



**ARIZONA STATE SENATE**  
*Fifty-Fifth Legislature, First Regular Session*

FACT SHEET FOR S.B. 1250

overdose; disease prevention; programs

Purpose

Establishes overdose and disease prevention programs (prevention programs) and outlines prevention program objectives, offerings and requirements.

Background

The U.S. Centers for Disease Control and Prevention (CDC) provides an outline for syringe services programs (SSPs), also known as needle exchange programs. SSPs are community-based programs that provide access to sterile needles and syringes, facilitate safe disposal of used syringes and provide services such as treatment and screening programs, care for viral hepatitis and human immunodeficiency virus (HIV), overdose prevention education and referral to other services. According to the CDC, implementation of prevention programs, such as SSPs, is at the discretion of state and local governments ([CDC](#)).

The U.S. Department of Health and Human Services (U.S. HHS) has published guidelines for the implementation of prevention programs, such as SSPs. According to the U.S. HHS, comprehensive prevention programs should include: 1) the provision and disposal of sterile needles, syringes and other drug preparation equipment; 2) education and counseling on reducing risk; 3) referral and linkage to treatment and care; and 4) collaboration with local agencies, organizations and providers ([U.S. HHS](#)).

There is no anticipated fiscal impact to the state General Fund associated with this legislation.

Provisions

1. Allows cities, towns, counties and nongovernmental organizations that promote proven ways of mitigating health risks associated with drug use to establish and operate a prevention program.
2. Requires a prevention program to include the following objectives:
  - a) reducing the spread of viral hepatitis, HIV and other bloodborne diseases in Arizona;
  - b) reducing needle-stick injuries to law enforcement officers and emergency personnel;
  - c) encouraging individuals who inject drugs to enroll in evidence-based treatment;
  - d) increasing the proper disposal of used syringes; and
  - e) reducing skin and soft tissue wounds and infections related to drug injections.
3. Requires a prevention program to offer the following:
  - a) disposal of used needles and hypodermic syringes;
  - b) needles, hypodermic syringes and other injection-supply items at no cost in quantities sufficient to ensure supply items are not shared or reused;

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- c) access to kits containing naloxone hydrochloride or other opioid antagonists approved by the Food and Drug Administration to treat a drug overdose, or referrals to programs that provide access to approved opioid antagonists;
  - d) upon request, personal consultations from a program employee or volunteer on mental health or substance use disorder treatment, or a treatment referral; and
  - e) educational materials on:
    - i. overdose prevention;
    - ii. peer support services;
    - iii. the prevention of HIV, viral hepatitis transmission and skin and soft tissue wounds and infections;
    - iv. treatment for mental illness, including treatment referrals; and
    - v. treatment for substance use disorder, including treatment referrals.
4. Requires prevention programs to develop standards for distributing and disposing of needles and hypodermic syringes based on scientific evidence and best practices.
  5. Requires that prevention programs dispose of at least as many needles and hypodermic syringes as the amount distributed.
  6. Prohibits a prevention program employee or volunteer from being charged or prosecuted for possession of a needle, hypodermic syringe or other injection-supply item or a residual amount of a controlled substance contained in an injection-supply item, contingent upon verification that the item was obtained from a prevention program.
  7. Becomes effective on the general effective date.

Prepared by Senate Research

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