

GENERAL ASSEMBLY OF NORTH CAROLINA  
SESSION 2025

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SENATE BILL DRS35226-MGfa-97

Short Title: The STRONG Act of 2025.

(Public)

Sponsors: Senators Bradley, Smith, and Everitt (Primary Sponsors).

Referred to:

A BILL TO BE ENTITLED

AN ACT ENACTING THE "STOPPING TRAFFICKING AND REINFORCING OPIOID AND NARCOTICS GUARDRAILS (S.T.R.O.N.G.) ACT" TO PROVIDE FOR A COMPREHENSIVE STATEWIDE RESPONSE TO THE FENTANYL CRISIS BY INCREASING PENALTIES FOR CERTAIN DRUG TRAFFICKERS, CERTAIN DEATH BY DISTRIBUTION OFFENSES, AND FOR TRAFFICKING NEAR SCHOOLS AND CERTAIN OTHER PUBLIC PLACES; ENHANCING LAW ENFORCEMENT TRAINING AND RESOURCES; UPGRADING AND EXPANDING THE CONTROLLED SUBSTANCES REPORTING SYSTEM; EXPANDING OPIOID USE DISORDER PREVENTION, TREATMENT AND RECOVERY PROGRAMS; APPROPRIATING FUNDS FOR THESE PURPOSES; AND CREATING A TAX CREDIT FOR BUSINESSES THAT HIRE EMPLOYEES WHO SUCCESSFULLY COMPLETE SUBSTANCE USE DISORDER TRAINING.

The General Assembly of North Carolina enacts:

**PART I. TITLE**

**SECTION 1.1.** This act shall be known as "The STRONG Act of 2025."

**PART II. FINDINGS AND PURPOSE**

**SECTION 2.1.** The General Assembly makes the following findings of fact:

- (1) North Carolina is experiencing a severe opioid crisis, with fentanyl and synthetic opioids contributing to record-high overdose deaths.
- (2) The State lacks comprehensive measures to address substance use disorder prevention, rehabilitation, and treatment access, particularly in rural and underserved communities.
- (3) The Controlled Substances Reporting System (CSRS) has been effective in tracking prescription drug abuse, but it must be expanded to monitor additional substances.
- (4) Medical cannabis has been shown to provide relief for chronic pain, Post Traumatic Stress Disorder, and seizure disorders. North Carolina should implement a tightly regulated Medical Cannabis Pilot Program.
- (5) Law enforcement lacks sufficient resources and training to handle synthetic opioids safely and to combat cartel-driven drug trafficking.
- (6) A public education campaign is needed to raise awareness about fentanyl risks, treatment options, and drug prevention.



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**PART III. INCREASED PENALTIES FOR TRAFFICKING IN OPIUM, OPIATES, OPIOIDS, OR HEROIN****SECTION 3.1.(a)** G.S. 90-95(h)(4) reads as rewritten:

"(4) Any person who sells, manufactures, delivers, transports, or possesses four grams or more of opium, opiate, or opioid, or any salt, compound, derivative, or preparation of opium, opiate, or opioid (except apomorphine, nalbuphine, analoxone and naltrexone and their respective salts), including heroin, or any mixture containing such substance, shall be guilty of a felony which felony shall be known as "trafficking in opium, opiate, opioid, or heroin" and if the quantity of such controlled substance or mixture involved:

a. Is ~~four~~two grams or more, but less than 14 grams, such person shall be punished as a Class ~~FE~~ felon and shall be sentenced to a minimum term of ~~70~~90 months and a maximum term of ~~93~~120 months in the State's prison and shall be fined as follows:

1. A fine of ~~five~~two hundred ~~thirty~~five thousand dollars (~~\$500,000~~)(\$250,000) if the controlled substance is heroin, fentanyl, or carfentanil, or any salt, compound, derivative, or preparation thereof, or any mixture containing any of these substances.

