



House Bill 973

Local AIDS Prevention Sterile Needle and Syringe Exchange Program

MACo Position: **SUPPORT**
WITH AMENDMENTS

To: Health and Government Operations Committee

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From: Natasha Mehu

The Maryland Association of Counties (MACo) **SUPPORTS** HB 973 **WITH AMENDMENTS**. Opioid-related deaths and usage continues to rise in epidemic proportions. 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. There is no one-size-fits-all solution. Broad tools are needed to tackle the problem from all angles: HB 973 offers an additional local option.

HB 973 authorizes a sterile needle and syringe exchange programs to operate in each jurisdiction. These programs help reduce the spread of infectious diseases such as HIV and hepatitis C. Additionally, the programs can be used as a platform to provide overdose prevention education and distribute overdose prevention medication; to refer individuals who use drugs to substance use disorder treatment; and to engage individuals in public health-related services. Data collected from the programs can enhance a jurisdiction's understanding of substance-use related trends and patterns. Under the current law, only Prince George's County is authorized to operate the program. Baltimore City is also authorized to operate a program under a separate statute.

MACo supports HB 973 as it endeavors to give local governments another tool to address substance abuse. However, the bill should be amended to make it clear that the governing body of a jurisdiction has the definitive say in whether a jurisdiction operates a sterile needle and syringe exchange program. Under the current language, the county health officer manages the program with advice from an advisory committee appointed by the governing body of the jurisdiction. The language does not specify who authorizes a program to operate in the county. MACo believes the governing body of the jurisdiction is in the best position to determine whether a sterile needle and syringe exchange program is authorized to operate within its boundaries. The language should be amended to reflect that.

Additionally, Baltimore City is authorized to operate an exchange program under Md. Health-General Code Ann. § 24-801- §24-810, *Expanding access to current operations*. The bill should also be amended to clarify that it does not impact operations of syringe exchange program already established in Baltimore City.

HB 973 allows counties to operate an innovative program to address substance abuse and the spread of infectious disease. The program can be a valuable tool, however the bill should be amended so that the local governing body for a jurisdiction decides whether a program is allowed to operate under its jurisdiction and so that Baltimore City's program is not impacted. For these reasons MACo urges a **FAVORABLE WITH AMENDMENTS** report on HB 973.