



Senate Bill 967

Heroin and Opioid Prevention Effort (HOPE) and Treatment Act of 2017

MACo Position: **SUPPORT**
with AMENDMENTS

Date: March 8, 2017

To: Finance and Education, Health, and
Environmental Affairs Committees

From: Natasha Mehu

The Maryland Association of Counties (MACo) **SUPPORTS SB 967 WITH AMENDMENTS**. This omnibus legislation offers a comprehensive approach for addressing the continuing opioid overdose and addiction problem confronting communities across the state. MACo offers amendments to help ensure the bill achieves its goals without overburdening local resources.

Counties support the efforts of SB 967 to provide Maryland residents with greater access to a broader range of treatment services and support. Crisis treatment centers and 24/7 toll-free crisis hotlines provide a means of immediate assistance to individuals in acute emergency situations. Rate adjustments for community behavioral health providers will help these facilities “keep the doors open” and continue to provide vital treatment to patients in need. The bill directs hospitals to have discharge protocols for individuals treated for opioid overdose and directs health benefit plans to provide residential treatment and outpatient treatment services. These are all laudable steps to expanding the availability of and access to treatment services for Marylanders.

Counties are only concerned with language of the bill that sets a burdensome mandate on certain health care facilities, including local health departments, to have at least one buprenorphine provider available for every 100 patients served. This mandate would be extremely difficult to meet. It is unmanageable and sets unrealistic expectations on health care facilities to provide these specific services even if their patient population does not support the need for the services.

To address our concerns, the bill should be amended so that the health care facilities ensure their patients have access to the services of healthcare providers that are trained and authorized to prescribe opioid addiction medications, including buprenorphine-containing formulas. To comply with this directive, the facilities should have the flexibility to directly employ, contract with, or refer to the appropriate providers. The facilities should not be required to meet any specific provider-to-patient threshold.

This amendment would ensure that patients could have access to a broader range of providers and opioid addiction medications, not just buprenorphine. Additionally, rather than set a specific mandate for the facilities to make the providers available, the amendments provide the flexibility for a facility to do so in a way that meets their needs and available resources.

The opioid epidemic continues to be a threat to the lives and livelihood of Maryland residents. SB 967 helps ensure our communities have access to a range of substance abuse treatments and support services. For these reasons, MACo urges a **FAVORABLE WITH AMENDMENTS** report on SB 967.