federal law; and (3) has completed supervised comprehensive training and competency assessments within a mobile intensive care unit regarding which specific medical conditions necessitate the administration of buprenorphine, buprenorphine dosage requirements, and required medical documentation following the administration of buprenorphine.

COMMITTEE AMENDMENTS:

The committee amendments require that a paramedic administering buprenorphine under the bill do so under the medical direction of a licensed, supervising physician.

The committee amendments clarify that buprenorphine may be administered to an individual following the emergent administration of an opioid antidote to the individual, without reference to the person or entity that administered the opioid antidote. As introduced, the bill required that a member of the paramedic's mobile intensive care unit have administered the opioid antidote as a condition of the paramedic administering buprenorphine to the patient.

ASSEMBLY, No. 5495

STATE OF NEW JERSEY

219th LEGISLATURE

INTRODUCED MARCH 17, 2021

Sponsored by:

Assemblyman HERB CONAWAY, JR.
District 7 (Burlington)
Assemblywoman VALERIE VAINIERI HUTTLE
District 37 (Bergen)
Assemblyman ANTHONY S. VERRELLI
District 15 (Hunterdon and Mercer)

Co-Sponsored by:

Assemblymen Armato and Benson

SYNOPSIS

Permits certain paramedics to administer buprenorphine.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 5/17/2021)

A5495 CONAWAY, VAINIERI HUTTLE

1	AN ACT concer	ning	mobile	intens	ive o	care	para	amed	ics	and
2	buprenorphine	and	supplem	enting	Title	26	of	the	Rev	ised
3	Statutes.									

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

- 1. a. As used in this section:
- "Mobile intensive care paramedic" and "mobile intensive care unit" shall have the same meaning as provided in section 1 of P.L.1984, c.146 (C.26:2K-7).

"Opioid antidote" shall have the same meaning as provided in section 1 of P.L.2017, c.116 (C.26:2K-66).

- b. Subject to the requirements of federal law, a mobile intensive care paramedic in this State who has responded to an emergency as a member of a dispatched mobile intensive care unit may administer buprenorphine to an individual if a member of the mobile intensive care unit administered an opioid antidote to that individual provided that the mobile intensive care paramedic administering the buprenorphine:
- (1) is providing emergency medical services through a program that is registered with the United States Attorney General pursuant to subsection (j) of 21 U.S.C. s.823;
- (2) administers the buprenorphine consistent with all applicable requirements of federal law; and
- (3) has completed supervised comprehensive training and competency assessments within a mobile intensive care unit regarding which specific medical conditions necessitate the administration of buprenorphine, buprenorphine dosage requirements, and required medical documentation following the administration of buprenorphine.

2. The Commissioner of Health may adopt rules and regulations, in accordance with the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), as are necessary to effectuate the provisions of this act.

3. This act shall take effect immediately.

STATEMENT

 This bill permits certain paramedics to administer buprenorphine. Under the bill, the bill provides that a paramedic who has responded to an emergency as a member of a dispatched mobile intensive care unit may administer buprenorphine to an individual if a member of the mobile intensive care unit administered an opioid antidote to that individual provided that the paramedic

A5495 CONAWAY, VAINIERI HUTTLE 3

1 administering the buprenorphine: (1) is providing emergency 2 medical services through a program that is registered with the 3 United States Attorney General pursuant to subsection (j) of 21 U.S.C. s.823; (2) administers the buprenorphine consistent with all 4 5 applicable requirements of federal law; and (3) has completed 6 supervised comprehensive training and competency assessments 7 within a mobile intensive care unit regarding which specific medical conditions necessitate the administration of buprenorphine, 8 9 buprenorphine dosage requirements, and required medical

documentation following the administration of buprenorphine.

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ASSEMBLY HEALTH COMMITTEE

STATEMENT TO

ASSEMBLY, No. 5495

with committee amendments

STATE OF NEW JERSEY

DATED: MAY 17, 2021

The Assembly Health Committee reports favorably and with committee amendments Assembly Bill No. 5495.

