
THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL
No. 140 Session of
2011

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BOBACK AND RAVENSTAHL, JANUARY 20, 2011

AS AMENDED ON THIRD CONSIDERATION, IN SENATE, OCTOBER 15, 2012

AN ACT

1 Establishing the Methadone Death and Incident Review Team and
2 providing for its powers and duties; and imposing a penalty.

3 The General Assembly of the Commonwealth of Pennsylvania
4 hereby enacts as follows:

5 Section 1. Short title.

6 This act shall be known and may be cited as the Methadone
7 Death and Incident Review Act.

8 Section 2. Definitions.

9 The following words and phrases when used in this act shall
10 have the meanings given to them in this section unless the
11 context clearly indicates otherwise:

12 ~~"Department." The Commonwealth department charged with~~ ←
13 ~~oversight of drug and alcohol programs, currently the Department~~
14 ~~of Health of the Commonwealth.~~

~~"Drug-free drug and alcohol addiction treatment program." A drug and alcohol addiction treatment program that is not licensed as a narcotic treatment program by the department.~~

~~"Methadone-related incident." Any situation not involving a fatality where methadone may be a contributing factor in the behavior of an individual.~~

~~"Patient or family advocate." A person who works as a patient or family advocate at a drug and alcohol addiction treatment program or a group of programs.~~

~~"Secretary." The secretary of the department as defined in this section.~~

"DEPARTMENT." THE DEPARTMENT OF DRUG AND ALCOHOL PROGRAMS OF THE COMMONWEALTH. ←

"METHADONE-RELATED DEATH." A DEATH WHERE METHADONE WAS:

(1) A PRIMARY OR SECONDARY CAUSE OF DEATH; OR

(2) MAY HAVE BEEN A CONTRIBUTING FACTOR.

"METHADONE-RELATED INCIDENT." A SITUATION WHERE METHADONE MAY BE A CONTRIBUTING FACTOR WHICH:

(1) DOES NOT INVOLVE A FATALITY; AND

(2) INVOLVES:

(I) A SERIOUS INJURY; OR

(II) UNREASONABLE RISK OF DEATH OR SERIOUS INJURY.

"NARCOTIC TREATMENT PROGRAM." A PROGRAM LICENSED AND APPROVED BY THE DEPARTMENT OF DRUG AND ALCOHOL PROGRAMS FOR CHRONIC OPIATE DRUG USERS THAT ADMINISTERS OR DISPENSES AGENTS UNDER A NARCOTIC TREATMENT PHYSICIAN'S ORDER, EITHER FOR DETOXIFICATION PURPOSES OR FOR MAINTENANCE.

"SECRETARY." THE SECRETARY OF DRUG AND ALCOHOL PROGRAMS OF THE COMMONWEALTH.

"Team." The Methadone Death and Incident Review Team

1 established under section 3.

2 Section 3. Establishment of Methadone Death and Incident Review
3 Team.

4 (a) Team established.--The department shall establish a
5 Methadone Death and Incident Review Team and conduct a ~~methadone~~ ←
6 ~~death review for all deaths where methadone was either a primary~~
7 ~~or secondary cause of death. The team~~ REVIEW AND shall examine ←
8 the circumstances surrounding methadone-related deaths and
9 methadone-related incidents in this Commonwealth for the purpose
10 of promoting safety ~~and~~, reducing methadone-related deaths and ←
11 methadone-related incidents AND IMPROVING TREATMENT PRACTICES. ←

12 (b) Composition.--The team shall consist of the following
13 individuals:

14 (1) The secretary or a designee, who shall serve as the
15 chairperson of the team.

16 (2) The Director of the Bureau of Drug and Alcohol
17 Programs.

18 (3) The following individuals appointed by the
19 secretary:

20 (i) A representative from narcotic treatment
21 programs as defined in 28 Pa. Code § 701.1 (relating to
22 general definitions).

23 (ii) A representative from a licensed drug and
24 alcohol addiction treatment program that is not defined
25 as a narcotic treatment program.

26 (iii) A representative from law enforcement
27 recommended by a Statewide association representing
28 members of law enforcement.

29 (iv) A representative from the medical community
30 recommended by a Statewide association representing

1 physicians.

2 (v) A district attorney recommended by a Statewide
3 association representing district attorneys.

4 (vi) A coroner or medical examiner recommended by a
5 Statewide association representing county coroners and
6 medical examiners.

7 (vii) A member of the public.

8 (viii) A patient or family advocate.

9 (c) Initial meeting.--The initial meeting of the team shall
10 take place within 90 days of the effective date of this act--
11 SECTION. During this initial meeting, the team shall develop a
12 schedule for its work and reports.

