



Ashley Woolard, Staff Attorney  
Robin McNulty, Institutional Giving Manager  
Public Justice Center  
201 North Charles Street, Suite 1200  
Baltimore, Maryland 21201  
410-625-9409, ext. 224  
[woolarda@publicjustice.org](mailto:woolarda@publicjustice.org)

---

**SB 83**

**Public Health - Overdose and Infectious Disease Prevention Services Program**  
**Hearing of the Senate Finance Committee**  
**February 4, 2025**  
**1:00 PM**

**FAVORABLE**

The Public Justice Center (PJC) is a not-for-profit civil rights and anti-poverty legal services organization which seeks to advance social justice, economic and racial equity, and fundamental human rights in Maryland. Our Health and Benefits Equity Project advocates to protect and expand access to healthcare and safety net services for Marylanders struggling to make ends meet. We support policies and practices that are designed to eliminate economic and racial inequities and enable every Marylander to attain their highest level of health. The **PJC strongly supports SB 83**, which would establish an Overdose and Infectious Disease Prevention Services Program administered by community-based organizations to provide overdose prevention sites. It would also require that the Maryland Department of Health develop these sites in urban, suburban and rural areas.

According to the Maryland Department of Health, we lost 1,689 Marylanders to fatal overdoses between December 2023 to November 2024.<sup>1</sup> Maryland also has high Hepatitis C infection rates, a disease that kills more Americans than any other infectious disease. Additionally, research supports that Hepatitis C has a disproportionate impact on non-Hispanic American Indian/Alaska Native and non-Hispanic African Americans who have the highest reported rates of chronic Hepatitis C infectious at 66.9 cases per 100,000 people.<sup>2</sup> Further, injection drug use is still the most common means of Hepatitis C transmission.<sup>3</sup>

**We urge the Maryland General Assembly to authorize overdose and infectious disease prevention services, an intervention proven by more than 35 years of research to decrease overdose deaths.** The proposed Overdose and Infectious Disease Prevention Services Program mirrors the 200 evidence-based public health interventions already established in 14 countries, including two in the United States. Trained personnel monitor participants for signs of

---

<sup>1</sup> Maryland Department of Health, Maryland Vital Statistics: Unintentional Drug-and Alcohol-Related Intoxication Deaths in Maryland (February 2024),

[https://health.maryland.gov/vsa/Documents/Overdose/Quarterly%20Reports/2023\\_Q3\\_IntoxReport.pdf](https://health.maryland.gov/vsa/Documents/Overdose/Quarterly%20Reports/2023_Q3_IntoxReport.pdf).

<sup>2</sup> CDC, Viral Hepatitis, [2021 Hepatitis C | Viral Hepatitis Surveillance Report | CDC](#) (last visited on January 31, 2025).

<sup>3</sup> *Id.*

overdose and intervene to prevent or reverse overdoses. In addition to overdose prevention services, OPSs provide a welcoming space that help bring drug use indoors and connect people to long-term, life-sustaining resources, like addiction services and social supports, including voluntary treatment. Research supports that stigma against people living with substance use disorders can limit the willingness of individuals to seek treatment.<sup>4</sup> It is critical that individuals with substance use disorders not only be provided immediate access to Naloxone/Narcan (overdose reversal drug), but also access to drug treatment, education and peer support to recover long-term from addiction.

**SB 83, if passed, would create access to Overdose Prevention Sites (OPS) which are revolutionary, holistic tools aimed at reducing overdose deaths, HIV and Hepatitis C infections and stigma against individuals with substance use disorders.** By providing access to sterile needles to individuals who use injectable drugs, Maryland could significantly reduce the rate of HIV and Hepatitis C infections. OPS would also offer testing for HIV, Hepatitis C and sexually transmitted infections and referrals for treatment, allowing individuals who have contracted these infections to be promptly connected to care. It is time for Maryland to invest in OPS as a strategy to help end the opioid epidemic and connect individuals with substance use disorders to quality and compassionate care.

For these reasons, the Public Justice Center urges the committee to issue a **FAVORABLE** report for **SB 83**. Thank you for your consideration of our testimony. If you have any questions about this testimony, please contact Ashley Woolard at 410-625-9409 x 224 or [woolarda@publicjustice.org](mailto:woolarda@publicjustice.org).

---

<sup>4</sup> Lawrence Yang, et. al., *Stigma and Substance Use Disorders: An Internal Phenomenon* (September 1, 2018), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5854406/>.