As amended, this bill permits certain paramedics to administer buprenorphine. The bill provides that a paramedic who has responded to an emergency as a member of a dispatched mobile intensive care unit may administer buprenorphine, under the medical direction of a licensed, supervising physician, to an individual following the emergent administration of an opioid antidote to that individual provided that the paramedic administering the buprenorphine: (1) is providing emergency medical services through a program that is registered with the United States Attorney General pursuant to subsection (j) of 21 U.S.C. s.823; (2) administers the buprenorphine consistent with all applicable requirements of federal law; and (3) has completed supervised comprehensive training and competency assessments within a mobile intensive care unit regarding which specific medical conditions necessitate the administration of buprenorphine, buprenorphine dosage requirements, and required medical documentation following the administration of buprenorphine.

COMMITTEE AMENDMENTS:

The committee amendments provide that a paramedic may administer buprenorphine, under the medical direction of a licensed, supervising physician, to an individual following the emergent administration of an opioid antidote to that individual.

Governor Murphy Signs Legislative Package to Address New Jersey's Opioid Epidemic

07/2/2021

ASBURY PARK – Reaffirming his commitment to end New Jersey's opioid epidemic, Governor Phil Murphy today signed a comprehensive legislative package into law to address the state's opioid crisis through overdose prevention and recovery resilience. The six bills focus on overdose prevention by expanding low-barrier access to naloxone and bridges to medication assisted treatment; strengthens public health data; and builds resiliency among children and families impacted by the opioid crisis.

"Over the last three years, my Administration, alongside our partners in the Legislature and many passionate advocates, has worked to meaningfully combat the opioid crisis that has held our state in its grip for far too long," said Governor Murphy. "We have worked tirelessly to erase the stigma associated with opioid use disorder and people who use drugs, close gaps in treatment, expand access and use of life-saving medicines like naloxone, and support the work of syringe exchange programs and harm reduction centers. The fight against the opioid epidemic has required a focus on harm reduction by providing safe and compassionate access points to care and by securing funding for vital programs and recovery services. By signing these bills today, we are strengthening the foundation of these critical resources and programs, keeping families together, and furthering our commitment to saving lives and ending the opioid epidemic in New Jersey."

"The opioid epidemic is a national public health crisis that devastates families every day," **said U.S. Congressman Frank Pallone.** "We know that harm reduction is critical to saving lives and getting the help individuals who suffer from opioid use disorder need to combat this epidemic. As Chairman of the Energy and Commerce Committee, I've helped pass legislation in Congress to address this crisis and will continue to work at the federal level to save lives. I'm proud to join Governor Murphy today as we take another step forward in expanding access to treatments and lifesaving medications in our state."

Governor Murphy signed the following six bills into law:

S3491 (Vitale, Lagana, Vainieri Huttle/Verrelli, Benson) Revises and expands authorization for any person or entity to obtain, distribute, and administer opioid antidotes.

S3803 (Vitale, Schepisi/Conaway, Vainieri Huttle, Verrelli) Permits certain paramedics to administer buprenorphine.

A5595 (Verrelli, Benson, Holley/Gopal, Lagana) Requires Division of Consumer Affairs to publish retail price of certain opioid antidotes.

A5597 (Conaway, Jimenez, Speight/Vitale, Turner) Permits school districts to administer student health surveys after prior written notification to parents and legal guardians.

S3814 (Madden/Conaway, Mosquera, Tully) Requires DCF or court to consider placement of children with relatives or kinship guardians when making placement decision; makes changes to certain standards for initiating petitions to terminate parental rights.

A5703 (Armato, Verrelli, Conaway/Addiego, Lagana) Requires certain health insurers, Medicaid, NJ FamilyCare, SHBP, and SEHBP to cover naloxone without imposing prior authorization requirements.

"I would like to thank the Governor for signing these crucial and life-saving bills into law today," **said Senator Joseph Vitale.** "Drug overdose is the leading cause of accidental death in the United States, with opioids being the most common drug, causing approximately 70 percent of all drug overdose deaths. Many of these lives could have been saved with the use of opioid antidotes, however; there is currently only a limited amount of individuals authorized to administer these antidotes. These new laws will expand who can deliver antidotes to a larger group of individuals, which will be crucial in saving countless lives from overdose."

