



Wes Moore, Governor · Aruna Miller, Lt. Governor · Ryan Moran, DrPH, MHSA, Acting Secretary

March 25, 2025

The Honorable William C. Smith, Jr.
Chair, Judicial Proceedings Committee
2 East Miller Senate Office Building
Annapolis, Maryland 21401

RE: House Bill (HB) 260 – Criminal Law - Drug Paraphernalia - Prohibitions and Penalties – Letter of Support as Amended

Dear Chair Smith and Committee Members:

The Maryland Department of Health (MDH) respectfully submits this letter of support as amended for House Bill 260 – Criminal Law - Drug Paraphernalia - Prohibitions and Penalties.

HB 260 alters the penalties for the possession of certain items that can be used by an individual to consume a controlled substance from two (2) years to one (1) or a fine from \$2,000 to \$1,000 for a subsequent violation. The first violation is limited to a fine not to exceed \$500.

The proposed reduction encourages the use of clean syringes and supplies; necessary for safer substance use, curbing the spread and limiting the financial impact of bloodborne pathogens. Injection drug use and needle sharing are major modifiable risk factors for contracting blood-borne pathogens such as HIV and Hepatitis C.

Clean needle programs are a crucial part of harm reduction strategies that help prevent the spread of Hep C, which in turn reduces the risk of long-term health complications, including liver cancer. These programs are effective in curbing the infection rate and improving public health outcomes¹.

Approximately 120,000 cases of HIV are directly attributable to intravenous (IV) drug use and needle sharing.² Hepatitis C is the most common bloodborne infection in the U.S. and a leading cause of liver cirrhosis and liver cancer. Hepatitis C prevalence among IV drug users is over 33%.^{1,3} Both conditions place a substantial financial burden on the healthcare system, with the average lifetime cost of HIV treatment and Hepatitis C treatment costing \$370,000 and \$84,000, respectively.¹ Using clean needles and reducing needle sharing substantially decreases the risk of acquiring and transmitting HIV, Hepatitis C, and other bloodborne pathogens. HB 260 reduces barriers to utilizing needle exchange services, which increases access to clean needles and decreases needle sharing.¹

HB 260 would also reduce fines and incarceration periods associated with the possession of drug paraphernalia, which disproportionately affects communities of color. Reducing fear of interaction with

¹ https://www.cdc.gov/hepatitis-c/about?CDC_AAref_Val=https://www.cdc.gov/hepatitis/hcv/cfaq.htm

² ¹ CDC: Office of the Associate Director for Policy and Strategy. (2016, August 5). Access to clean syringes. Centers for Disease Control and Prevention. Retrieved February 5, 2022, from <https://www.cdc.gov/policy/hst/h15/cleansyringes/index.html>

³ ¹ Office of Infectious Disease and HIV/AIDS Policy (OIDP). (2021, July 9). Viral hepatitis in the United States: Data and Trends. HHS.gov. Retrieved February 5, 2022, from <https://www.hhs.gov/hepatitis/learn-about-viral-hepatitis/data-and-trends/index.html>

law enforcement also has the potential to increase access to and utilization of treatment services. Moreover, HB 260 aligns with the Department's key harm reduction and opioid overdose prevention and education programs whose goals are to reduce opioid-related overdoses as well as connect individuals who may be actively using to services and supports such as syringe services programs and overdose response programs.

If you would like to discuss this further, please do not hesitate to contact Sarah Case-Herron, Director of Governmental Affairs at sarah.case-herron@maryland.gov.

Sincerely,

Ryan B. Moran, DrPH, MHSA
Acting Secretary