13 ~~(d) Expenses. Members of the team shall not receive~~
14 ~~compensation but shall be reimbursed for travel and other~~
15 ~~necessary expenses.~~

16 (D) EXPENSES.--MEMBERS OF THE TEAM SHALL NOT RECEIVE
17 COMPENSATION BUT SHALL BE REIMBURSED FOR NECESSARY TRAVEL AND
18 OTHER REASONABLE EXPENSES INCURRED IN CONNECTION WITH THE
19 PERFORMANCE OF THEIR DUTIES AS MEMBERS. IF POSSIBLE, THE TEAM
20 SHALL UTILIZE THE SERVICES AND EXPERTISE OF EXISTING PERSONNEL
21 AND STAFF OF STATE GOVERNMENT.

22 Section 4. Team duties.

23 The team shall:

24 (1) Review each death where methadone was either the
25 primary or a secondary cause of death and review methadone-
26 related incidents.

27 (2) Determine the role that methadone played in each
28 death and methadone-related incident.

29 (3) Communicate concerns to regulators and facilitate
30 communication within the health care and legal systems about

1 issues that could threaten health and public safety.

2 (4) Develop best practices to prevent future methadone-
3 related deaths and methadone-related incidents. The best
4 practices shall be:

5 (i) Promulgated by the department as regulations.

6 (ii) Posted on the department's Internet website.

7 ~~(5) Collect and store data on the number of complaints~~ ←
8 ~~and problems arising from the operation of opiate treatment~~
9 ~~programs, methadone related deaths and methadone related~~
10 ~~incidents, and provide a brief description of each death and~~
11 ~~incident. These aggregate statistics shall be posted on the~~
12 ~~department's Internet website.~~

13 ~~(6) Develop a form for the submission of methadone-~~
14 ~~related incidents to the team by any concerned party.~~

15 ~~(7) Develop in consultation with the coroners and~~
16 ~~medical examiners a model form for county coroners and~~
17 ~~medical examiners to use to report and transmit information~~
18 ~~regarding methadone related deaths to the team.~~

19 (5) COLLECT AND STORE DATA ON THE NUMBER OF METHADONE- ←
20 RELATED DEATHS AND METHADONE-RELATED INCIDENTS, AND PROVIDE A
21 BRIEF DESCRIPTION OF EACH DEATH AND INCIDENT. THE AGGREGATE
22 STATISTICS SHALL BE POSTED ON THE DEPARTMENT'S INTERNET
23 WEBSITE. THE TEAM MAY COLLECT AND STORE DATA CONCERNING
24 DEATHS AND INCIDENTS RELATED TO OTHER DRUGS USED IN OPIATE
25 TREATMENT.

26 (6) DEVELOP A FORM FOR THE SUBMISSION OF METHADONE-
27 RELATED DEATHS AND METHADONE-RELATED INCIDENTS TO THE TEAM BY
28 ANY CONCERNED PARTY.

29 (7) DEVELOP IN CONSULTATION WITH A STATEWIDE ASSOCIATION
30 REPRESENTING COUNTY CORONERS AND MEDICAL EXAMINERS A MODEL

1 FORM FOR COUNTY CORONERS AND MEDICAL EXAMINERS TO USE TO
2 REPORT AND TRANSMIT INFORMATION REGARDING METHADONE-RELATED
3 DEATHS TO THE TEAM. THE TEAM AND THE STATEWIDE ASSOCIATION
4 REPRESENTING COUNTY CORONERS AND MEDICAL EXAMINERS SHALL
5 COLLABORATE TO ENSURE THAT ALL METHADONE-RELATED DEATHS ARE,
6 TO THE FULLEST EXTENT POSSIBLE, IDENTIFIED BY CORONERS AND
7 MEDICAL EXAMINERS.

8 (8) DEVELOP AND IMPLEMENT ANY OTHER STRATEGIES THAT THE
9 TEAM IDENTIFIES TO ENSURE THAT THE MOST COMPLETE COLLECTION
10 OF METHADONE-RELATED DEATH AND METHADONE-RELATED SERIOUS
11 INCIDENT CASES REASONABLY POSSIBLE IS CREATED.

12 ~~(8)~~ (9) Prepare an annual report that shall be posted ←
13 on the department's Internet website and distributed to the
14 chairman and minority chairman of the Judiciary Committee of
15 the Senate, the chairman and minority chairman of the Public
16 Health and Welfare Committee of the Senate, the chairman and
17 minority chairman of the Judiciary Committee of the House of
18 Representatives and the chairman and minority chairman of the
19 Human Services Committee of the House of Representatives.
20 Each report shall:

21 (i) Provide public information regarding the number
22 and causes of methadone-related deaths and methadone-
23 related incidents.

24 (ii) Provide aggregate data on five-year trends on
25 ~~methadone use and abuse and~~ methadone-related DEATHS AND ←
26 METHADONE-RELATED incidents when such information is
27 available.

28 ~~(iii) Make recommendations to prevent future~~ ←
29 ~~methadone deaths and abuse and methadone related~~
30 ~~incidents.~~

(III) MAKE RECOMMENDATIONS TO PREVENT FUTURE
METHADONE-RELATED DEATHS, METHADONE-RELATED INCIDENTS AND
ABUSE AND SET FORTH THE DEPARTMENT'S PLAN FOR
IMPLEMENTING THE RECOMMENDATIONS.

