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Serenity Health
JGrollmes@serenityllc.net

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c/o IBR/REACH Health Services 2104 Maryland Avenue Baltimore, MD 21218



(410) 752-6080



www.matod.org

House Health and Government Operations Committee February 16, 2022 Support of Senate Bill 578

The Maryland Association for the Treatment of Opioid Dependence (MATOD) urges a favorable opinion on HB 578. MATOD represents over 65 healthcare organizations across Maryland that provide and promote high-quality, effective medication assisted treatment for opioid addiction. MATOD programs serve over 35,000 Marylanders enrolled in opioid treatment programs (OTPs) receiving methadone and buprenorphine, in conjunction with counseling and other medical services.

Providers know that the smallest barriers to accessing treatment when someone is ready and willing can be devastating. Prior authorizations can add hours and even days to the amount of time before starting treatment. For people with opioid use disorders, this wait means someone could start experiencing the symptoms of withdrawal, and that can end poorly if the person leaves the waiting room to self-medicate.

One of the ways to ensure timely access to medications for opioid use disorders is the removal of prior authorization requirements. Calls for the removal of prior authorizations have come from the Centers for Medicare and Medicaid Services, the American Medical Association, the National Academy of Medicine, and the Legal Action. As recently as October of 2021, the Milbank Memorial Fund published a set of recommendations urging policymakers move to prohibit prior authorizations in Medicaid for medications for opioid use disorders. In states that had temporarily ended prior authorizations during the COVID-19 pandemic, Milbank recommended making them permanent.

In the midst of this opioid overdose crisis, Medicaid should take every possible measure to ensure people with opioid use disorders have access to treatment that includes unencumbered access to the medication deemed most appropriate by a patient and their health care provider. In 2017, Maryland passed a law to prohibit prior authorizations in the commercial insurance market. The carriers understood the importance of this policy and fully supported it. People enrolled in Medicaid should have the same access.

In addition to the need for equity, stability in access is needed. In 2016, a change was made to the opioid treatment medications on Medicaid's preferred drug list for non-clinical reasons. This change caused providers and clients to choose between the time consuming process of acquiring a prior authorization, or changing their medication. Passing this bill will prevent these sometimes politically-driven decisions from negatively impacting this vulnerable population.

We urge a favorable report on HB 578.

MATOD members include community and hospital based Opioid Treatment Programs, local Health Departments, local Addiction and Behavioral Health Authorities and Maryland organizations that support evidence-based Medication Assisted Treatment. MATOD members include thousands of highly trained and dedicated addiction counselors, clinical social workers, physicians, nurse practitioners, physician assistants, nurses, peer recovery specialists and dedicated staff who work every day to save and transform lives.