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Health and Government Operations Committee

Subcommittees

Government Operations and Estates and Trusts Insurance and Pharmaceuticals



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## February 3, 2022 Support of HB 229 – Pharmacists – Administration of Maintenance Injectable Medications – Treatment of Sexually Transmitted Infections

The Honorable Shane Pendergrass, Chair Health and Government Operations Committee Maryland House of Delegates 6 Bladen Street, Room 241 Annapolis, MD 21401

Chair Pendergrass, Vice-Chair Pena-Melnyk, and Esteemed Members of Health and Government Operations Committee:

House Bill 229 builds off of the great work of this body in the 2021 session, passing the administration of maintenance injectable medications, House Bill 135. Like 2021 HB 135, House Bill 229 authorizes pharmacists to administer injectable medications for sexually transmitted infections (STIs) on a maintenance basis to their clients/patients. This bill allows pharmacists to provide patient-centered care to high-risk patient populations, many of whom struggle with the stigma and anxieties associated with living with STIs.

These patients require consistent and time-sensitive doses of their medications to sustain healthy outcomes. This legislation is all the more critical now, with COVID-19 straining our healthcare system. In states where pharmacists can administer maintenance injectables, patients have timely access to their medications. They can avoid crowded waiting rooms, delayed and missed appointments, and the negative consequences of nonadherence, which occur when patients do not fully understand the side effects of missing doses of their medications.

U.S. Pharmacists found that "nonadherence is a pervasive and dangerous challenge. Proper doses of medication and adhering to the correct timetable for medication administration are critical to achieving positive outcomes. And yet fully 50% of patients do not take their medications as directed by their doctors, resulting in poor outcomes, reduced quality of life, increased hospitalization, and soaring healthcare costs. Adverse outcomes are especially dire for at-risk populations who rely on long-term maintenance to sustain health stability.

In states that have passed legislation similar to HB 229, pharmacists have become active partners in mitigating medical nonadherence. Pharmacists administer maintenance medications, provide notes to patients' physicians, send routine reminders when patients are due for their subsequent injections, closely monitor drug interactions, and work with physicians to address unpleasant side effects or drug interactions. In all fifty states and the District of Columbia, pharmacists have the

authority to administer vaccines; however, forty-four states permit pharmacists to administer long-lasting injectable medications.

Maryland should be a leader in this necessary step to curb medication nonadherence and be a partner assisting positive public health outcomes. For these reasons, I urge you to support HB 229, and I request a favorable report.

Thank you,

Delegate Karen Lewis Young