2. A fine of not less than fifty thousand dollars (\$50,000) for any controlled substance described in this subdivision and not otherwise subject to sub-sub-subdivision 1. of this sub-subdivision.

b. Is 14 grams or more, but less than 28 grams, such person shall be punished as a Class ~~ED~~ felon and shall be sentenced to a minimum term of ~~90~~180 months and a maximum term of ~~120~~225 months in the State's prison and shall be fined as follows:

1. A fine of ~~seven~~five hundred ~~thirty~~five thousand dollars (~~\$750,000~~)(\$500,000) if the controlled substance is heroin, fentanyl, or carfentanil, or any salt, compound, derivative, or preparation thereof, or any mixture containing any of these substances.

2. A fine of not less than one hundred thousand dollars (\$100,000) for any controlled substance described in this subdivision and not otherwise subject to sub-sub-subdivision 1. of this sub-subdivision.

c. Is 28 grams or more, such person shall be punished as a Class ~~EB1~~ felon and shall be sentenced to a minimum term of ~~225 months and a maximum term of 282 months~~life imprisonment without parole in the State's prison and shall be fined as follows:

1. A fine of ~~one~~two million dollars (~~\$1,000,000~~)(\$2,000,000) if the controlled substance is heroin, fentanyl, or carfentanil, or any salt, compound, derivative, or preparation thereof, or any mixture containing any of these substances.

2. A fine of not less than five hundred thousand dollars (\$500,000) for any controlled substance described in this subdivision and not otherwise subject to sub-sub-subdivision 1. of this sub-subdivision.

Subject to any applicable State law, federal law, or constitutional requirements, a law enforcement agency investigating an offense under this subdivision may intercept, endeavor to intercept, or procure any other person

to intercept or endeavor to intercept, any wire, oral, or electronic communication."

SECTION 3.1.(b) This section becomes effective December 1, 2025, and applies to offenses committed on or after that date.

INCREASED PENALTIES FOR CERTAIN DEATH BY DISTRIBUTION OFFENSES

SECTION 3.2.(a) G.S. 14-18.4(h) reads as rewritten:

"(h) Penalties. – Unless the conduct is covered under some other provision of law providing greater punishment, the following classifications apply to the offenses set forth in this section:

- (1) A violation of subsection (a1) of this section is a Class C felony.
(1a) A violation of subsection (a2) or (b) of this section is a Class B2B1 felony.
(2) A violation of subsection (c) of this section is a Class B1A felony."

SECTION 3.2.(b) This section becomes effective December 1, 2025, and applies to offenses committed on or after that date.

INCREASED PENALTIES FOR TRAFFICKING IN OPIUM, OPIATES, OPIOIDS, OR HEROIN NEAR SCHOOLS AND CERTAIN OTHER PUBLIC PLACES

SECTION 3.3.(a) G.S. 90-95(e) reads as rewritten:

"(e) The prescribed punishment and degree of any offense under this Article shall be subject to the following conditions, but the punishment for an offense may be increased only by the maximum authorized under any one of the applicable conditions:

- ...
(11) Any person 21 years of age or older who commits an offense under G.S. 90-95(h)(4) on property used for a child care center, or for an elementary or secondary school, or for a playground, or within 1,500 feet of the boundary of real property used for a child care center, an elementary or secondary school, or a playground, shall be punished as a Class B1 felon. For purposes of this subdivision, the term "child care center" is as defined in subdivision (8) of this subsection.
(12) Any person 21 years of age or older who commits an offense under G.S. 90-95(h)(4) on property used for a public park, shopping mall, or transit station, or within 1,500 feet of the boundary of real property used for a public park, shopping mall, or transit station, shall have the minimum term of imprisonment to which the person is sentenced for that felony increased by 60 months."

SECTION 3.3.(b) This section becomes effective December 1, 2025, and applies to offenses committed on or after that date.

