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House Health and Government Operations Committee March 7, 2023

House Bill 953 Public Health – Overdose and Infectious Disease Prevention Services Program

Support

The Maryland Association for the Treatment of Opioid Dependence (MATOD) supports House Bill 953, which will allow jurisdictions to develop Overdose and Infectious Disease Prevention programs to reduce fatal and non-fatal overdoses, and provide a pathway for people toward needed health care.

Fatal Opioid-related overdoses climbed over 14% from January to September 2020 compared to the same 2019 time-frame. The current increase in fatal overdoses translates to the loss of over 2,400 Marylanders during 2020 from Opioid misuse. Despite Maryland's continued efforts of prevention, enforcement and treatment & recovery, opioid addiction and misuse in 2020 will unfortunately claim the largest number of Maryland lives in any single year on record.

Maryland's "all hands on deck" "all tools available" approach has effectively saved lives with harm reduction efforts of increased naloxone distribution and syringe exchange services; increased access and availability to evidenced-based medication assisted treatment with methadone and buprenorphine; greater implementation of peer recovery specialists in medical and community settings; and creative jurisdictional Opioid Intervention Teams across the state. More is urgently needed, however, in order to save lives and change the trajectory of the continued opioid crisis.

Substance use disorder treatment is only be effective when and if it is received. The U.S. Surgeon General's 2016 "Facing Addiction" report noted that "only 1 in 10 people with a substance use disorder receive any type of substance use treatment." HB 953 can provide life-saving services for those 90% of Marylanders with the manageable disease of addiction who are not yet engaged in treatment.

The proposed Overdose and Infectious Disease Prevention Services Program is based on similar programs operating in more than sixty (60) cities in ten (10) countries, and most recently in New York City. The results and evidence from these successful harm-reduction facilities is unequivocal – they reduce overdose deaths, provide an entry into treatment, reduce public use and publicly discarded syringes, are cost-effective and they do not encourage or increase additional drug use or crime.

Maryland needs to add this tool in the great work being done to reduce overdose deaths and improve access to needed health care.

MATOD urges a favorable report on HB 953.