Bill as Introduced

SB 322- AS INTRODUCED

2000 SESSION

00-2642
01/09

SENATE BILL ***322***

AN ACT extending the needle exchange pilot program.

SPONSORS: Sen. Trombly, Dist 7; Sen. Wheeler, Dist 21; Rep. Copenhaver, Graf 10; Rep. C. Kane, Rock 23; Rep. M. Fuller Clark, Rock 36; Rep. Konys, Hills 33; Rep. O'Keefe, Rock 21

COMMITTEE: Public Institutions, Health and Human Services

ANALYSIS

This bill extends the needle exchange pilot program for 4 years.

Explanation: Matter added to current law appears in ***bold italics.***
Matter removed from current law appears [~~in brackets and struckthrough.~~]
Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

SB 322- AS INTRODUCED

00-2642
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STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand

AN ACT extending the needle exchange pilot program.

Be it Enacted by the Senate and House of Representatives in General Court convened:

1 Needle Exchange Pilot Program Extended. Amend 1997, 315:2, I to read as follows:

I. The commissioner of the department of health and human services shall establish guidelines for and shall monitor, with the assistance of an advisory committee, a [~~2-year~~] ***6-year*** pilot program offering the free exchange of new hypodermic needles and syringes for used hypodermic needles and syringes as a means to prevent the transmission of human immunodeficiency virus (HIV) among intravenous drug users. The pilot program may be implemented by one community in New Hampshire. Any individual who either administers or participates in the needle exchange program established under this act shall be immune from prosecution for violating RSA 318:52-c through RSA 318:52-e.

2 Effective Date. This act shall take effect upon its passage.

Committee Minutes

Date: January 11, 2000
Time: 2:00 pm
Room: LOB 102

The Senate Committee on Public Institutions/Health Human Services held a hearing on the following:

SB 322 extending the needle exchange pilot program.

Members of Committee present: Senator Squires
Senator Wheeler
Senator Gordon
Senator Krueger

The Chair, Senator James Squires, opened the hearing.

Senator Rick A. Trombly, D. 7: Thank you Mr. Chairman and other members of the Committee. My name is Rick Trombly, Senate District 7. I will be brief in that I think what's been said about needle exchange programs has been debated at length in this legislature on several other occasions. I think prior to the enactment of this statute we did get a needle exchange program through the legislature and I believe it was under Governor Merrill. I believe at one point. This is a health care issue obviously. I think it was remarkable that the UN was dealing with the economic and social impact of AIDS in Africa yesterday and took an extraordinary step to pass resolutions regarding the spread of AIDS in Africa.

This bill just does one thing. It extends the needle exchange program to make it a six year program otherwise it dies.

Senator James W. Squires, D. 12: Senator Krueger.

Senator Patricia Krueger, D. 16: Quick question Senator Trombly. Has any community availed itself of this?

Senator Rick A. Trombly, D. 7: No. The reason, Senator Krueger, for that is needle exchange is still a very volatile issue in the communities. There is one community that's looking at it but I don't want to represent how seriously, that's Concord. There's a City Councilor that's interested in

bringing this forward. The old Police Chief didn't want to do it and the new one, I don't want to represent that Chief or anything that he have said but I do know that for that change there may be a different view. But nobody's done that yet. I think it's because of what the perception is within the local communities.

Senator Patricia Krueger, D. 16: Just one last follow-up. Is there any new information that you are aware of that could be presented before a committee decision that would reinforce the need for it? In other words, the time has elapsed now that would say that this in fact is a very significant program?

Senator Rick A. Trombly, D. 7: I think Representative Kane may have some documents or articles regarding the needle exchange in other states.

Senator James W. Squires, D. 12: Senator Trombly, just a brief question. Was there any discussion of six years versus four years, ten years? Where did the six years come from?

Senator Rick A. Trombly, D. 7: Six years is just a figure where you're hopeful you can get. I'd like to see somebody pick it up next year and we'll be fine. Two reasons, Mr. Chairman, is to 1) if we still need to have those debates within the community who may be interested it, it will give time to have the debate and also give time for the program to track the certain amount of success with it. We're confident that once you do it you're going to be successful in cutting down the spread of AIDS in the needle community.

Senator James W. Squires, D. 12: So, if I understand this right, two years have now elapsed so..

Senator Rick A. Trombly, D. 7: Right.

Senator James W. Squires, D. 12: Ok.

Senator Rick A. Trombly, D. 7: What's happened with the two years is we've gotten the leg going and some of the issues ironed out in some of the communities but there's still opposition so that no one's picked it up. We've done some of that work and work needs to continue on that.

