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Senate Finance Committee

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House Bill 1131 – *Public Health – Buprenorphine – Training Grant Program and Workgroup*

POSITION: SUPPORT

The Maryland State Medical Society (MedChi), the largest physician organization in Maryland, strongly supports House Bill 1131. This bill establishes the Buprenorphine Training Grant Program within the Maryland Department of Health to assist counties in offsetting the cost of training paramedics to administer buprenorphine. Under this legislation, counties may apply for grants that will be funded by an annual \$50,000 appropriation from the Opioid Restitution Fund, ensuring sustainable investment in expanding access to evidence-based opioid use disorder (OUD) treatment. Additionally, the Maryland Office of Overdose Response will convene a workgroup to study buprenorphine access across the state.

Buprenorphine is a well-established, evidence-based treatment for OUD that significantly reduces withdrawal symptoms, curbs cravings, and lowers the risk of overdose. However, timely access to this medication remains a challenge, particularly in emergency situations. By equipping paramedics with the ability to administer buprenorphine in the field, House Bill 1131 helps ensure that individuals experiencing opioid withdrawal or overdose can receive immediate treatment, reducing the likelihood of further harm and improving long-term recovery outcomes.

From a medical perspective, enabling paramedics to administer buprenorphine enhances the continuum of care. Early initiation of treatment in the pre-hospital setting facilitates smoother transitions to follow-up care with primary care physicians, addiction specialists, and behavioral health providers. This approach not only improves patient outcomes but also alleviates strain on emergency departments, which are often the primary point of contact for individuals experiencing withdrawal.

MedChi has long been an advocate for expanding access to buprenorphine and has actively participated in training programs to equip healthcare professionals with the necessary knowledge to administer this lifesaving medication. As outlined in MedChi's House of Delegates resolution from 2019, we recognize the critical role of buprenorphine training in addressing Maryland's opioid crisis and, if appropriate, would welcome the opportunity to facilitate future training efforts.

House Bill 1131 is a vital step toward reducing opioid-related fatalities, strengthening Maryland's response to the opioid crisis, and ensuring that individuals with OUD receive timely, evidence-based care. For these reasons, MedChi urges a favorable report on House Bill 1131.

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