AMENDMENTS TO SENATE BILL 323
(First Reading File Bill)

AMENDMENT NO. 1
On page 1, in line 2, strike “Maryland Medical Assistance Program – Prior Authorization for Drug Products” and substitute “Public Health – Medications”; in line 3, strike “Prohibition” and substitute “Preferred and Nonpreferred Medications”; strike beginning with “prohibiting” in line 4 down through “products” in line 7 and substitute “requiring the Maryland Department of Health to adopt a certain reporting system, analyze patterns of prescribing medications in the State, conduct outreach, and identify certain barriers related to prescribing medications to treat an opioid use disorder; and generally relating to medications to treat an opioid use disorder”; and in line 10, strike “15–150” and substitute “8–1102 to be under the amended subtitle “Subtitle 11. Opioid Addiction Treatment Prescribers””.

AMENDMENT NO. 2
On page 1, strike in their entirety lines 16 through 21, inclusive, and substitute:


8–1102.

(A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.

(2) “Nonpreferred Medication” means a medication prescribed to treat an opioid use disorder that contains methadone, buprenorphine, or naltrexone and is not on the State’s preferred drug list.
(3) “Preferred medication” means a medication prescribed to treat an opioid use disorder that contains methadone, buprenorphine, or naltrexone and is on the State’s preferred drug list.

(B) The Department shall:

(1) Adopt a reporting system to monitor the prescribing of medications to treat opioid use disorders in the State, including which medications are being prescribed;

(2) Analyze patterns of prescribing medications in the State to identify prescribers who regularly prescribe nonpreferred medications, including a comparison of the patterns to the findings of the report submitted under subsection (d) of this section;

(3) Conduct outreach to individuals authorized to prescribe drugs and devices in the State using educational materials regarding the benefits of prescribing preferred medications; and

(4) Identify barriers to individuals who need medication to treat an opioid use disorder to obtaining the medication in a timely manner.

(C) On or before October 1 each year, beginning in 2023, the Department shall report on its findings and actions taken under subsection (b) of this section to the Governor and, in accordance
WITH § 2–1257 OF THE STATE GOVERNMENT ARTICLE, THE GENERAL ASSEMBLY.

(D) **ON OR BEFORE OCTOBER 1, 2022, THE DEPARTMENT SHALL SUBMIT A REPORT WITH AN INITIAL ANALYSIS OF THE ITEMS LISTED UNDER SUBSECTION (B) OF THIS SECTION, TO THE GOVERNOR AND, IN ACCORDANCE WITH § 2–1257 OF THE STATE GOVERNMENT ARTICLE, THE GENERAL ASSEMBLY.**

On page 2, in line 1, strike “October” and substitute “July”.