(iv) Recommend changes to statutes and regulations
to decrease methadone-related deaths and methadone-
related incidents.

(v) Provide a report on METHADONE-RELATED DEATHS AND
methadone-related incidents and concerns regarding
narcotic treatment programs.

~~(9)~~ (10) Develop and publish on the department's
Internet website a list of meetings for each year.

Section 5. Duties of coroner and medical examiner.

A county coroner or medical examiner shall forward all
METHADONE-RELATED death cases ~~involving methadone as the primary~~
~~or secondary cause of death~~ to the team for review. The county
coroner and medical examiner shall use the model form developed
by the team to transmit the data.

Section 6. Review procedures.

The team may review the following information:

(1) Coroner's reports or postmortem examination records
unless otherwise prohibited by Federal or State laws,
regulations or court decisions.

(2) Death certificates and birth certificates.

(3) Law enforcement records and interviews with law
enforcement officials as long as the release of such records
will not jeopardize an ongoing criminal investigation or
proceeding.

(4) Medical records from hospitals ~~and~~, other health
care providers AND NARCOTIC TREATMENT PROGRAMS.

1 (5) Information and reports made available by the county
2 children and youth agency in accordance with 23 Pa.C.S. Ch.
3 63 (relating to child protective services).

4 (6) Information made available by firefighters or
5 emergency services personnel.

6 (7) Reports and records made available by the court to
7 the extent permitted by law or court rule.

8 (8) EMS records.

9 (9) Traffic fatality reports.

10 ~~(10) Any other records necessary to conduct the review.~~ ←

11 ~~(11) Facility licensure surveys from the department's~~
12 ~~Bureau of Community Program Licensure and Certification,~~
13 ~~Division of Drug and Alcohol Program Licensure.~~

14 (10) NARCOTIC TREATMENT PROGRAM INCIDENT REPORTS. ←

15 (11) NARCOTIC TREATMENT PROGRAM LICENSURE SURVEYS FROM
16 THE PROGRAM LICENSURE DIVISION.

17 (12) ANY OTHER RECORDS NECESSARY TO CONDUCT THE REVIEW.

18 Section 7. Access to records.

19 (a) Juvenile records.--When deemed necessary for its review,
20 the team may review and inspect all files and records of the
21 court relating to a child pursuant to a proceeding under 42
22 Pa.C.S. Ch. 63 (relating to juvenile matters) in accordance with
23 42 Pa.C.S. § 6307 (relating to inspection of court files and
24 records). ~~However, this~~ THIS subsection shall not apply to files ←
25 and records of the court subject to a child fatality or near
26 fatality review pursuant to 23 Pa.C.S. Ch. 63 (relating to child
27 protective services).

28 (b) Medical records.--Notwithstanding any other provision of
29 law and consistent with the Health Insurance Portability and
30 Accountability Act of 1996 (Public Law 104-191, 110 Stat. 1936)

1 and 42 CFR Pt. 2 (relating to confidentiality of alcohol and
2 drug abuse patient records), health care facilities and health
3 care providers shall provide medical records of an individual
4 under review without the authorization of a person of interest
5 to the team for purposes of review under this act.

6 (c) Other records.--Other records pertaining to the
7 individual under review for the purposes of this act shall be
8 open to inspection as permitted by law.

9 Section 8. Confidentiality.

10 (a) Maintenance.--The team shall maintain the
11 confidentiality of any identifying information obtained relating
12 to the death of an individual or adverse incidents regarding
13 methadone, including the name of the individual, guardians,
14 family members, caretakers or alleged or suspected perpetrators
15 of abuse, neglect or a criminal act.

16 (b) Agreement.--Each member of the team and any person
17 appearing before the team shall sign a confidentiality agreement
18 applicable to all proceedings and reviews conducted by the team.

19 (c) Liability.--An individual or agency that in good faith
20 provides information or records to the team shall not be subject
21 to civil or criminal liability as a result of providing the
22 information or record.

23 (d) Discovery.--The proceedings, deliberations and records
24 of the team are privileged and confidential and shall not be
25 subject to the act of February 14, 2008 (P.L.6, No.3), known as
26 the Right-to-Know Law, discovery, subpoena or introduction into
27 evidence in any civil or criminal action.

28 (e) Meetings.--Meetings of the team at which a specific
29 death is discussed shall be closed to the public and shall not
30 be subject to the provisions of 65 Pa.C.S. Ch. 7 (relating to

1 open meetings).

2 (f) Attendance.--Nothing in this act shall prevent the team
3 from allowing the attendance of a person with information
4 relevant to a review at a methadone death and incident team
5 review meeting.

6 (g) Penalty.--A person who violates the provisions of this
7 section commits a misdemeanor of the third degree.

8 Section 9. Regulations.

9 The department shall promulgate regulations as necessary to
10 carry out the purposes of this act.

11 Section 20. Effective date.

12 This act shall take effect in 90 days.