



**TESTIMONY IN SUPPORT OF
HD.4607, AN ACT MODERNIZING FIREARMS LAWS
BEFORE THE HOUSE COMMITTEE ON WAYS AND MEANS &
HOUSE MEMBERS OF THE JOINT COMMITTEE ON THE JUDICIARY
OCTOBER 10, 2023**

The Massachusetts Medical Society (MMS) is a professional association of over 25,000 physicians, residents, and medical students across all clinical disciplines, organizations, and practice settings. The Medical Society is committed to advocating on behalf of patients, to provide them a better health care system, and on behalf of physicians, to help them provide the best care possible. On behalf of our patients across the Commonwealth whose lives have been forever changed or tragically cut short by brutal yet preventable acts of gun violence, **we wish to be recorded in support of HD.4607, *An Act Modernizing Firearms Laws***, which aligns with several of our firearm-related policies intended to keep our patients safe.

Gun violence is a public health emergency, and as with other public health areas, evidence-based interventions are needed for reducing injuries and deaths. According to the Centers for Disease Control and Prevention (CDC), 48,830 people died from gun-related injuries in the United States in 2021, the most recent year for which complete data is available.¹ This figure includes gun suicides, gun homicides, and accidental shootings. The data indicate that firearms fatalities are increasing, and disparities are widening with youth, males, and Black individuals experiencing the highest firearm homicide rates.² The daily carnage from firearms does not need to be our reality—overwhelming evidence clearly shows that strong gun laws can and do prevent gun violence.³ No where in the country is the causal relationship between strong gun laws and

¹ Gramlich, J. (2023, April 26). *What the data says about gun deaths in the U.S.* Pew Research Center. <https://www.pewresearch.org/short-reads/2023/04/26/what-the-data-says-about-gun-deaths-in-the-u-s/>

² Gramlich, J. (2023, April 26). *What the data says about gun deaths in the U.S.* Pew Research Center. <https://www.pewresearch.org/short-reads/2023/04/26/what-the-data-says-about-gun-deaths-in-the-u-s/>

³ *Gun safety policies save lives.* Everytown Research & Policy. (2023, May 8). <https://everytownresearch.org/rankings/>

gun violence rates more evident than here in the Commonwealth. Massachusetts ranks among the states with the strongest gun laws, while experiencing the least amount of gun violence per capita in the entire country.⁴ The Commonwealth has prioritized gun safety in our laws by requiring background checks for all gun sales, enhancing regulations around licenses to carry, establishing restrictions on firearm ownership by dangerous individuals and more. While Massachusetts has made great strides to curb gun violence, we are not immune to this epidemic. In an average year, 255 people die and 688 are wounded by guns in Massachusetts.⁵ Gun deaths and injuries cost our state \$2 billion, of which \$92 million is paid by taxpayers.⁶ Though they tend to get less public attention than gun homicides, suicides have long accounted for the majority of U.S. gun deaths. In Massachusetts, 56% of gun fatalities are suicides.⁷ If passed, HD.4607 will enact commonsense measures to reduce the toll of firearm-related violence on our patients and communities.

The MMS was proud to support the passage of the Commonwealth's Extreme Risk Protective Order (ERPO) law in 2018 that allows law enforcement, family or household members, and/or intimate partners to petition the court to temporarily remove firearms from high-risk individuals through due process. Research shows that ERPO laws are a valuable gun violence prevention tool that can save lives.⁸ HD.4607 expands the list of eligible petitioners who can initiate ERPOs to include physicians and other health care providers. The MMS encourages physicians and health care providers to review firearm safety as a routine component of preventive care and supports the right of physicians to discuss gun ownership and storage of firearms with their patients. Allowing physicians to petition the courts when they encounter a patient at risk of gun violence could help prevent further firearm-related tragedies. Moreover, the MMS is grateful for the inclusion of new language in this revised bill to protect all ERPO petitioners— including physicians – from civil and criminal liability.

⁴ *Gun safety policies save lives*. Everytown Research & Policy. (2023, May 8).

<https://everytownresearch.org/rankings/>

⁵ Gun violence in Massachusetts - everystat.org. (n.d.). <https://everystat.org/wp-content/uploads/2019/10/Gun-Violence-in-Massachusetts.pdf>

⁶ Gun violence in Massachusetts - everystat.org. (n.d.). <https://everystat.org/wp-content/uploads/2019/10/Gun-Violence-in-Massachusetts.pdf>

⁷ Gun violence in Massachusetts - everystat.org. (n.d.). <https://everystat.org/wp-content/uploads/2019/10/Gun-Violence-in-Massachusetts.pdf>

⁸ Research on extreme risk protection orders - johns hopkins bloomberg ... (n.d.-b).

<https://publichealth.jhu.edu/sites/default/files/2023-02/research-on-extreme-risk-protection-orders.pdf>

The Medical Society has proposed and appreciates the opportunity to continue working with your offices in consideration of additional language to address patient privacy and ensure that the disclosure of protected health information is limited to the minimum necessary for ERPO petitions. We believe that such language will sufficiently address our members' concerns relative to confidentiality and patient privacy, thus increasing the likelihood that physicians will voluntarily initiate this common-sense safety intervention that can prevent their patients in crisis from harming themselves or others. Notably, the language authorizing health care providers as ERPO petitioners requires the provider to have treated the respondent within the last 6 months. This could potentially be limiting in instances where a patient is the victim of domestic violence, and the physician may wish to file a petition against a gun-owning partner who is not their patient. Under the existing language in HD.4607, they would not be eligible to file, even though they may have a good faith concern that the respondent may pose a risk of causing bodily harm to the patient.

The MMS has adopted a number of policies in support of reducing the numbers of deaths and injuries attributable to guns, including making firearm ownership safer and prohibiting the sale and/or possession of assault weapons and ghost guns. To those ends, we also support the following provisions included in HD.4607:

- Standardizing training requirements for individuals seeking a firearms license to include demonstrated competency in the use of firearms through class participation, written examination, and live firearms training;
- Requiring privately made firearms to be registered and have a unique serial number; and
- Updating the existing assault-weapons ban, including through a more detailed definition of "assault-style" weapons.

Thank you for your consideration of our comments on HD.4607, *An Act Modernizing Firearms Laws*. We look forward to continuing to work with you on addressing this public health emergency and urge all legislators to be cognizant of the irrefutable fact that actions to protect our patients from injury and death cannot wait.