

Department of Legislative Services
Maryland General Assembly
2025 Session

FISCAL AND POLICY NOTE
First Reader

House Bill 572 (Delegate Kipke)
Health and Government Operations

Public Health - Opioid Overdose Reversal Drugs

This bill requires a licensed health care provider, when issuing a standing order for an opioid overdose reversal drug, to allow an individual to choose any formulation of any opioid overdose reversal drug approved by the federal Food and Drug Administration (FDA). Even so, an authorized public or private entity that prescribes and dispenses opioid overdose reversal drugs may not be required to stock or dispense all FDA-approved opioid overdose reversal drugs.

Fiscal Summary

State Effect: To the extent the bill results in increased utilization of opioid overdose reversal drugs not on the Medicaid preferred drug list, Medicaid expenditures (federal and general funds) may increase beginning in FY 2026. Federal fund revenues increase correspondingly.

Local Effect: The bill’s requirements can be absorbed within existing budgeted resources for local health departments (LHDs). Revenues are not affected.

Small Business Effect: Minimal.

Analysis

Current Law: “Standing order” means a written instruction for the prescribing and dispensing of an FDA-approved opioid overdose reversal drug. “Private or public entity” means a health care provider, LHD, community-based organization, substance abuse treatment organization, or other person that addresses medical or social issues related to drug addiction.

Overdose Response Program

The Maryland Department of Health (MDH) Overdose Response Program (ORP) allows FDA-approved opioid overdose reversal drugs to be offered to specified individuals – free of charge – by multiple providers, programs, and entities. Subject to the limitations of the State budget, MDH must purchase and provide FDA-approved opioid overdose reversal drugs, at no cost, to the entities who may provide the reversal drugs only if MDH provides them. MDH may authorize private or public entities to conduct education and training on opioid overdose recognition and response that includes (1) education on recognizing the signs and symptoms of an opioid overdose; (2) training on responding to an opioid overdose, including the administration of FDA-approved opioid overdose reversal drugs; and (3) access to opioid overdose reversal drugs and the necessary supplies for the administration of the opioid overdose reversal drug. Individuals are not required to obtain the specified training and education on opioid overdose recognition and response from a private or public entity before a pharmacist may dispense an FDA-approved opioid overdose reversal drug.

Standing Orders for Opioid Overdose Reversal Drugs

A licensed health care provider with prescribing authority may prescribe and dispense an FDA-approved opioid overdose reversal drug to an individual who is believed to be at risk of experiencing an opioid overdose or is in a position to assist the individual at risk of experiencing an opioid overdose. A health care provider may also prescribe and dispense an FDA-approved opioid overdose reversal drug by issuing a standing order if the licensed health care provider (1) is employed by MDH or an LHD or (2) has a written agreement with an authorized private or public entity.

A licensed health care provider who issues a standing order may delegate the dispensing of an FDA-approved opioid overdose reversal drug to an employee or volunteer of an authorized private or public entity in accordance with a written agreement between the delegating licensed health care provider and the authorized private or public entity that employs the employee or volunteer. A licensed health care provider with dispensing authority may also dispense an FDA-approved opioid overdose reversal drug to any individual in accordance with a standing order that is issued by a licensed health care provider with prescribing authority as described above. A pharmacist may also dispense an FDA-approved opioid overdose reversal drug in accordance with a therapy management contract under the Health Occupations Article.

Maryland has a statewide standing order for opioid overdose reversal drugs that authorizes any Maryland-licensed pharmacist to dispense unlimited prescriptions and refills of naloxone and devices for its administration to any individual, as specified. A pharmacist must provide consultation with the individual regarding the naloxone dosage that is most

appropriate, select and dispense two doses of naloxone, and provide directions for use. The standing order is set to expire June 30, 2025, at which time a new order will be issued. If a patient cannot afford naloxone or related copayments, or does not wish to use insurance coverage, pharmacists are instructed to refer them to ORP where they can obtain a naloxone kit free of charge.

State Fiscal Effect: MDH advises that all but two FDA-approved overdose reversal drugs (Kloxxado and Zimhi) are on the Medicaid preferred drug list. Thus, to the extent that the bill results in increased utilization of Kloxxado and Zimhi, Medicaid expenditures (federal and general funds) may increase by an indeterminate amount. Federal fund revenues increase accordingly.

Local Expenditures: The Maryland Association of County Health Officers advises that health care providers at LHDs who prescribe and dispense opioid overdose reversal drugs may experience a minimal operational impact as their patients would have more options when selecting an FDA-approved opioid overdose reversal drug. That impact can be handled with existing budgeted resources.

Additional Information

Recent Prior Introductions: Similar legislation has been introduced within the last three years. See HB 411 and SB 408 of 2024.

Designated Cross File: SB 793 (Senator Mautz) - Finance.

Information Source(s): Maryland Association of County Health Officers; Department of Budget and Management; Maryland Department of Health; Maryland Insurance Administration; Department of Legislative Services

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