



NCADD-Maryland's Addiction Treatment Advocates Committee 2014 Maryland General Assembly Session Wrap Up Report

Harm Reduction & Response to Opiate Addiction

HB 416/SB 476 - Criminal Procedure - Limited Immunity - Alcohol- or Drug-Related Medical Emergencies: This "Good Samaritan" law will provide limited criminal immunity to people involved with getting emergency services when facing an alcohol or drug overdose. For the person experiencing the overdose and anyone involved with obtaining help, they will be immune from arrest for possession of a controlled dangerous substance, possession of drug paraphernalia, underage possession of alcohol, obtaining alcohol for underage consumption, and furnishing alcohol for or allowing underage consumption of alcohol. The public needs to be educated about this new law so people are not afraid to call for help.

SB 263 & HB 354 - Baltimore City - AIDS Prevention Sterile Needle and Syringe Exchange Program: This important harm reduction measure passed, changing the number of needles that registered participants can exchange. As opposed to the current one-for-one exchange, the program beginning in October will be a "needs-based exchange" which means participants can exchange dirty needles for the number of clean needles they actually need. This is the way most other programs in the country and around the world operate and is proven effective at further reducing the transmission of HIV and HCV. There was support for this bill in the Baltimore City Delegation, but there remains a great deal of opposition from conservatives outside the City who continue to possess the misperceptions and fears that existed when the program in the City was created, despite 20 years of experience and data proving its success in decreasing the rate of HIV and HCV transmission and assisting people with obtaining treatment and other health services.

HB 1282 - Public Health - Drug Overdose Deaths - Local Fatality Review Teams: This law will provide civil immunity for people involved in local overdose fatality review teams. Members of local teams that have been established in several jurisdictions have acknowledged the need for this protection to ensure all appropriate and relevant information is shared in the process.

HB 1296 - Prescription Drug Monitoring Program - Review and Reporting of Possible Misuse or Abuse of Monitored Prescription Drugs: This law will authorize the PDMP to review data for signs of misuse or abuse of prescription drugs in order to notify the prescriber or dispenser. The PDMP must obtain clinical guidance from the existing technical advisory committee regarding how to interpret the data to discern indications of possible misuse or abuse.

SB 75/HB 359 - Alcoholic Beverages - Maximum Alcohol Content: This law bans the retail sale of grain alcohol, that is, alcoholic beverages with an alcohol content of 95% (190 proof). This brings

Maryland in line with many of its neighboring states and is hoped to reduce incidences of injury, violence and death on college campuses. This effort was spearheaded by The Maryland Collaborative to Reduce College Drinking and Related Problems, a group of colleges and universities in the state working to address the problem of excessive drinking and its consequences on their campuses and in their communities.

Behavioral Health Integration

HB 1510 - Behavioral Health Administration - Establishment and Duties: This bill merges ADAA and the Mental Hygiene Administration (MHA) into a new Behavioral Health Administration (BHA). Almost everything related to this bill was a complete disappointment. For as late as it was introduced, it was also a poorly drafted bill that did little more than the minimum needed to legally combine these two agencies. Because of the timing and the refusal of DHMH to share a draft of the bill at any point, advocates demanded a list of amendments, most of which were accepted by DHMH. An important amendment was the requirement for the creation of a workgroup that will have stakeholder involvement and examine the existing substance use disorder (SUD) and mental health statutes and regulations to develop recommendations to more truly integrate the systems and create equity.

SB 170 - Budget Bill (Fiscal Year 2015): The budget as introduced by Governor O'Malley and passed by the General Assembly reduced funding for SUD treatment services by \$2.8 million. This reduction was based on assumptions about savings achieved due to the implementation of health care reform. There were no reductions made to the newly combined Behavioral Health Administration budget by the budget committees.

There were several pieces of budget language and narrative adopted regarding programs in the BHA. First, the budget committees requested information on the treatment options for youth with heroin-related substance use disorders. Second, the committees required a report on treatment options for court-involved defendants. Third, the committees urged the BHA to find funding to create a pilot project in a rural area of the state and use non-opioid replacement medication in the treatment of opioid use disorders. Within the Department of Human Resources' (DHR) budget, language was added requiring a joint report with the BHA discussing the effectiveness of substance use disorder treatment programs on the Temporary Cash Assistance population based on the first year of data collected under a newly developed reporting system. The three reports are all due before the end of the year.

