



# Maryland Alliance for Sensible Drug Policy

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March 25, 2025

Senator Pamela Beidle  
Chair, Finance Committee  
3 East Miller Senate Office Building  
Annapolis, Maryland 21401

**RE: House Bill 1066 (Commission on Behavioral Health Care Treatment and Access -  
Membership and Workgroups) – FAVORABLE**

Dear Chair Beidle, Vice Chair Hayes, and Committee Members,

The undersigned organizations respectfully submit this letter in support of House Bill 1066, which would create an additional workgroup under the existing Commission on Behavioral Health Care Treatment and Access, created in 2022 by the passage of SB852/HB1148. This workgroup will review the impacts of treatment delivered within the criminal justice system versus treatment sought on a voluntary basis.

***The need for this review***

Our state's current policies are based on the assumption that court referred treatment is an effective way to address use of illicit substances, however, the existing literature on this topic is limited and mixed – some studies show positive results, other show no effect, and some indicate adverse consequences.<sup>1</sup> One consistent finding is that the court-referred treatment outcomes differ by race. Clients who are people of color and are referred to treatment by the court are less likely to graduate from the program and more likely to be reincarnated than their white

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<sup>1</sup> D. Werb, A. Kamarulzaman, M.C. Meacham, C. Rafful, B. Fischer, S.A. Stratthdee, E. Wood, The effectiveness of compulsory drug treatment: A systematic review, *International Journal of Drug Policy*, Volume 28, 2016, <https://doi.org/10.1016/j.drugpo.2015.12.005>; see also Massachusetts Department of Health, An Assessment of Opioid-Related Deaths in Massachusetts (2013-2014) available at <https://www.mass.gov/doc/legislative-report-chapter-55-opioid-overdose-study-september-2016/download> (finding that patients were twice as likely to die of an overdose following court mandated treatment compared to those who entered treatment voluntarily).

counterparts.<sup>2</sup> These findings raise significant equity concerns of court-referred treatment outcomes. Since the effects of the criminal justice system on people's lives, their families, and societies are so significant, it is crucial to look at these issues holistically.

House Bill 1066 creates a new workgroup to explore these, and related issues:

- The general availability and accessibility of treatment and recovery support, including housing and employment support;
- The extent to which individuals are directed to these services through the criminal justice system;
- The outcomes for individuals who receive these services, disaggregated by whether the services were sought voluntarily or referred by the criminal justice system;
- The broader impacts of criminal justice involvement related to substance use on individuals, families, and communities;
- The financial cost to the state and local governments resulting from criminal justice involvement related to substance use; and
- The effectiveness of voluntary treatment compared to coerced treatment.

### ***Responding to the MDH's concerns***

In their letter to the Health and Government Operations Committee, dated March 5, 2025, the Maryland Department of Health stated that “the work currently being conducted by the Commission and its existing workgroup adequately addresses the relationship between substance use disorder and the criminal justice system.” However, having reviewed all the Commission’s publicly available materials, we are concerned that these issues are not being adequately addressed. For instance, the Workgroup on Criminal Justice-Involved Behavioral Health discussed substance use related issues during its first meeting on December 8, 2023, but there is no indication that these topics have been revisited. Instead, the group's 2024 meetings focused on competency to stand trial, assisted outpatient psychiatric treatment, and the problems of the state’s psychiatric hospitals. This is not a criticism of the Commission or its workgroups, which are doing important and demanding work. It is understandable that substance use disorder may not receive sustained attention, given the vast scope of behavioral health issues they are addressing. Nevertheless, this gap highlights the importance of establishing a dedicated workgroup on substance use.

By creating a comprehensive, evidence-based understanding of how our current system addresses substance use, we will be better able to make informed changes to that system. This has the potential of not only improving health outcomes, but also reducing recidivism, decreasing racial disparities, and reducing costs to state and local government.

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<sup>2</sup> McKean, J., & Warren-Gordon, K. (2011). Racial Differences in Graduation Rates From Adult Drug Treatment Courts. *Journal of Ethnicity in Criminal Justice*, 9(1), 41–55. <https://doi.org/10.1080/15377938.2011.535469>; Brown, R., Systematic review of the impact of adult drug-treatment courts, *Translational Research*, Volume 155, Issue 6, 2010, Pages 263-274, <https://doi.org/10.1016/j.trsl.2010.03.001>; *Journal for Advancing Justice*, Volume I, Identifying and Rectifying Racial, Ethnic, and Gender Disparities in Treatment Courts (2018) available at <https://nyatcp.org/assets/pdfs/powerpoints2020/AJ-Journal.pdf#page=15>.

For these reasons, **we respectfully urge the Finance Committee to give House Bill 1066 a favorable report.**

Sincerely,

Thomas C. Higdon  
Executive Director

*and the undersigned organizations:*

Behavioral Health System Baltimore (BHSB)  
Citizens Opposing Prohibition (COP)  
Law Enforcement Action Partnership (LEAP)  
Maryland-DC Society of Addiction Medicine (MDDCSAM)  
Maryland Office of the Public Defender  
Maryland Peer Advisory Council (MPAC)  
MedChi, The Maryland State Medical Society  
NAMI Maryland, National Alliance on Mental Illness  
National Council on Alcoholism and Drug Dependence of Maryland (NCADD-MD)  
University of Baltimore School of Law, Center for Criminal Justice Reform