"This bill keeps reunification the focus by removing barriers to relatives becoming Kinship Legal Guardians so that the child's relationship with their birth parents can be preserved," **said Senator Fred Madden.** "Kinship relationships increase the emotional well-being of a child and reduce their number of placements in foster care. This legislation will allow case precedent to better reflect new research."

"It's important that we have accurate data on the social, emotional and physical well-being of our students," **said Senator Shirley Turner**. "This legislation will help to provide that, by ensuring we are allowing as many students as possible to participate in these valuable surveys. I am grateful to see the Governor signing this measure into law and I look forward to seeing the impact it has on our public health initiatives."

"In 2020 alone, New Jersey had thousands of suspected opioid overdose deaths," **said Senator Joseph Lagana.** "It is evident that when we increase the availability of opioid antidotes, we can equip ourselves with the resources needed to greatly diminish the amount of deaths we have each year. Additionally, having the prices of these antidotes readily available will encourage those suffering from addiction to seek out antidotes that can be life-saving in dire times. I commend the Governor for signing this bill package today and I know we will save more lives because of it."

"Complete and utter transparency between the Division of Consumer Affairs and consumers is essential," **said Senator Vin Gopal.** "Antidotes like Narcan save lives and its accessibility can be the difference between a fatal drug overdose and someone's resuscitation. This legislation will ensure that consumers can identify which opioid antidotes they can afford and encourage them to purchase one to keep on them in case of emergency."

"Naloxone is crucial in treating an opioid overdose in the event of an emergency," **said Senator Dawn Addiego.** "When properly administered, the drug has been proven to significantly decrease the likelihood of death following an overdose, saving countless lives to date. It is imperative that we make this life-saving medication as accessibly as possible to our residents."

"As a doctor, I know just how important it is to prepare for and respond to medical emergencies patients may encounter," **said Assemblyman Herb Conaway**. "With thousands of lives lost to overdoses each year, we need a system in place to help residents struggling with substance use disorders who may be at risk for overdoses."

"Having immediate access to an opioid antidote when helping someone experiencing an overdose can mean the difference between life and death," **said Assemblyman Anthony Verrelli.** "It might be too late if a patient has to wait for treatment until they reach the hospital, which is why we must improve access to these medicines in our state."

"Every life lost to an overdose is a tragedy that might have been avoided with the right resources and support," **said Assemblyman John Armato.** "We must do everything in our power to help prevent the needless loss of life caused by drug overdoses throughout our state."

"Due to the addictive nature of these drugs, unfortunately it is quite possible for someone who overdosed once to accidentally overdose again," **said Assemblywoman Valerie Vainieri Huttle.** "We must take a holistic approach to combating overdoses by also treating opioid use disorder itself with medicines such

as buprenorphine."

"Studies have shown that children often fare better when placed with relatives rather than someone they do not know in foster care," **said Assemblywoman Gabriela Mosquera.** "More residents with happier, stable childhoods will help reduce the number of people throughout our state who struggle with substance use disorder."

"A safe and loving home environment helps pave the way for children to lead healthier lives," **said Assemblyman Christopher Tully.** "This legislation provides solutions to one of the key factors contributing to substance use disorder by ensuring more children end up with family or friends who know them and can care for them when their parents cannot."

"When you consider the prevalence of overdoses in our state and just how effective opioid antidotes can be in those situations, it is clear we must do everything we can to make this medication widely available," **said Assemblyman Daniel Benson.** "Allowing anyone to obtain opioid antidotes and give them out or utilize them in emergency situations is one way we can help get this life-saving medicine into the hands of the many residents who need it."

"Opioid antidotes save lives – it's as simple as that," **said Assemblyman Jamel Holley.** "There can be no confusion about pricing and accessibility when it comes to helping our community members acquire these medicines."

"With drug use sometimes beginning as young as 12-years-old, it is vital our State gathers information on the various health issues affecting our students," **said Assemblywoman Angelica Jimenez**. "Knowing just how many children have already been exposed to harmful substances will help us better understand the scope of the issue and how to address it before it becomes more severe in adulthood."