PART IV. LAW ENFORCEMENT TRAINING AND RESOURCES

FUND STATE BUREAU OF INVESTIGATION DRUG TASK FORCE

SECTION 4.1.(a) There is appropriated from the General Fund to the State Bureau of Investigation the sum of ten million dollars (\$10,000,000) in recurring funds for the 2025-2026 fiscal year to be used to support and expand its Drug Task Force.

SECTION 4.1.(b) This section becomes effective July 1, 2025.

ESTABLISH STATE AND FEDERAL DRUG INTERDICTION TASK FORCE

SECTION 4.2. Article 5 of Chapter 90 of the General Statutes is amended by adding a new section to read:

"§ 90-95.2A. Establish State and Federal Drug Interdiction Task Force.

1 (a) Task Force Established. – There is established the State and Federal Drug Interdiction  
2 Task Force within the Department of Public Safety.

3 (b) Membership. – The Task Force shall consist of 9 members. The composition of the  
4 Task Force shall include the following members:

5 (1) The Secretary of the Department of Public Safety or the Secretary's designee.

6 (2) The Director of the State Bureau of Investigation or the Director's designee.

7 (3) The Commander of the State Highway Patrol or the Commander's designee.

8 (4) The Chairman of the North Carolina Sheriffs' Association or the Chairman's  
9 designee.

10 (5) The President of the North Carolina Association of Chiefs of Police or the  
11 President's designee.

12 (6) The Executive Director of the North Carolina Conference of District attorneys  
13 or the Executive Director's designee.

14 (7) At the invitation of the State, the Administrator of the United State Drug  
15 Enforcement Administration or the Administrator's designee. This member  
16 shall be a nonvoting member.

17 (8) At the invitation of the State, the Director of United States Immigration and  
18 Customs Enforcement or the Director's designee. This member shall be a  
19 nonvoting member.

20 (9) At the invitation of the State, the Chief of the United States Border Patrol or  
21 the Chief's designee. This member shall be a nonvoting member.

22 (c) Purpose. – The purpose of the Task Force is to encourage and effectuate collaboration  
23 between State and federal entities for the interdiction of illegal controlled substances within the  
24 State of North Carolina.

25 (d) Chair; Meetings; Quorum. – The members shall elect a chair, and the Task Force shall  
26 meet at the call of the chair. A majority of the Task Force shall constitute a quorum for the  
27 transaction of its business.

28 (e) Per Diem, Travel, and Expenses. – Members of the Task Force shall receive per diem  
29 and necessary travel and subsistence expenses in accordance with G.S. 120-3.1, 138-5, and  
30 138-6, as applicable.

31 (f) Report. – No later than March 1 of each year, the Task Force shall report to the Joint  
32 Legislative Oversight Committee on Justice and Public Safety any findings, legislative proposals,  
33 or other information the Task Force determines would aid State and federal law enforcement  
34 officers and agencies in the interdiction of illegal controlled substances within the State of North  
35 Carolina.

36  
37 **REQUIRE MANDATORY OPIOID DETECTION TRAINING FOR ALL LAW**  
38 **ENFORCEMENT OFFICERS**

39 **SECTION 4.3.(a)** G.S. 17C-6(a) reads as rewritten:

40 **"§ 17C-6. Powers of Commission.**

41 (a) In addition to powers conferred upon the Commission elsewhere in this Article, the  
42 Commission shall have the following powers, which shall be enforceable through its rules and  
43 regulations, certification procedures, or the provisions of G.S. 17C-10:

44 ...

45 (14) Establish minimum standards for in-service training for criminal justice  
46 officers. In-service training standards for sworn law enforcement officers shall  
47 include all of the following training topics:

48 ...

49 j. Opioid detection.

50 ...."

51 **SECTION 4.3.(b)** G.S. 17E-4(a) reads as rewritten:

1 **"§ 17E-4. Powers and duties of the Commission.**

2 (a) The Commission shall have the following powers, duties, and responsibilities, which  
3 are enforceable through its rules and regulations, certification procedures, or the provisions of  
4 G.S. 17E-8 and G.S. 17E-9:

5 ...

