



February 2nd, 2026

Re: PSAM's Opposition to SB 347

Dear Chair Briggs and Chair Kauffman,

On behalf of the Pennsylvania Society of Addiction Medicine (PSAM), the leading medical society representing addiction specialist physicians and clinicians in Pennsylvania, we write today to express our opposition to SB 347. This legislation would preemptively ban overdose prevention centers (OPC) throughout the state. This wholesale ban fails to consider scientific evidence or individual community needs.

OPCs, also known as safe injection facilities, are designated places where adults can use pre-obtained substances under the watchful eye of clinicians trained to intervene in the event of an overdose. With the introduction of OPCs, IV drug-related infections, such as HIV, Hepatitis B and C, and skin infections have gone down exponentially. In fact, statistical modeling forecasted Philadelphia would have 15,248 individuals diagnosed with injection drug-acquired HIV. However, after the introduction of OPCs, the number of individuals diagnosed with injection drug acquired HIV were only 4, 656, representing a potential of 10,592 (70%) of cases prevented.¹

Providing oversight and support, OPCs have proven to effectively reduce rates of fatal overdoses and other negative public health outcomes such as improper disposal of syringes utilized for IV drug injection use.^{2,3} OPCs also prove to save taxpayer money as they reduce the likelihood of emergency care.³ **Although some might worry that OPCs encourage substance use, decades of research have shown that the presence and use of OPCs significantly increase the chance of people entering treatment programs and ultimately stopping drug use⁴**

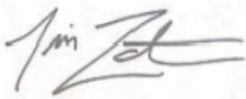
In recent years, the expansion of OPCs has been gradually gaining steam on a state and local level. In late 2021, New York City became the first municipality in the United States to legally authorize OPCs.⁵ Since then, Rhode Island and Vermont have followed suit in approving pilot OPS legislation at the state level.^{6,7} Since opening its doors, the OnPoint facility in New York City has reversed 1,900 overdoses.⁸ Additionally, leading national medical organizations such as the American Medical Association (AMA) and American Society of Addiction Medicine (ASAM) support the development of pilot OPCs in the United States.^{9,10} Both organizations acknowledge the growing body of evidence indicating the effectiveness of OPCs at reducing fatal overdoses and improving community health.

Specifically, ASAM's position emphasizes the importance of community engagement and buy-in before establishing these sites. Due to current laws in Pennsylvania, the operation of OPCs is

already illegal in Pennsylvania outside of Pittsburgh and Philadelphia. Unfortunately, SB 347 would adopt a one-size-fits-all approach to this issue. SB 347 would practically serve the purpose of banning these areas from making their own decisions about whether to implement this evidence-based form of addiction treatment. Instead of allowing localities and residents to debate the topic and determine what is best for them, SB 347 would remove a viable tool for reducing overdose deaths from the table entirely. As such, we oppose SB 347 on these grounds.

The continuing overdose crisis in Pennsylvania demands bold policy action to save lives, expand treatment, and facilitate recovery. In this fight, we must ensure that all tools are available, including establishing OPCs. **As such, we urge you to oppose SB 347 and prevent its advancement through the committee.** Thank you for your consideration, and please contact our leadership if there is any further assistance that we can provide.

Sincerely,



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