

# Maryland's Office of Overdose Response

Wes Moore, Governor · Aruna Miller, Lt. Governor · Emily Keller, Special Secretary of Overdose Response

February 25, 2026

The Honorable Heather Bagnall  
Chair, House Health Committee  
240 Taylor House Office Building  
Annapolis, MD 21401

## **RE: House Bill 838 – State Board of Pharmacy – Prescriber-Pharmacist Agreements**

Dear Chair Bagnall,

Maryland's Office of Overdose Response (MOOR) respectfully submits this letter of support for House Bill (HB) 838, which authorizes pharmacists, under certain circumstances, to enter into prescriber-pharmacist agreements that authorize the pharmacist to treat an opioid use disorder (OUD) using controlled dangerous substances (CDS) drug therapy.

According to preliminary data from the Maryland Vital Statistics Administration, in the 12-month period ending December 2025, 1,315 Marylanders died of a drug overdose, and 1,026 of those deaths were related to an opioid.<sup>1</sup> While Maryland has made significant progress in recent years in reducing overdose mortality by investing heavily in evidence-based strategies and resources to support people who use drugs, people living with substance use disorder, and people in recovery, there are still ways Maryland can expand efforts and build upon these positive results.

Medications for opioid use disorder (MOUD) are considered the gold-standard treatment for opioid use disorder. Buprenorphine is one of the three FDA-approved MOUDs and, and it works by reducing withdrawal symptoms and cravings experienced by people with OUD. Buprenorphine is a particularly effective medication because it also has a built-in safety precaution, or a ceiling effect that limits its effects on respiratory depression.<sup>2</sup> Despite buprenorphine's critical role as an evidence-based treatment and its validity as a recovery pathway, access and utilization of buprenorphine in Maryland remain limited.

One way that Maryland can help increase access to buprenorphine for people struggling with OUD is by passing HB 838, which would empower pharmacists to treat patients with OUD by using buprenorphine. Pharmacies are frequently more accessible for patients to access than other healthcare settings, such as

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<sup>1</sup> <https://health.maryland.gov/dataoffice/Pages/mdh-dashboards.aspx>

<sup>2</sup> <https://www.samhsa.gov/sites/default/files/quick-start-guide.pdf>

doctors' offices. Maryland law currently authorizes pharmacists to engage in prescriber-pharmacist agreements to use drugs to treat a variety of health conditions, such as diabetes, hypertension, asthma, tobacco cessation, and more; however, current law does not explicitly state that pharmacists have the authority to use CDS to treat patients via a prescriber-pharmacist agreement. Buprenorphine is one such CDS, presenting a barrier to its access in the pharmacy setting.

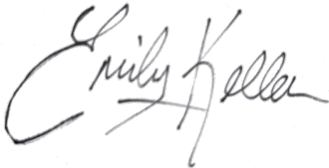
HB 838 provides a framework by which pharmacists can enter into prescriber-pharmacist agreements to use buprenorphine to treat people with OUD. HB 838 does this in a thoughtful manner, requiring pharmacists to register with the Federal Drug Enforcement Agency and Maryland Office of Controlled Substances Administration, to complete any trainings required by federal or state law for the use of buprenorphine, and to follow a protocol established by the prescriber. Pharmacists will also be required to request relevant data from Maryland's Prescription Drug Monitoring Program prior to initiating or modifying a CDS therapy.

Increasing access to buprenorphine in Maryland is vital. Reducing barriers to buprenorphine wherever possible is critical. Passing HB 838 will increase the number of buprenorphine providers in Maryland and provide a thorough framework for pharmacists to safely treat patients with this life-altering medication.

For these reasons, MOOR submits this letter in support of HB 838.

If you would like to discuss this further, please do not hesitate to contact Benjamin Fraifeld, Associate Director for Policy & Advocacy at MOOR, 443-346-3013.

Sincerely,



Emily Keller  
Special Secretary of Overdose Response

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