



2020 SESSION POSITION PAPER

BILL: SB 520 – Behavioral Health Programs – Opioid Treatment Services – Limitation on Licenses
COMMITTEE: Senate Finance Committee
POSITION: Letter of Concern
BILL ANALYSIS: SB 520 would prohibit the Behavioral Health Administration (BHA) from approving more than five (5) licenses in each county for behavioral health programs that provide opioid treatment services and require special BHA approval to secure any additional licenses in a county.

POSITION RATIONALE: The Maryland Association of County Health Officers (MACHO) submits a **letter of concern for SB 520**. The majority of Opioid Treatment Programs (OTPs) certified by the Maryland Department of Health’s (MDHs) Behavioral Health Administration (BHA) and accredited in accordance with subtitle 63, subsection 10.63.01¹, offer high quality services for treating opioid use disorders that reflect best practices to curb opioid-related overdose fatalities. While MACHO agrees with limiting the proliferation of “gas-and-go” OTPs, we are concerned with the way the bill seeks to address this issue.

57% of Marylanders who use drugs receive evidence-based treatment each year, according to national survey and billing data². Increasing access to medication-assisted treatment is proven to reduce opioid overdose mortality rates³ and is supported by the U.S. Department of Health and Human Services as a critical element of a comprehensive local approach to the opioid overdose epidemic⁴. At a time when opioid overdoses in Maryland are continuing to increase, SB 520 would limit to 5 the number of OTP licensed providers in each jurisdiction based on population size. This measure does not take into consideration the quality of OTP services each licensee offers, the rate of opioid-related substance use disorders in the jurisdiction, the geographic size of each jurisdiction or concomitant suitability of location of OTPs. Additionally, the bureaucratic burden of pursuing state legislation for BHA to exempt a local jurisdiction from this proposed limit, is unwieldy in a time when *more* quality providers are needed.

The number of opioid-related deaths in MD in the first 9 months of 2019 was 1,574, a decrease of 4.8% from the same time period in 2018⁵; however, several individual counties reported increases in the number of deaths,⁶ despite the State’s concerted efforts to invest resources to combat the epidemic.⁷

Therefore, MACHO submits this **letter of concern for SB 520**. *This paper reflects the position of MACHO.*

¹ (http://www.dsd.state.md.us/COMAR/SubtitleSearch.aspx?search=10.63.01.*)

² 2016 National Survey for Drug Use and Health “62,331 people identified that they use drugs and were in need of treatment;” 2016 Beacon billing records showed 32,079 people received medication-assisted treatment (methadone or buprenorphine).

³ Schwartz RP, Gryczynski J, O’Grady KE, et al. Opioid agonist treatments and heroin overdose deaths in Baltimore, Maryland, 1995-2009. *Am J Public Health* 2013;103:917-922

⁴ CDC Evidence-based strategies for addressing opioid overdose: <https://stacks.cdc.gov/view/cdc/59393>

⁵ <https://beforeitstoolate.maryland.gov/wp-content/uploads/sites/34/2019/12/OOCC-Q3-Report-APPROVED-FINAL.pdf>

⁶ Baltimore City experienced a 5% increase from January-September 2018 to January-September 2019 (630:609); Calvert County, 6% increase (17:16); Caroline County, 100% increase (10:5); Charles County, 53% increase (20:13); Dorchester County, 60% increase (8:5); Garrett County, 33% increase (4:3); Kent County, 600% increase (7:1); Montgomery County, 15% increase (66:57); Talbot County, 100% increase, (12:6); Worcester County, 33% increase (12:9).

⁷ Hogan Administration Announces Grants Totaling \$10 Million to Fight Heroin and Opioid Epidemic. (2019, August 29). Retrieved February 15, 2020 from <https://beforeitstoolate.maryland.gov/hogan-administration-announces-grants-totaling-10-million-to-fight-heroin-and-opioid-epidemic/>