"We need to know more about the health challenges facing New Jersey students today," **said Assemblywoman Shanique Speight.** "Understanding how many students are actively using harmful substances will make it easier for us to reach out and provide support to the children in our communities who need our help."

"Governor Murphy and the Legislature are committed to saving lives by reaching those in need and removing barriers to treatment, and that includes making life-saving opioid antidotes as accessible as possible," said New Jersey Department of Human Services Acting Commissioner Sarah Adelman. "We've worked to get the opioid overdose antidote naloxone into as many hands as possible, distributing 62,000 free doses to residents at more than 300 pharmacies and giving more than 70,000 free naloxone doses to police, EMS, homeless shelters, libraries, reentry organizations and county mobile outreach units. Naloxone saves lives, and these new laws will help reinforce these efforts to get it into as many hands as possible in as many ways as possible."

"Today, New Jersey is making a strong and lasting statement with several new laws that support substance use treatment, recovery and family connections," said New Jersey Department of Children and Families Commissioner Christine Norbut Beyer. "Through our work in child welfare, we know that substance use and addiction are often underlying factors of family separation, with resulting trauma that can have long term, negative effects on everyone involved. This new law will help create placement stability for children who are removed due to a caregiver's opioid abuse, and will ensure that the preference for kinship placements is preserved."

"Today's actions further demonstrate Governor Murphy's commitment to end the opioid epidemic in New Jersey. By removing barriers to life-saving treatments like naloxone, and addressing the impact of addiction on families, these new laws will make it easier for people battling with substance abuse to receive the help they need and will ultimately save lives," said New Jersey Department of Banking and Insurance Commissioner Marlene Caride.

"New Jersey remains resolute in its commitment to ending the addiction crisis that continues to claim lives in communities across New Jersey," said Attorney General Gurbir S. Grewal. "These bills bolster our efforts by expanding access to life-saving medications and giving those on the front lines additional resources to fight this epidemic."

"Taken together, these bills provide powerful tools to address the overdose epidemic," **said New Jersey Department of Health Commissioner Judith Persichilli.** "Fundamentally rooted in science, compassion and harm reduction, these bills will help reverse the tide of the overdose epidemic, which has robbed us of too many people we love. These bills come at a crucial time, especially as we worry about an uptick in overdoses as a result of the COVID-19 pandemic."

"Breaking down barriers to affordable high-quality healthcare is the hallmark of what we do at the VNACJ Community Health Center," said Christopher R. Rinn, CEO of the VNACJ Community Health Center. "Today's initiatives not only underscore Governor Murphy's ongoing commitment to end the opioid epidemic but also empower those at the community level to improve access to a whole host addiction services. We are especially grateful for the support of our Medication Assistant Therapy (MAT) programs. The opioid epidemic continues to impact thousands of lives in the communities we serve. Thanks to the Governor's and the Legislature's leadership, we are saving lives and empowering patients onto the journey of recovery."

"Expanding New Jersey's naloxone standing order will make it much easier for people who use drugs to access this life-saving medication," **said Jenna Mellor, Executive Director, New Jersey Harm Reduction Coalition**. "When naloxone is widely available, people who are most likely to witness an overdose can act as first responders and save the life of a friend or family member. This legislation will get naloxone into as many hands as possible, which is one of the few proven ways to prevent overdose deaths. We sincerely thank Governor Murphy, Senator Vitale, and Assemblywoman Vaineri Huttle for their leadership on this issue, and look forward to finding new ways to expand harm reduction services across the Garden State."

"The bills signed today ensure that cost, location, and stigma never stand in the way of naloxone access for people who use drugs, people who used to use drugs, and our loved ones," said Caitlin O'Neill, Director of Harm Reduction Services and co-founder, New Jersey Harm Reduction Coalition. "Having naloxone on-hand is critical to keeping one another alive, and this bill makes widespread naloxone distribution possible. I commend Governor Murphy, Senator Vitale, and Assemblywoman Vainieri Huttle for responding with true leadership when people who use drugs when we told you we need widespread community naloxone access to survive, and I look forward to continuing to expand harm reduction services throughout the Garden State."