Senator James W. Squires, D. 12: Ok. Representative Kane.

Representative Cecelia Kane, Rock., D. 32: Good afternoon. I'm Representative Cecelia Kane from District 32 and I really feel, it seems really unbelievable that we did pass this bill and then it was not appropriate for two years. It was a bill that saved lives and did not increase drug abuse. I

have reports that researchers say that the "AIDS epidemic in New York City 150,000 injecting drug users has been brought under control." At time, I believe, that Mayor Daniels, when he went into office, he stopped the program and they had to start it up again, that programs to reduce sharing hypodermic syringes among drug users can reverse the course of the epidemic within this highest risk population. It does not increase drug abuse. It is to save lives.

Vermont, the Governor of Vermont, they're going to put through the program because they're very interested and all the programs that have been put through have decreased drug abuse and has saved lives.

That's all I'm going to say. Is there any questions you want me to answer?

Senator James W. Squires, D. 12: I have a question Cecelia and there may well be someone else that could help us. Could you or someone supply us with AIDS cases in New Hampshire. I know it's there I just can't put my finger on it.

Representative Kane: I believe somebody from the Department of Health and Human Services perhaps can. There's another thing I want to say too, that with this we are trying to decrease the drug abuse in the young because there is counseling and treatment involved with putting on the programs. I think that's what we're really targeting is high school and the young people so that we can get to them through these programs. Thank you. If there's anything else..

Senator James W. Squires, D. 12: Thank you. Representative Manning. Is he here? Representative Copenhaver.

Representative Marion Copenhaver, Graf. D. 10: Thank you Mr. Chairman. Members of the Committee, I'm Marion Copenhaver from Grafton District 10. I am here in strong support of the extension time for this bill and I hadn't intended speak until Senator Squires asked why the number six years was proposed as opposed to two or ten or whatever number you might think of. It's my opinion that the stumbling block in all the towns, cities that would conceivably consider a needle exchange program is the law enforcement people. They have tunnel vision as far as taking positive steps to reduce the spread of AIDS and not just HIV but also other diseases that are transmitted by dirty needles and they seem to think that this will increase drug abuse when in fact in Connecticut there are very strong statistics indicating that this is not the case and that the incidence of HIV has dropped as has it in the state of Washington. I was going to say, it's not Seattle but south of Seattle and in San Francisco. I think that it has been demonstrated across the

Country that it is a successful and efficacious means of stopping the spread of HIV and as you know there's no cure and it is a fatal disease although the length of time it takes is a lot longer now, thank Heavens, than it was ten years ago. With that I will say the six years is perhaps maybe enough time to educate some of the law enforcement people to the need for having this kind of needle exchange program.

Senator Patricia Krueger, D. 16: Thank you Mr. Chairman. My question to you, Representative, was that very thing. Going back to your last sentence, has there been any softening on the part of law enforcement, if I remember testimony on this relative to the needle exchange program? Are they getting more data that substantiates what you've just said?

Representative Copenhaver: I hesitate to say this, I don't believe they look at the data that has been presented to them. I think they have a closed mind and have made up their minds in advance and are not open. This may change. Representative Kane knows Portsmouth certainly better than I do. I don't know it at all but she knows the Police Chief there and has spoken with other law enforcement people and so she's better able to answer the question as to whether the law enforcement people are becoming a little wiser in their approach to this disease, to this issue.

Senator Patricia Krueger, D. 16: I just have a quick question. My question was given this was a public hearing, is there anyone speaking in opposition? in other words is there an outcry from law enforcement at this point?

Senator James W. Squires, D. 12: No. No one has signed up.

Representative Copenhaver: I would say in their behalf, I might say, that the hearing process has started so quickly that sometimes even the sponsors have very short notice of a hearing and I suspect that because we are starting quickly and moving so rapidly that the people who keep track of the bills affecting their particular organizations probably haven't quite gotten geared up to organize their pros or cons.

Senator Patricia Krueger, D. 16: Thank you. I appreciate your honesty.

Senator Rick A. Trombly, D. 7: I can answer that.

Senator Patricia Krueger, D. 16: I thought maybe they had changed their mind that's why I asked.

Representative Copenhaver: Maybe they will.

Senator James W. Squires, D. 12: Senator Trombly.

Senator Rick A. Trombly, D. 7: I don't mean to go out of order, Mr. Chairman, but I can tell you though I have spoken with some people who represent some law enforcement organizations and I was told that they recognized that they're not happy with that but it's not something that's a front burner. However you interpret that. I interpret it nicely, that it's good that while they maintain they're opposition it was not something that they felt they needed to...

