

DEPARTMENT OF FINANCE BILL ANALYSIS

AMENDMENT DATE: June 28, 2011
POSITION: Neutral
SPONSOR: Drug Policy Alliance

BILL NUMBER: SB 41
AUTHOR: L. Yee
RELATED BILLS: AB 1701 (2010), AB 1858 (2010-V), SB 1159 (2004)

BILL SUMMARY: Hypodermic Needles and Syringes

This bill would repeal the Disease Prevention Demonstration Project (DPDP) authorized by current law. The DPDP allows pharmacies—when authorized by a local government—to sell up to 10 syringes to an adult without a prescription.

This bill would (1) authorize pharmacists and physicians to furnish up to 30 nonprescription syringes to an individual solely for personal use; (2) allow individuals aged 18 and older to obtain up to 30 nonprescription syringes for personal use if those items are acquired from a physician or pharmacist; and (3) allow individuals to possess up to 30 nonprescription syringes if acquired from a physician, pharmacist, hypodermic needle and syringe exchange program, or any other sources authorized by law to provide nonprescription syringes.

This bill also would require pharmacies furnishing nonprescription hypodermic needles and syringes to (1) store these items in a manner that ensures access only to authorized personnel; (2) provide consumers with specified disposal options; and (3) provide written information or verbal counseling at the time of sale regarding access to drug treatment, testing for HIV and hepatitis C, and safe disposal of sharps waste.

This bill would require the Office of AIDS (OA) within the Department of Public Health (DPH) to post information on its website regarding how to (1) access testing and treatment for HIV and viral hepatitis; (2) safely dispose of syringes and hypodermic needles and other sharps waste; and (3) access drug treatment. This bill also would require the Board of Pharmacy to post or provide a link to this same information on its website.

FISCAL SUMMARY

According to DPH, the OA would incur minor, absorbable costs (Federal Trust Fund) to post specified information on its website. The Board of Pharmacy also would likely incur minor, absorbable costs (Pharmacy Board Contingent Fund, Professions and Vocations Fund) to post or provide a link to the specified information.

In addition, the DPH estimates Local Enforcement Agencies may incur minor costs to review and approve consolidation of sharps waste if a pharmacy chooses to establish an on-site, safe, hypodermic needle and syringe collection and disposal program in a county that has implemented a medical waste management program. These costs would not be reimbursable; this bill contains a crimes and infractions disclaimer.

In counties that have chosen not to implement a medical waste program, the DPH Medical Waste Management Program assumes the enforcement authority; in these cases, the DPH would incur minor absorbable costs (Medical Waste Management Fund).

Analyst/Principal Date Program Budget Manager Date
(0553) B. Nunes Lisa Ann L. Mangat

Department Deputy Director Date

Governor's Office: By: Date: Position Approved
Position Disapproved

BILL ANALYSIS Form DF-43 (Rev 03/95 Buff)

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**COMMENT**

The Department of Finance has a neutral position on this bill because (1) any state costs resulting from this bill would be minor and absorbable within existing resources, and (2) the statutorily required report regarding the DPDP found that the program appears to be having the desired effect of augmenting access to sterile syringes to prevent transmission of HIV and other blood-borne viral infections among intravenous drug users (IDUs). The more detailed findings are listed below, following the description of the report required by current law.

**Current law**, Chapter 608, Statutes of 2004 (SB 1159), creates the DPDP allowing California pharmacies, when authorized by a local government, to sell up to 10 syringes to an adult without a prescription. According to the DPH, 15 counties and 4 cities authorized a DPDP. Current law requires the DPH to provide a report to the Legislature regarding the DPDP and the effect of nonprescription hypodermic needle or syringe sale on all of the following:

- (1) Hypodermic needle or syringe sharing practices among those who inject illegal drugs.
- (2) Rates of disease infection caused by hypodermic needle or syringe sharing.
- (3) Needlestick injuries to law enforcement officers and waste management employees.
- (4) Drug crime or other crime in the vicinity of pharmacies.
- (5) Safe or unsafe discard of used hypodermic needles or syringes.
- (6) Rates of injection of illegal drugs.

The report found that the DPDP appears to be having the desired effect of augmenting access to sterile syringes to prevent transmission of HIV and other blood-borne viral infections among IDUs. The following findings were also reported:

- Injection-mediated risks are lower among IDUs in Local Health Jurisdictions (LHJs) that have authorized access to sterile syringes through pharmacies.
- More time is required to determine the effect of SB 1159 on HIV incidence rates.
- Reported needle-stick injuries among law enforcement officers remain rare.
- Drug-related crime remained stable in LHJs that authorized DPDPs.
- Low levels of unsafe discard of used hypodermic needles or syringes were observed around DPDPs.
- Levels of injection of illegal drugs decreased among publicly funded HIV testing clients since implementation of SB 1159.

Finance notes this bill's provisions requiring pharmacies furnishing nonprescription needles and syringes to perform specified activities related to disposal, storage, and informational requirements would not apply to physicians, exchange programs, or other sources authorized to supply nonprescription syringes.

**Related Legislation:** This bill's provisions eliminate the DPDP and repeal the related sunset date of the project. AB 1701 (Chesbro) includes provisions that would extend the sunset date of the DPDP from December 31, 2010 to December 31, 2018; however, these provisions would not take effect if SB 41 is enacted.

In addition, AB 1858 (Blumenfield) includes provisions that would permit the DPH to authorize entities meeting specified requirements to provide hypodermic needle and syringe exchange services consistent with state and federal standards.

**BILL ANALYSIS/ENROLLED BILL REPORT--(CONTINUED)**

**AUTHOR**

**AMENDMENT DATE**

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Code/Department Agency or Revenue Type	SO	(Fiscal Impact by Fiscal Year)							Fund Code
	LA	(Dollars in Thousands)							
	CO	PROP							
	RV	98	FC	2010-2011	FC	2011-2012	FC	2012-2013	
4265/PublicHealth	SO	No		-----	No/Minor	Fiscal Impact	-----		0001