



**House Judiciary Committee**  
**Correctional Services – Medication Assisted Treatment**  
**March 7, 2024**  
**Support with Amendment of House Bill 1031**

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**2023 - 2025**

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The Maryland Association for the Treatment of Opioid Dependence (MATOD) is a provider and advocacy organization comprised of over 60 healthcare organizations from across the State.

MATOD strongly supported HB 116 in 2019, which established MAT for incarcerated individuals with OUD with one of the three FDA-approved medications for the treatment of OUD, as well as addiction assessments, counseling, Peer services and re-entry support.

Numerous published studies have documented the life-saving benefits of MAT for OUD during incarceration (referred to as MOUD), including a 61% reduction in overdose mortality after release from Rhode Island Department of Corrections MAT programs, as well as a 61% decrease in overdose deaths after re-entry from the California Department of Corrections and Rehabilitation.

SAMHSA reports additional studies that determined positive outcomes associated with MOUD during incarceration including fewer incarceration days, fewer disciplinary behaviors during incarceration and decreased recidivism post-release. Upon re-entry, MOUD during incarceration is associated with decreased illicit drug use, decreased overdoses and increased engagement and retention in community-based MAT.

MATOD supports this bill only with the sponsor's amendments. First and foremost, the brackets repealing the FDA-approved medication mandate must be deleted. Those brackets and the removal of the medication mandate defeat the purpose and benefits of the 2019 law. We have no objection to the amendment that clarifies that partial opioid agonists can be transmucosal or long-acting. While we believe that the language in the existing law does not prohibit any specific MOUD formulation, we can support the amendment's clarification.

In addition, MATOD requests an additional amendment that would require local detention centers to examine their health care contracts for inclusion of these services as part of their provision of health care services to people in their custody. Substance use disorder treatment is health care and not extra or optional service. The State and local governments should work toward including Substance Use Disorder services and their costs into their health care contracts. We respectfully request the following Amendment No. 1 on page 11, line 1 by inserting the following:

SECTION 2, AND BE IT FURTHER ENACTED, That facilities shall certify to the Department that they are in health care contracts that include the provision of medication assisted treatment for opioid use disorders and any related counseling, medical and peer services by July 1, 2027. The Department of Health shall provide technical assistance to ensure facilities have the required contracts.

**Provided the sponsor's amendment removes the brackets repealing the FDA-approved medication mandate, and considers the above Amendment No.1, MATOD urges a favorable report for House Bill 1031.**

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*MATOD members include community and hospital based Opioid Treatment Programs, local Health Departments, local Addiction and Behavioral Health Authorities and Maryland organizations that support evidence-based Medication Assisted Treatment. MATOD members include thousands of highly trained and dedicated addiction counselors, clinical social workers, physicians, nurse practitioners, physician assistants, nurses, peer recovery specialists and dedicated staff who work every day to save and transform lives.*