Senator Patricia Krueger, D. 16: Senator Trombly, if you just have a minute. I was thinking about the way that this may play out, it's so hard to discontinue something if it hasn't been tried yet and yet the idea of extending it, I have the same concerns I had before, however, I would be very curious as to their feelings and if there's any part of the program that in fact involves law enforcement, therefore, they would almost be apt to get on board. Do they have part in this whole thing?

Senator Rick A. Trombly, D. 7: No. The only part they would have would be enforcement of the needle statute which is repealed as to that one community that uses it. So, the answer to your question is no they wouldn't. There is that pervasive belief that this is going to spread drug use.

Senator Patricia Krueger, D. 16: Can I ask one more question because this is intriguing me? One last thing. Senator Trombly, do you think that they're concerned that you're sort of aiding and abetting or something like that? Is that the concern?

Senator Rick A. Trombly, D. 7: I think their concern is as it's always been expressed to me is more general. I will tell you Senator Krueger, totally unsubstantiated belief..

Senator Patricia Krueger, D. 16: It will increase.

Senator Rick A. Trombly, D. 7: It will increase drug use and I think we've had problems in some of the boarder towns. I think to work efficiently and I'll leave this up to the Health and Human Services people, in my mind you probably need to have a metropolitan area. You could put this needle exchange program in Boscawen and I don't know what we would do with it, quite frankly. But I think we've concerned on a metropolitan area in New Hampshire, if you can use that word. Some of the concerns of the larger areas are on the boarder and the Chiefs have expressed to me "just who's going to come up from the other states?" I'm not certain if Massachusetts requires a prescription for needles. I do know they have people out there

handing out needles and stuff and it works perfectly fine. It's a totally unsubstantiated belief but you have to recognize the fact that in the law enforcement community it is their belief and perception is their reality. They've been successful in seeing...

Senator Patricia Krueger, D. 16: One last thing then, what happens to somebody who is part of this program who in fact is basically breaking the law?

Senator Rick A. Trombly, D. 7: You mean by using drugs?

Senator Patricia Krueger, D. 16: Yes.

Senator Rick A. Trombly, D. 7: Well if they're part of the program they're not breaking the law exchanging needles because that's repealed.

Senator Patricia Krueger, D. 16: Ok. What about the procurement of the drug part? I'm trying to find out their objection. If the number of acts decreases and the disease decreases and all those things go down, I'd like to be able to call Mark Driscoll and say, "I've just come to this hearing now give me you"..

Senator Rick A. Trombly, D. 7: I think the only things he's going to say to you is he believes it will increase drug use. I think the Health and Human Services people might be able to answer that more thoroughly, by far, than I could. I think the law enforcement community is just wrong in their assessment of the affect. I think they tend by nature to be conservative in their views of how laws will affect their communities.

Senator Patricia Krueger, D. 16: Thank you.

Senator James W. Squires, D. 12: Senator Wheeler.

Senator Katherine W. Wheeler, D. 21: Thank you. Thank you Senator Trombly for entertaining more questions. The House just passed the bill that deregulates needles. Is that correct?

Senator Rick A. Trombly, D. 7: Yes.

Senator Katherine W. Wheeler, D. 21: So if that were to pass the Senate, would that remove some of the objectives, do you believe, to this pilot program?

Senator Rick A. Trombly, D. 7: I think it will remove the need for a pilot program. The pilot program is in existence because you have to, we regulate needles. My belief, Senator Wheeler, is if we pass the requirement of a prescription than people...and I had a bill in that provides them and makes accessible the containers. You know the plastic containers they have you put....that would make more accessible those containers to people that had needles. That was, I think that was the one that Governor Merrill vetoed. My read to that is if people can get the needles without prescriptions and they'll be able to buy them then they hopefully won't exchange them.

Senator Katherine W. Wheeler, D. 21: May I have a follow-up on that? So if we, this will be going through the process, perhaps, and if the Senate were to ratify the House's decision you might consider then withdrawing this?

Senator Rick A. Trombly, D. 7: Absent any objection from Health and Human Services. If there's some benefit Health and Human Services might see to the Advisory Committee then maybe you'd want to save that part but if you do away with the requirement for prescriptions for needles then sure. I don't see a need for it. I would prefer to have the House bill over this.

Senator Katherine W. Wheeler, D. 21: Thank you. We have time to consider this.

Senator James W. Squires, D. 12: The Department's name has been raised here so let's see Mr. Dupee. You didn't check off that you wish to speak. Brook would you like to speak?

Mr. Brook Dupee, Department of Health and Human Services: Mr. Chairman I'd like to actually have Dr. Kassler, our Medical Director, speak on behalf of the Department.

