



Testimony on HB 408
Statewide Targeted Overdose Prevention (STOP) Act of 2022
House Health and Government Operations Committee
February 16, 2022
POSITION: SUPPORT WITH AMENDMENTS

The Community Behavioral Health Association of Maryland (CBH) is the leading voice for community-based providers serving the mental health and addiction needs of vulnerable Marylanders. Our 95 members serve the majority of those accessing care through the public behavioral health system. CBH members provide outpatient and residential treatment for mental health and addiction-related disorders, day programs, case management, Assertive Community Treatment (ACT), employment supports, and crisis intervention.

Our members provide intensive outpatient (IOP) services for those with opioid addiction or other substance use disorders. We support this effort to address the spiking overdose mortality rates in Maryland by supplying free naloxone to the individuals we serve in our IOP programs. However, it is important that these programs – and the others listed in this bill – also have free access to naloxone to avoid imposing a financial hardship on them.

Our conversations with the Administration indicate that the plan is to provide free naloxone to the programs listed in HB 408 through the Center for Harm Reduction. We believe it is important to specify this through amendment language. We know from experience that drug prices often rise when statute requires that a drug be made available to certain populations. According to a recent article in The Guardian, “harm reduction groups used to buy naloxone from Pfizer to create kits that cost about \$2.50 each. Now they have to pay \$37 for a different generic medication or \$75 for Narcan – a 15- to 30-fold increase.” Our providers also note that naloxone has a shelf life and must be replenished as it expires. We are happy to work with this Committee and the Administration to draft language ensuring that naloxone will be supplied free of charge to the programs mandated to supply it free of charge to their clients.

We urge a favorable report on HB 408 with this or similar amendment language:

On p. 4, after line 5, insert: (C) COMMUNITY SERVICES PROGRAMS SHALL HAVE SUFFICIENT ACCESS TO NALOXONE, FREE OF CHARGE, FROM THE MARYLAND CENTER FOR HARM REDUCTION OR OTHER STATE AGENCY, TO DISTRIBUTE TO INDIVIDUALS SERVED BY THE COMMUNITY SERVICES PROGRAMS.

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