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TO: The Honorable Thomas M. Middleton, Chair
Members, Senate Finance Committee

FROM: Pamela Metz Kasemeyer
Joseph A. Schwartz, III
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DATE: March 18, 2015

RE: **SUPPORT WITH AMENDMENT** – Senate Bill 757 – *Public Health –
Drug Overdose Prevention*

On behalf of the Maryland State Medical Society (MedChi), the Maryland Chapter of the American College of Emergency Physicians (MDACEP) and the Mid-Atlantic Association of Community Health Centers (MACHC), we support Senate Bill 757, with amendment.

Senate Bill 757 authorizes physicians and advanced practice nurses to prescribe, and pharmacists to dispense, a standing order for Naloxone to a person who is certified under the program administered by the Department of Mental Health and Hygiene (DHMH), which trains and certifies individuals to administer Naloxone to a person who is reasonably believed to be experiencing a drug overdose.

In 2013, in response to Maryland's growing incidence of drug overdose, legislation was enacted that created a program under the auspices of DHMH that enabled individuals, other than licensed health care practitioners, to be trained and certified in the administration of Naloxone. Participants certified under the program are regularly in the presence of individuals with substance abuse disorders or behaviors that place them at risk for overdose. The timely administration of Naloxone to a person who is reasonably believed to be experiencing a drug overdose can save their life. The program has proven to be an effective tool in combating Maryland's growing incidence of drug overdose.

The provisions in this bill related to standing orders are similar to provisions proposed in Senate Bill 516, however this legislation authorizes physicians and advanced practice nurses in a broader range of settings to prescribe standing orders of Naloxone – an expansion we support. As, or more, importantly, this legislation does not include the immunity provisions reflected in Senate Bill 757 and therefore we strongly urge this legislation be amended to include analogous immunity provisions reflected in

Senate Bill 516. Without immunity protection, it will be highly unlikely that physicians will participate in this program out of fear of liability.

Senate Bill 757 also requires a technical amendment regarding who is an authorized prescriber. The bill references advanced practice nurses, however, not all advanced practice nurses have prescriptive authority. Therefore, Senate Bill 757 should be amended to reference “advanced practice nurses with prescriptive authority” to conform to the appropriate scope of practice limitations.

Finally, this legislation also authorizes the Prescription Drug Monitoring Program (PDMP) to disclose prescription monitoring data, in accordance with regulations adopted by the Secretary, to the State Child Fatality Review Team or Local Child Fatality Review Team; a Local Drug Overdose Fatality Review Team; the Maternal Mortality Review Program; and a Medical Review Committee under the Health Occupations Article as well as the Board of Physicians, for the purpose of furthering an existing bona fide individual case review or investigation of an individual. The expansion of authority under this legislation will provide the identified organizations with access to information that may be of critical importance to their case review obligations, while maintaining the appropriate limitations for release of information by the PDMP that protects the integrity of the program and prevents unjustified use of the information to erroneously implicate prescribers.

With the amendments noted above regarding the standing order provisions of this legislation, the above named organizations urge a favorable report on Senate Bill 757.

For more information call:

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