Senator James W. Squires, D. 12: That would be fine.

Dr. William Kassler, Medical Director, Department of Health and Human Services: written testimony handed in and read. **See Attachment A.**

Senator James W. Squires, D. 12: Senator Wheeler.

Senator Katherine W. Wheeler, D. 21: Thank you very much. Dr. Kassler,' in the example you used in New Haven, was the sale of needles regulated at that time in New Haven do you know?

Dr. Kassler: Yes. It was approximately in 1993 they decriminalized possession and legalized over the counter purchase.

Senator Katherine W. Wheeler, D. 21: Thank you. May I have another question? Thank you. Dr. Kassler, this issue we've been discussing for many years in the legislature. It was with great excitement that I saw the House pass the decriminalization of the sale of needles because I know Representatives Kane and Copenhaver have been very hardworking on this for years, and it seems to me when I was still in the House and listening to the testimony on this that many years ago the CDC had a policy of feeling that clean needles did not lead to an increase in use of drugs but did lead to a decrease in the spread of infectious diseases. Is that correct?

Dr. Kassler: Yes. CDC funded research has, as I indicated in some of the not the individual studies but the overall summaries of the literature, has supported that contention.

Senator Patricia Krueger, D. 16: Thank you very much. Dr. I was wondering why you think no community has thus far participated in the program and did you see any activity in the communities that would prompt extension of this program?

Dr. Kassler: I am going to have to plead both the newcomer in that I've been in the State for 14 months and in my day-to-day activities with my stake-holders and my constituents in the health field, I'm probably not the best person to answer that question. I would defer to some of my colleagues.

Senator James W. Squires, D. 12: Senator Krueger.

Senator James W. Squires, D. 12: Thank you for your candor. I would wonder though in a two year life of a program if you as Medical Director feel that this would certainly improve the health of the state of New Hampshire why either you or someone in staff knowing that this program was soon to terminate wouldn't want to encourage this or is it just an impossible goal to achieve?

Dr. Kassler: I think we're very supportive and encouraging. I think we are limited in that this is a local issue and that while we would provide technical support and encouragement there is not much in the legal or policy sphere that we could do beyond encouragement. That being said, I do think that our, as previous speakers have indicated, some stigma associated with this and perhaps some misinformation and it's been our tact that we try to get the information out and to have local jurisdiction (turn over tape).

Senator James W. Squires, D. 12: That concludes those individuals who have signed up wishing to testify. Anybody else here wish to speak? You're welcome to do so. Seeing none I will close the hearing.

Hearing closed at 2:30 pm.

Respectfully submitted,

Mq Chandler

Merideth Chandler,
Committee Secretary

Attachment A

Department of Health and Human Services
Testimony on SB 322
January 11, 2000

Good afternoon. For the record my name is William Kassler. I am a practicing physician and here representing the Department of Health and Human Services as the State Medical Director. I will be speaking in favor of Senate Bill 322. As you know, this bill addresses the extension of a previous bill supporting the establishment of a pilot needle and syringe exchange program. The program would provide injection drug users with sterile needles and syringes. For clarity, I will use the term syringe to include both syringes and needles. It is important to note that in any such program, there would be a one-for-one exchange of used for clean syringes, so the program would not increase the number of syringes in circulation.

Let me present you with a few facts before I discuss the bill. First, there are an estimated 6,000 injection drug users in New Hampshire. These individuals are at high risk for infection with HIV and other blood borne infections such as Hepatitis B and Hepatitis C every time they use a syringe previously used by another injection drug user. Each time someone injects drugs, the syringe becomes contaminated with that persons blood. If another person uses the same syringe, he or she is exposed to the previous users blood.

Nationally, about one third of the 40,000 new HIV cases are linked to injection drug use. About 20% of the 300,000 new Hepatitis B cases are linked to injection drug use, and over half of the estimated 200,000 new cases of Hepatitis C are due to contaminated syringes. In New Hampshire over the past 5 years, 24 percent of new cases of HIV have occurred among injection drug users.

However, this is just the tip of the iceberg. HIV, Hepatitis B & Hepatitis C transmission that occurs through injecting drug use have a cascading effect as these infections are passed to their children and to their sexual partners who then further spread these infectious diseases in the community. Thus, reducing the risk of disease transmission among injection drug users is a legitimate medical and public health rationale for increasing access to clean syringes.

The Department supports this bill for three reasons.

- First, there **is** strong scientific evidence that syringe exchange programs will reduce the level of HIV infection and other blood borne diseases.
- Second, after thorough evaluation, there is **no** evidence that syringe exchange programs will increase drug use.
- Third, SB 322 respects community values by placing the voluntary pilot program within the confines of local control and would be operated without the use of **any** state funds.