Recovery Support and Stigma

Senate Bill 367 & House Bill 584 - Drug Abuse Treatment Programs - Locations and Economic Impact Study: This legislation died in committee. The bill, initiated because of community opposition to opiate treatment programs in Baltimore, would have endeavored to show a link between poor economic conditions in neighborhoods with the treatment programs located there.

SB 1056 & HB 1166 - Maryland Second Chance Act of 2014: This bill failed despite a tremendous effort from its lead advocacy organization, Job Opportunities Task Force, to negotiate with all

stakeholders. The bill would have allowed individuals to petition the courts to have shielded from public view any criminal record related to a number of nonviolent misdemeanors. The bill's intent was to help people with such records obtain employment and housing. There continues to be staunch opposition, especially in the House, of efforts to allow people who have served their time to more easily re-establish themselves in the community.

SB 21 - Family Investment Program - Eligibility - Drug Testing: This bill, which died in committee without a vote, would have created a much more punitive approach to identifying people enrolled in the state's welfare program who use certain illegal substances and suspending or terminating assistance payments. While the effort behind this bill was minimal, the budget committees have requested a report from DHR and the Department of Health and Mental Hygiene showing treatment data of those enrolled in the Family Investment Program. Advocates will need to participate in the shaping of any legislative response to the data.

SB 944 - Family Law - Controlled Dangerous Substance Use During Pregnancy and Substance-Exposed Newborns - Reporting: This bill, which was withdrawn, would have created a much more punitive process regarding the births of infants exposed to certain controlled dangerous substances. This law had just been changed in 2013 with input from various stakeholder groups which attempted to balance the interests of women with substance use disorder diagnoses with the health and safety of their newborn children.

Marijuana Laws

SB 923 & HB 881 - Medical Marijuana - Natalie M. LaPrade Medical Marijuana Commission: This law will expand Maryland's existing Medical Marijuana Program by allowing individual physicians to register to recommend medical marijuana to patients who also register with the State. It is not expected that the program will be operational until late 2015.

SB 364 - Criminal Law - Possession of Marijuana - Civil Offense: The law will make possession of up to 10 grams (less than one ounce) of marijuana a civil offense akin to a traffic ticket. A citation will be issued and a fine incurred. Fines of \$100, \$250 and \$500 will be charged upon a first, second, and third and subsequent offense, respectively. Anyone under 21 years of age will also have to appear in court and be referred to a drug education program and referred for an assessment. For people 21 and over, a referral to an education program and for assessment will occur on a third and subsequent offense. Possession of drug paraphernalia is still a crime and will likely be addressed in the 2015 Session. There remain many unanswered questions about the implementation of the law, including what happens to people who cannot pay the fine, is there going to be state funding to expand education programs, and how will DHMH choose to spend the revenue generated from the fines.

SB 658 & HB 880 - The Marijuana Taxation and Regulation Act: This bill would have legalized and regulated the growth, sale and possession of marijuana for recreational use. It was not expected that this would pass this Session, but proponents are committed to re-introducing the bill in 2015.

Other Issues

SB 481 - Criminal Law - Table Games and Video Lottery Terminals - Individual Under the Age of 21 Years: The Center for Excellence on Problem Gambling led efforts to pass this bill to allow for the fining of people under 21 years old who are in the state's gaming facilities. Research shows that this can be an effective deterrent. There will likely be greater attention paid to problem gambling issues as new casinos open in the near future.

SB 198 - Maryland Medical Assistance Program - Telemedicine: This law will allow Medicaid to reimburse appropriate services delivered via technology, improving access to care. This will bring Medicaid in line with Maryland law requiring commercial insurance to do so. As passed, the bill allows DHMH to promulgate regulations that could limit the services and providers to be reimbursed. NCADD provided testimony on this bill and lobbied legislators to ensure the bill did not have more restrictive language that DHMH was proposing.

SB 448 - State Board of Professional Counselors and Therapists - Cease and Desist Orders and Penalties for Misrepresentation and Practicing Without a License: This law will create a stronger penalty for people falsely claiming to be licensed or certified under the BOPC. This increases the criminal fine for such a violation and empowers the BOPC to respond in a strong manner and was a bill strongly supported by MADC.

SB 784 - Higher Education - Loan Assistance - Licensed Clinical Counselors: This law expands eligibility for the Janet L. Hoffman Loan Assistance Repayment Program to include a licensed clinical alcohol and drug counselor, a licensed clinical marriage and family therapy counselor, or a licensed clinical professional counselor who works for a nonprofit entity in a high-need geographic area. This was also a bill led by MADC.