6 (11) Establish minimum standards for in-service training for justice officers.  
7 In-service training standards for sworn law enforcement officers shall include  
8 all of the following training topics:

9 ...

10 j. Opioid detection.

11 ...."

12 **SECTION 4.3.(c)** This section becomes effective January 1, 2026, and applies to  
13 in-service training occurring on or after that date.

14  
15 **PART V. CONTROLLED SUBSTANCES REPORTING SYSTEM EXPANSION AND**  
16 **UPGRADES**

17 **SECTION 5.1.(a)** G.S. 90-113.73 reads as rewritten:

18 **"§ 90-113.73. Requirements for controlled substances reporting system; civil penalties for**  
19 **failure to properly report.**

20 ...

21 (b) The Commission shall adopt rules requiring dispensers to report the following  
22 information. The Commission may modify these requirements as necessary to carry out the  
23 purposes of this Article. The dispenser shall report:

24 (1) The dispenser's DEA number for prescriptions of controlled substances, and  
25 for prescriptions of gabapentin, xylazine, and nitazenes whether the dispenser  
26 has a DEA number.

27 (2) The name of the patient for whom the controlled substance is being dispensed,  
28 and the patient's:

29 a. Full address, including city, state, and zip code.

30 b. Telephone number.

31 c. Date of birth.

32 (3) The date the prescription was written.

33 (4) The date the prescription was filled.

34 (5) The prescription number.

35 (6) Whether the prescription is new or a refill.

36 (7) The metric quantity of the dispensed drug.

37 (8) The estimated days of supply of dispensed drug, if provided to the dispenser.

38 (9) The National Drug Code of dispensed drug.

39 (10) The prescriber's DEA number for prescriptions of controlled substances, and  
40 for prescriptions of gabapentin, xylazine, and nitazenes if the prescriber has a  
41 DEA number and the number is known by the dispenser.

42 (10a) The ~~prescriber's~~ prescriber's national provider identification number, for any  
43 prescriber that has a national provider identification number. A pharmacy  
44 shall not be subject to a civil penalty under subsection (e) of this section for  
45 failure to report the prescriber's national provider identification number when  
46 it is not received by the pharmacy.

47 (11) The method of payment for the prescription.

48 (c) A dispenser shall not be required to report instances in which a controlled substance,  
49 or gabapentin, ~~is~~ xylazine, or nitazenes are provided directly to the ultimate user and the quantity  
50 provided does not exceed a 48-hour supply.

1 (c1) A dispenser shall not be required to report gabapentin to the controlled substances  
 2 reporting system when ~~gabapentin is gabapentin, xylazine, or nitazenes~~ are a component of a  
 3 compounded prescription that is dispensed in dosages of 100 milligrams or less.

4 (d) A dispenser shall not be required to report instances in which a Schedule V  
 5 non-narcotic, non-anorectic Schedule V controlled substance is provided directly to the ultimate  
 6 user for the purpose of assessing a therapeutic response when prescribed according to indications  
 7 approved by the United States Food and Drug Administration.

8 ...

9 (f) For purposes of this section, a "dispenser" includes a person licensed to practice  
 10 veterinary medicine pursuant to Article 11 of Chapter 90 of the General Statutes when that person  
 11 dispenses any Schedule II through V controlled substance or ~~gabapentin-gabapentin, xylazine, or~~  
 12 ~~nitazenes~~. Notwithstanding subsection (b) of this section, the Commission shall adopt rules  
 13 requiring the information to be reported by a person licensed to practice veterinary medicine  
 14 pursuant to Article 11 of Chapter 90 of the General Statutes.

15 ...."

16 **SECTION 5.1.(b)** This section becomes effective December 1, 2025, and applies to  
 17 acts occurring on or after that date.