The scientific evidence can best be summed up by quoting an article from the Journal of the America Medical Association: "The preponderance of research suggests that needle exchange programs lower the rates of multi-person use of needles, they offer a referral source for social services, health care and drug abuse treatment; and they also serve as a conduit to HIV counseling and testing, health education and condom distribution."

The National Research Council's review of the data concludes that syringe exchange programs constitute a vital component of a comprehensive strategy to prevent infectious disease. These programs reduce the number of contaminated syringes in circulation, which lowers a

major risk factor for infectious disease transmission. A National Academy of Sciences panel found that programs that encourage drug users to exchange used syringes for new ones greatly reduced the spread of HIV and did not boost illicit drug use. This finding echoes the previous findings by the General Accounting Office (GAO), the Office of Technology Assessment (OTA) and the University of California, San Francisco.

Closer to home, I turn next to the experience of the city of New Haven Connecticut. In 1990, the city initiated a syringe exchange program. The program was rigorously evaluated by a research team from Yale University led by Dr. Edward Kaplan, who tested returned syringes for the presence of HIV. Using a calculation that involved the return rate of syringes and the presence of HIV in the syringes, the syringe exchange program was found to reduce new HIV infections by injection drug users in the program by **one-third**.

The last issue to address is that of local control. SB 322 demonstrates respect for the New Hampshire tradition of "local control". No city or town is mandated to initiate the pilot program. Also, let me be clear that this bill will not result in the use of state dollars for syringe exchange. The Department is committed to developing the rules for such a program, which we can do within our current resources. The actual cost of the syringe exchange actives will be borne by the participating community.

In closing we urge this Committee to place its full support behind this bill because it is a common sense public health measure that leaves the power to participate in the hands of our local communities. Thank you very much for this opportunities to speak to you about this most pressing public health problem. I will be happy to answer any questions that you may have.

Speakers

SENATE PI-HHS COMMITTEE

Date 01/11/00 Time 2:00 **PM** Public Hearing on **SB 322**

Appearing in FAVOR: (Please print) **Please check box at left to speak.**

Speaking?	Name	Address	Representing
NO	Rep Jack Ppatt	Walpole	
NO	Rep Laura Seldin	Concord	
NO	Rep. Margaret A. Case	Nottingham	
	Rep J C Manning	Cheshire #9	
✓	Sen Rick Ohrenberger	Senate #7	
✓	Rep Marion Copenhaver	Grafton 10	
✓	Rep Cecelia D'Amore	Rockingham 32	
	Brook Dupee	NHDMS	
	Rep BARBARA C. FRENCH	Hennker/Bradford Merr 3	
✓	William Kassler MD	NHDHHS	

Appearing in OPPOSITION: (Please Print) **Please check box at left to speak.**

Committee Report

Date: January 11, 2000 Time: 2:00 pm

The Senate Committee on Public Institutions/Health Human Services held its hearing in Room 102, LOB, Concord, New Hampshire.

BILL NO.: SB 322 TITLE: extending the needle exchange pilot program.

Members of the Committee present: Senator Squires
Senator Wheeler
Senator Gordon
Senator Krueger

Those appearing in favor:

Name and Address	Representing
See Attached.	

Those appearing in opposition:

Name and Address	Representing
See Attached.	

REPORT OF THE COMMITTEE:

- ☒ Ought to Pass - Majority
- ☐ Ought to Pass w/ Amendment
- ☒ Inexpedient to Legislate - Minority
- ☐ Rereferred
- ☐ Interim Study
- ☐ Continued Hearing
- ☐ Postponed Hearing

STATE OF NEW HAMPSHIRE

SENATE

REPORT OF THE COMMITTEE

Date: MARCH 15, 2000

THE COMMITTEE ON Public Institutions/Health Human Services

to which was referred Senate Bill 322

AN ACT extending the needle exchange pilot program.

VOTE: 4-2 MAJORITY

Having considered the same, report the same without amendment and recommend that the bill: **OUGHT TO PASS.**

Senator Katie Wheeler
For the Committee

STATE OF NEW HAMPSHIRE

SENATE

REPORT OF THE COMMITTEE

Date: MARCH 15, 2000

THE COMMITTEE ON Public Institutions/Health Human Services

to which was referred Senate Bill 322

AN ACT extending the needle exchange pilot program.

VOTE: 2-4 MINORITY

Having considered the same, report the same with the following resolution:
Resolved, that it is: **INEXPEDIENT TO LEGISLATE.**

Senator Patricia Krueger
For the Committee