



## Senate Bill 97

### *Public Health – Opioid-Associated Disease Prevention and Outreach Programs*

MACo Position: **SUPPORT**  
**WITH AMENDMENTS**

To: Health & Government Operations Committee

Date: March 22, 2016

From: Natasha Mehu

The Maryland Association of Counties (MACo) **SUPPORTS SB 97 WITH AMENDMENTS**. As part of its 2016 legislative initiatives, MACo advocates broadly in support of legislative action providing counties with resources to address drug misuse and provide vital education, prevention, and treatment. SB 97 provides counties with an additional tool to tackle the problem from multiple angles. **MACo urges an amendment to specify that the county governing body or local board of health should determine the new program’s suitability for its community.**

SB 97 allows each jurisdiction to consider a syringe service, by creating a comprehensive, public health-based structure governing the authorization, qualifications, and operating requirements for individual programs. Currently, only Prince George’s County and Baltimore City are authorized to operate such programs.

MACo supports much of the structure the bill provides. This includes provisions that require programs to provide linkage to drug counseling, treatment and recovery services; testing for HIV, viral hepatitis, and sexually transmitted diseases; HIV and viral hepatitis education; overdose prevention education and access to or referrals to obtain naloxone. MACo also supports the requirements for staff expertise, security for program locations, and equipment – all as necessary assurances for a safe offering.

However, MACo urges amendments to the “local option” authority in this bill. As written, the Department of Health and Mental Hygiene and the county Health Officer approve whether individual syringe programs may operate within a given jurisdiction. Rather, the governing body of the jurisdiction, elected by and accountable to residents of the county, should absolutely determine whether syringe service programs are authorized to operate. This also ensures an open, publicly inclusive process for any such decision.

MACo seeks the following amendment:

On page 4, strike in their entirety lines 17 through 22 and substitute:

“24-902. A COUNTY GOVERNING BODY MAY AUTHORIZE THE ESTABLISHMENT OF OPIOID DISEASE PREVENTION AND OUTREACH PROGRAMS WITHIN THE BOUNDARIES OF ITS JURISDICTION.”

Or:

“24-902. A LOCAL BOARD OF HEALTH MAY AUTHORIZE THE ESTABLISHMENT OF OPIOID DISEASE PREVENTION AND OUTREACH PROGRAMS WITHIN THE BOUNDARIES OF ITS JURISDICTION.”

MACo welcomes the broader allowance for these innovative programs to operate and believes they may prove to be a valuable tool for addressing drug misuse and the spread of infectious disease. But counties respectfully submit that the county governing body or local board of health is the appropriate empowered body to determine whether the program is suited to the needs of its jurisdiction. For these reasons, MACo urges a **FAVORABLE WITH AMENDMENTS** report on SB 97.