



Colorado Society of Addiction Medicine

A Chapter of American Society of Addiction Medicine

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March 6, 2024

The Honorable Lindsey Daugherty
Chair
House Committee on Health & Human Services
200 E Colfax Avenue, HCR 0112
Denver, CO 80203

Re: COSAM's Support for HB24-1028, Overdose Prevention Centers

Dear Chair Daugherty:

On behalf of the Colorado Society of Addiction Medicine (COSAM), the medical specialty society representing physicians and clinicians in Colorado specializing in the prevention and treatment of addiction, we write today in support of HB24-1028. This important legislation would allow local governing bodies to authorize the operation of overdose prevention centers. Also known as overdose prevention sites (OPS), these healthcare facilities provide a place where adults may use pre-obtained substances under the supervision of staff trained to prevent and treat overdose, prevent deaths and reduce harms from drug use (e.g., HIV, hepatitis B and C, and skin infections), as well as provide linkages to treatment and/or other services, and reduce public disorder.

Leading public health and medical organizations, such as the American Medical Association (AMA) and the American Society of Addiction Medicine (ASAM), have recognized the growing body of evidence supporting the establishment of overdose prevention centers and their potential to reduce fatal overdose death. As such, both organizations have adopted policy positions calling for the development of pilot programs establishing overdose prevention centers in the United States.^{1 2} Specifically, ASAM's policy states that "Pilot OPS should be developed and implemented in communities where there is perceived need and local support by people who use drugs (PWUD) and other community members. Pilot programs should be designed, monitored, and evaluated to generate data to inform policymakers on the feasibility, effectiveness, and legal aspects of OPS in reducing harms and health care costs related to drug use." Crucially, HB24-1028 aligns with these recommendations by enabling local jurisdictions to determine whether overdose prevention centers are in the best interest of their communities.

Overdose prevention centers can play a key role in our response to the overdose crisis. Due to recent policy developments, the evidence base supporting the implementation of OPS is evolving rapidly. In 2021, Rhode Island became the first state in the nation to enact statewide legislation authorizing a pilot program certifying OPS.³ This year, the Providence City Council unanimously approved the establishment of the first facility in their state.⁴ Additionally, the nation's first operating overdose prevention centers were opened with the support of local government in New York City's Harlem and Washington Heights neighborhoods. In roughly two years since opening, these sites have generated encouraging results. Notably, staff members have intervened to prevent over 1,000 overdoses and report that the number of discarded syringes was reduced in surrounding areas.^{5 6} Further, initial research on these sites

indicates that there was no subsequent increase in violent or property crimes in surrounding areas after their opening.⁷

The establishment of overdose prevention centers is an evidence-based policy proven to save lives and reduce the negative public health outcomes associated with drug use. **As such, COSAM strongly supports HB24-1028 and urges its advancement through the committee.** We commend the sponsors for bringing forward this important legislation. Please do not hesitate to contact me if there is any other assistance that we can provide.

Sincerely,

Stephanie Stewart MD, MPHS, FASAM

President-Elect, Colorado Society of Addiction Medicine (COSAM)

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Hannan Braun, MD, FASAM

Public Policy Liaison, COSAM

CC:

The Honorable Mary Young

The Honorable Mary Bradfield

The Honorable Brandi Bradley

The Honorable Kyle Brown

The Honorable Regina English

The Honorable Eliza Hamrick

The Honorable Tim Hernandez

The Honorable Richard Holtorf

The Honorable Sheila Lieder

The Honorable Karen McCormick

The Honorable David Ortiz

The Honorable Ron Weinberg



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March 6, 2024

The Honorable Mike Weissman
Chair

House Committee on Judiciary
200 E Colfax Avenue, RM 307
Denver, CO 80203

Re: HB24-1306: Increase Penalty Possession of Synthetic Opiates

Dear Chair Weissman:

On behalf of the Colorado Society of Addiction Medicine (COSAM), the medical specialty society representing physicians and other clinicians who specialize in the treatment of addiction, **we write to oppose HB24-1306: Increase Penalty Possession of Synthetic Opiates**. We believe that increasing criminal penalties for possession of small amounts of drugs would hurt vulnerable individuals, increase barriers to evidence-based treatments, and waste taxpayer money without impacting drug use or overdose deaths.

The bill would felonize possession of any amount of fentanyl, regardless of whether the individual was aware of fentanyl's presence in the substance. In Colorado, it already is a felony to possess more than one gram of fentanyl. Fifty years of failed drug war policies provide clear evidence that increasing penalties for possessing small amounts of drugs increases incarceration, particularly among communities of color, without reducing drug importation, use or overdose deaths. Taxpayers interested in responsible spending should be outraged by efforts to stiffen penalties for persons that use drugs, which could siphon money away from evidence-based treatment and prevention efforts in favor of supporting increasing numbers of individuals with non-violent offenses in jail.

There is no doubt that the overdose crisis deserves the attention of the Colorado General Assembly. COSAM favors an approach that invests in evidence-based interventions—rather than further criminalization. People struggling with an opioid use disorder (or those using any substance and are unaware of contamination with fentanyl in the volatile illicit drug supply) need the opportunity to seek affordable and accessible treatment whenever possible, rather than being subjected to criminalization.

We encourage lawmakers to invest in expanding access to evidence-based treatment for addiction; methadone, buprenorphine, and naltrexone are three medications approved by the Food and Drug Administration (FDA) to treat addiction. However, despite their clear benefits for persons with substance use disorders, these medications are dramatically under-utilized. Further, their access is inequitable for specific demographic groups such as Black adults, women, and people living in non-metropolitan areas. As such, we encourage lawmakers interested in addressing addiction and overdose to prioritize enhancing the availability of treatment.

As addiction-treatment professionals, **we urge the committee to oppose HB24-1306**. Please do not hesitate to contact me if there is any other assistance we can provide.

Sincerely,

Stephanie Stewart, MD, MPH, FASAM

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CC: The Honorable Jennifer Bacon

The Honorable Judy Amabile

The Honorable Ryan Armagost

The Honorable Gabe Evans

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The Honorable Leslie Herod

The Honorable Javier Mabrey

The Honorable Marc Snyder

The Honorable Matt Soper

The Honorable Steven Woodrow