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TO: The Honorable Shane E. Pendergrass, Chair

Members, House Health and Government Operations Committee

FROM: Pamela Metz Kasemeyer

> J. Steven Wise Danna L. Kauffman

DATE: March 16, 2017

RE: **SUPPORT** – House Bill 1549 – *Public Health* – *Drug Overdose Prevention Programs* – *Revisions* 

The Maryland State Medical Society (MedChi) and the Mid-Atlantic Association of Community Health Centers (MACHC) submit this letter of **support** for House Bill 1549.

House Bill 1549 is a departmental bill that reflects three initiatives designed to strengthen current overdose prevention efforts. First, similar to provisions reflected in House Bill 791, previously heard by this Committee, the bill makes changes to the Overdose Response Program, including repealing the requirement that health care providers may only prescribe or dispense naloxone to someone that has received the requisite training and is a certificate holder. The current program was created to expand access to naloxone to address the growing incidences of overdose deaths in the State. While the current program has been successful in achieving that objective, the training and certification requirement has prevented many individuals most in need of having access to naloxone from obtaining it when needed, due to the impediments posed by the training program. The administration of naloxone is very straightforward and the risk associated with administration without training is significantly less than the risk associated with failure to administer in the event of a suspected overdose.

The bill also provides a meaningful expansion of the local fatality review teams that now review overdose deaths. The legislation authorizes the local fatality review teams to also review nonfatal overdoses which will provide critical information that can be utilized to prevent future overdoses. Finally, the bill provides additional authority to the Department of Health and Mental Hygiene (DHMH) with respect to the denial, suspension, revocation, and renewal of a CDS registration that will streamline DHMH's administration of this function as well as provide DHMH the tools to respond to applications that may warrant action by The provisions of this bill are logical and well justified enhancements of prevention programs currently in existence. A favorable report is requested.

## For more information call:

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