18 **SECTION 5.2.** Effective July 1, 2025, there is appropriated from the General Fund  
 19 to the Division of Mental Health, Developmental Disabilities, and Substance Use Services  
 20 (DMH/DD/SUS), the sum of three million five hundred thousand dollars (\$3,500,000) in  
 21 nonrecurring funds for the 2025-2026 fiscal year to upgrade data analytics and automation within  
 22 the Controlled Substances Reporting System.

23 **SECTION 5.3.** The DMH/DD/SUS shall work towards connecting the Controlled  
 24 Substances Reporting System to federal data sharing networks through data sharing agreements  
 25 with federal agencies to track cross-border drug trafficking trends. The DMH/DD/SUS shall  
 26 submit a progress report on the status of its work under this section to the Joint Legislative  
 27 Oversight Committee on Health and Human Services and the Fiscal Research Division by  
 28 December 1, 2025.

29  
 30 **PART VI. APPROPRIATIONS FOR OPIOID USE DISORDER EDUCATION,  
 31 PREVENTION, TREATMENT, AND RECOVERY SERVICES**

32 **SECTION 6.1.** Effective July 1, 2025, there is appropriated from the General Fund  
 33 to the DMH/DD/SUS the sum of thirty-five million dollars (\$35,000,000) in nonrecurring funds  
 34 for the 2025-2026 fiscal year to be allocated and used as follows:

- 35 (1) Fentanyl Overdose Education and Prevention. – Five million dollars  
 36 (\$5,000,000) to do all of the following:
  - 37 a. To conduct a statewide public awareness campaign targeting fentanyl  
 38 overdose prevention. These campaigns shall include, at a minimum,  
 39 public service announcements, billboards, and social media campaigns  
 40 focused on fentanyl overdose prevention.
  - 41 b. To purchase naloxone for local health departments to distribute free of  
 42 charge to community groups and schools. Local health departments  
 43 that are recipients of these funds shall provide training free of charge  
 44 to the community groups and schools that are recipients of the  
 45 naloxone funded by this section.
  - 46 c. To create a web page that publishes overdose data in real-time and  
 47 notifies the public about available treatment options and resources.
- 48 (2) Expansion of State-Funded Medication-Assisted Treatment Programs. –  
 49 Fifteen million dollars (\$15,000,000) to do all of the following:

- 1 a. To expand State-funded medication-assisted treatment programs
- 2 throughout the State, with priority given to programs located in rural
- 3 or underserved counties experiencing high overdose rates.
- 4 b. To provide grants to counties for the purchase of mobile opioid
- 5 treatment units to be used to provide screening, assessment, treatment,
- 6 primary care, and recovery support services. In awarding grants
- 7 authorized by this subdivision, the DMH/DD/SUS shall give priority
- 8 to counties with the greatest shortage of medication-assisted treatment
- 9 providers.
- 10 c. To transfer funds to the Department of Justice to provide individuals
- 11 who are incarcerated with access to medication-assisted treatment
- 12 utilizing a medication approved by the United States Food and Drug
- 13 Administration for opioid use disorder.
- 14 (3) Expansion of Community-Based Rehabilitation Programs. – Eight million
- 15 dollars (\$8,000,000) to do both of the following:
- 16 a. To provide directed grants on a competitive basis to charitable,
- 17 faith-based organizations, nonprofit organizations, and other
- 18 community-based organizations for the delivery or expansion of
- 19 opioid use disorder treatment and recovery programs or services.
- 20 b. It is the intention of the General Assembly to establish a certification
- 21 process for charitable, nonprofit, faith-based rehabilitation centers for
- 22 individuals with opioid use disorder and other substance use disorders.
- 23 To that end, the DMH/DD/SUS may use up to two percent (2%) of the
- 24 funds authorized by this subdivision to study and develop
- 25 recommendations on this issue. By May 1, 2026, the DMH/DD/SUS
- 26 shall report its findings and recommendations to the Joint Legislative
- 27 Oversight Committee on Health and Human Services and the Fiscal
- 28 Research Division. The DMH/DD/SUS shall not implement a
- 29 certification process for charitable, nonprofit, faith-based
- 30 rehabilitation centers without an act of the General Assembly.
- 31 (4) Rural Drug Crisis Response. – Seven million dollars (\$7,000,000) to be used
- 32 to increase the number of mobile treatment clinics and to expand access to
- 33 telehealth addiction counseling services in rural areas of the State.
- 34

