



House Bill 745

Public Health – Overdose Response Program

MACo Position: **SUPPORT**

To: Finance Committee

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From: Natasha Mehu

The Maryland Association of Counties (MACo) **SUPPORTS** HB 745. Opioid-related deaths and usage continue to rise in epidemic proportions. The Overdose Response Program (ORP) is a valuable tool for local governments as the program helps to ensure that the people who are best situated to prevent an overdose are trained and able to do so.

Under the ORP, individuals are trained and certified to administer naloxone, a life-saving medicine that reverses an opioid overdose. The program is overseen by the Department of Health and Mental Hygiene which authorizes private or public entities, such as local health departments or public safety agencies, to conduct educational training programs for the use of the medication. Since the program was launched, approximately 4,842 individuals have been trained to administer naloxone. This includes 2,306 law enforcement officers. Additionally, 4,744 doses of naloxone have been dispensed and the Department has received 57 reports of the medicine subsequently being administered by an individual trained under the program.

HB 745 expands who is authorized to provide trainings and who is able to prescribe and dispense naloxone. The bill alters the statute so that advance practice nurses and pharmacists may conduct trainings. Additionally an advance practice nurse is able to prescribe and dispense naloxone. The bill also authorizes licensed physicians and advance nurse practitioners to prescribe naloxone through a standing order, and it authorizes any licensed health care provider with prescribing authority to prescribe naloxone directly to an individual at risk for experiencing an overdose. Pharmacists are authorized to dispense naloxone through a therapy management contract.

These changes will allow greater flexibility to have staff available to conduct trainings and increase access to naloxone for those in need. Importantly, HB 745 specifies that individuals trained under the program have immunity from liability under §§ 5–603 and 5–629 of the 26 courts and judicial proceedings article, if the individual administers naloxone to someone

who is or who is in good faith believed to be experiencing an opioid overdose. These Good Samaritan protections ensure that people are not hesitant in attempting to save a life because they are worried about potential liability.

As part of its 2015 legislative initiatives, MACo advocates for comprehensive legislation and budget initiatives to address the growing opioid problem confronting each county and the unique needs of their communities. The changes made to the ORP maximizes the program's potential for getting individuals trained and equipped to save a life by administering naloxone. This will help reduce the number of overdose deaths faced by local jurisdictions. For these reasons MACo urges a **FAVORABLE** report on HB 745.