**PART VII. TAX CREDIT FOR BUSINESSES THAT HIRE EMPLOYEES WHO SUCCESSFULLY COMPLETE SUBSTANCE USE DISORDER TRAINING**

**SECTION 7.1.(a)** Article 4 of Chapter 105 of the General Statutes is amended by adding a new section to read:

**"§ 105-153.12. Substance use recovery tax credit.**

- 40 (a) Definitions. – The following definitions apply in this section:
- 41 (1) Eligible business. – An employer that pays fair market wages to an eligible
- 42 employee for the requisite duration.
- 43 (2) Eligible employee. – An individual who (i) has been an employee of an
- 44 eligible business for the requisite duration and (ii) has successfully completed
- 45 substance use disorder counseling with a qualifying provider.
- 46 (3) Employee. – As defined in G.S. 105-163.1
- 47 (4) Employer. – As defined in G.S. 105-163.1.
- 48 (5) Individual. – As defined in G.S. 105-163.1.
- 49 (6) Pass-through entity. – A partnership, an S-corporation, or a limited liability
- 50 company subject to income tax under Part 1A or Part 2 of Article 4 of Chapter
- 51 105 of the General Statutes.

1           (7)   Qualifying provider. – A substance use disorder counseling provider  
2           registered, certified, or licensed under Article 5C of Chapter 90 of the General  
3           Statutes.

4           (8)   Requisite duration. – A period of time not less than eight months per calendar  
5           year.

6           (9)   Substance abuser. – As defined in G.S. 122C-3.

7           (10)  Substance use disorder counseling. – As defined in G.S. 90-113.31A.

8           (11)  Taxable year. – As defined in G.S. 105-163.1.

9           (12)  Wages. – As defined in G.S. 105-163.1.

10        (b)   Credit. – A taxpayer that is an eligible business is entitled to a nonrefundable income  
11        tax credit against the taxes imposed by Part 1, Part 1A, or Part 2 of Article 4 of Chapter 105 of  
12        the General Statutes, as appropriate, equal to two thousand five hundred dollars (\$2,500) per  
13        eligible employee of the eligible business.

14        (c)   Allocation. – This subsection applies to eligible businesses that are pass-through  
15        entities. Each individual who is a shareholder, partner, or member of an eligible business that is  
16        a pass-through entity must be allocated the credit allowed the entity in an amount determined in  
17        the same manner as the proportionate shares of income or loss of such entity would be  
18        determined. The entity must make an irrevocable election with the Department of Revenue as to  
19        the manner in which the credit is allocated. If an individual's share of the pass-through entity's  
20        credit is limited due to the maximum allowable credit under this section for a taxable year, the  
21        entity and its owners may not reallocate the unused credit among the other owners.

22        (d)   Limitation. – The credit allowed under this section per eligible business shall not  
23        exceed fifty thousand dollars (\$50,000) per taxable year.

24        (e)   Substantiation. – A taxpayer allowed a credit under this section must maintain and  
25        make available for inspection any information or records required by the Secretary of Revenue.  
26        The burden of proving eligibility for a credit under this section rests upon the taxpayer. The  
27        taxpayer must obtain and submit documentation from the qualifying provider verifying that the  
28        eligible employee has successfully completed substance use disorder counseling; provided,  
29        however, that an eligible employee may disclose, but shall not be required to disclose, any  
30        protected health information protected by State or federal law."

31           **SECTION 7.1.(b)** This act is effective for taxable years beginning on or after January  
32        1, 2025.

### 33        **PART VIII. EFFECTIVE DATE**

34           **SECTION 8.1.** Except as otherwise provided, this act is effective when it becomes  
35        law.  
36