

Del Bhandari HB 1310 Written Testimony.docx.pdf

Uploaded by: Harry Bhandari

Position: FAV

Madam Chair Beidle, Vice-Chair Hayes, and distinguished members of the Committee,

HB1310 expands the Maryland Prescription Drug Repository Program by allowing out-of-state pharmacies to participate, increasing Marylanders' access to affordable, donated prescription medications.

A July 2022 survey of over 1,300 Maryland adults found that 55% faced at least one healthcare affordability burden, while 48% experienced a cost-related barrier to care within the previous year. Alarming, 23% of respondents reported skipping doses, cutting pills in half, or not filling prescriptions due to cost.

While broader national and state efforts aim to address the high cost of prescription drugs, immediate action is needed to expand access to affordable medications. Prescription drug donation has the potential to significantly improve access, yet up to \$11 billion in unopened, unexpired medications are destroyed annually—\$5 billion from hospitals and long-term care facilities alone. Many of these medications could be safely collected and redistributed to patients in need at a low cost, reducing both medical waste and financial strain on Marylanders.

In 2006, the General Assembly unanimously passed legislation establishing the Prescription Drug Repository Program, creating a framework to safely dispense donated medications to those in need. However, the program has not met its original goals. Currently, only two independent Maryland pharmacies are approved to re-dispense donated drugs, and many pharmacies face barriers to participation—particularly out-of-state pharmacies.

This bill would enable the Board to approve out-of-state pharmacies as repositories, allowing Maryland residents to benefit from well-established, multi-state drug donation networks. It would also allow Maryland donors and patients to work with top national organizations specializing in safe medication redistribution.

I appreciate the thoughtful discussions around amendments to this bill. These changes ensure stronger oversight while maintaining the program's core goal—expanding access to affordable medications. By refining safety and operational guidelines, they help build confidence in the program and encourage broader participation. I believe these amendments enhance the bill's impact while addressing stakeholder concerns, and I support their inclusion.

I urge your support for this important initiative to expand access to affordable medications for Marylanders. Thank you.

SponsorAmendment_333622

Uploaded by: Harry Bhandari

Position: FAV



HB1310/333622/1

AMENDMENTS
PREPARED
BY THE
DEPT. OF LEGISLATIVE
SERVICES

21 MAR 25
15:48:46

BY: Delegate Bhandari
(To be offered in the Finance Committee)

AMENDMENTS TO HOUSE BILL 1310
(Third Reading File Bill)

AMENDMENT NO. 1

On page 1, in line 2, strike “**Out-of-State Pharmacies**” and substitute “**Revisions**”; strike beginning with “defining” in line 3 down through “Program” in line 5 and substitute “altering the Prescription Drug Repository Program, including by allowing certain entities located in another state to participate in the Program as drop-off sites and repositories, including over-the-counter drugs under the Program, and altering the individuals who are eligible to receive drugs or medical supplies under the Program; altering the persons for whom and the activities with respect to which certain immunity is provided under the Program”; in line 9, after “15-601” insert “through 15-609”; and strike in their entirety lines 12 through 16, inclusive.

AMENDMENT NO. 2

On page 2, in line 3, after “(c)” insert “**“DISPENSE” MEANS TO PROVIDE:**

(1) A PRESCRIPTION DRUG OR MEDICAL SUPPLY IN ACCORDANCE WITH A PRESCRIPTION; OR

(2) AN OVER-THE-COUNTER DRUG OR MEDICAL SUPPLY.

(D)”;

in the same line, strike “or” and substitute a comma; in the same line, after “facility” insert “**, OR OTHER ENTITY PARTICIPATING IN A DRUG DONATION OR REPOSITORY PROGRAM AND**”; in line 5, after “drugs” insert “**, OVER-THE-COUNTER DRUGS,**”; in

line 6, strike “and”; in line 7, after “(2)” insert “IS LOCATED WITHIN THE STATE OR IN ANOTHER STATE; AND”

(3)”;

strike in their entirety lines 9 and 10; in line 11, after “(E)” insert ““ELIGIBLE PATIENT” MEANS AN INDIVIDUAL WHO, THROUGH SELF-ATTESTATION, IS INDIGENT, UNINSURED, UNDERINSURED, OR ENROLLED IN A PUBLIC HEALTH BENEFITS PROGRAM.”

(F)”;

in line 12, strike “(F)” and substitute “(G)”; in line 13, strike “Does” and substitute “IF THE LICENSED PHARMACY IS LOCATED IN THE STATE, DOES”; strike beginning with “OR,” in line 14 down through “AUTHORITY” in line 15; in line 16, strike “and”; in line 17, after “(3)” insert “IS LOCATED IN THE STATE OR IN ANOTHER STATE; AND”

(4)”;

in lines 18, 20, and 22, in each instance, after “drugs” insert “, OVER-THE-COUNTER DRUGS,”; in lines 21 and 23, in each instance, strike “needy individuals” and substitute “ELIGIBLE PATIENTS”; after line 23, insert:

“(H) “TAMPER-EVIDENT PACKAGING” MEANS A PACKAGING SYSTEM THAT:

(1) MAY INVOLVE AN IMMEDIATE-CONTAINER AND CLOSURE SYSTEM, SECONDARY-CONTAINER OR CARTON SYSTEM, TERTIARY-CONTAINER SYSTEM, OR OTHER COMBINATION OF SYSTEMS INTENDED TO PROVIDE A VISUAL INDICATION OF PACKAGE INTEGRITY;

(2) MAY CONTAIN UNIT-DOSE OR MULTI-DOSE CONTENTS; AND

(3) HAS ONE OR MORE INDICATORS OR BARRIERS TO ENTRY THAT:

(I) IF BREACHED OR MISSING, CAN REASONABLY BE EXPECTED TO PROVIDE VISIBLE EVIDENCE TO CONSUMERS THAT TAMPERING HAS OCCURRED; AND

(II) IF HANDLED IN A REASONABLE MANNER DURING MANUFACTURE, DISTRIBUTION, OR RETAIL DISPLAY, IS DESIGNED TO REMAIN INTACT.

15-602.

(a) There is a Prescription Drug Repository Program regulated by the Board.

(b) The purpose of the Program is to:

(1) Accept prescription drugs, OVER-THE-COUNTER DRUGS, and medical supplies donated for the purpose of dispensing to [needy individuals] ELIGIBLE PATIENTS; and

(2) Accept prescription drugs, OVER-THE-COUNTER DRUGS, and medical supplies returned to a pharmacy for the purpose of proper disposal.

15-603.

(a) Except as provided in subsection (b) of this section, the Program may accept for the purpose of dispensing only:

(Over)

(1) Prescription drugs AND OVER-THE-COUNTER DRUGS in their original unopened, sealed, and tamper-evident [unit dose] packaging, INCLUDING DRUGS THAT HAVE BEEN PACKAGED BY A MANUFACTURER OR HAVE BEEN REPACKAGED BY AN ENTITY AUTHORIZED TO REPACKAGE DRUGS IN THE STATE IN WHICH THE ENTITY IS LOCATED; and

(2) Medical supplies in their original unopened and sealed packaging.

(b) The Program may accept and dispense prescription drugs AND OVER-THE-COUNTER DRUGS packaged in single unit doses when the outside packaging is opened if the single unit dose packaging is undisturbed.

(c) The Program may not accept prescription drugs, OVER-THE-COUNTER DRUGS, or medical supplies for dispensing that:

(1) Bear an expiration date that is less than 90 days from the date the drug is donated;

(2) May be adulterated, according to the standards of § 21-216 of this article; or

(3) Belong to a category of unacceptable drugs established under § 15-608(b)(1) of this subtitle.

15-604.

(a) (1) Any person may donate prescription drugs, OVER-THE-COUNTER DRUGS, or medical supplies to the Program.

(2) THE PROGRAM MAY RECEIVE DONATED PRESCRIPTION DRUGS, OVER-THE-COUNTER DRUGS, OR MEDICAL SUPPLIES FROM ANY PERSON.

(b) Prescription drugs, ~~OVER-THE-COUNTER DRUGS~~, or medical supplies may be donated only [at] **TO** a drop-off site designated for that purpose by the Board.

(c) A drop-off site **LOCATED IN THE STATE** shall:

(1) Require a donor to complete and sign a donor form releasing the prescription drugs, ~~OVER-THE-COUNTER DRUGS~~, or medical supplies to the Program;

(2) Store donated prescription drugs, ~~OVER-THE-COUNTER DRUGS~~, and medical supplies in a secure location used exclusively for the Program; and

(3) Forward, at the cost of the designated drop-off site, all donated prescription drugs, ~~OVER-THE-COUNTER DRUGS~~, and medical supplies to a [central] repository.

(d) A drop-off site **LOCATED IN THE STATE** may not:

(1) Dispense donated prescription drugs, ~~OVER-THE-COUNTER DRUGS~~, or medical supplies;

(2) Resell prescription drugs, ~~OVER-THE-COUNTER DRUGS~~, or medical supplies donated to the Program; or

(3) Charge a fee for accepting a donation.

(E) **CONSISTENT WITH ITS APPROVAL BY THE BOARD, AN ENTITY LOCATED IN ANOTHER STATE:**

(1) **MAY PARTICIPATE IN THE PROGRAM AS A DROP-OFF SITE; AND**

(Over)

(2) MAY ACCEPT DONATED PRESCRIPTION DRUGS, OVER-THE-COUNTER DRUGS, AND MEDICAL SUPPLIES FROM A PERSON, UNLESS OTHERWISE PROHIBITED BY FEDERAL LAW OR THE LAWS OF THE STATE IN WHICH THE ENTITY IS LOCATED.;

in line 25, strike “Medbank of Maryland, Inc., or another” and substitute “A”; in line 26, strike the comma; and in line 27, after “repository” insert “LOCATED IN THE STATE”.

On page 3, in lines 1 and 3, in each instance, after “drugs” insert “, OVER-THE-COUNTER DRUGS,”; in lines 4 and 8, in each instance, strike “needy individuals” and substitute “ELIGIBLE PATIENTS”; in lines 5, 7, 9, 11, 14, 16, and 18, in each instance, after “drugs” insert “, OVER-THE-COUNTER DRUGS,”; in line 17, after “dispensed” insert “OR OTHERWISE PROVIDED TO THE PATIENT”; in lines 18 and 27, in each instance, after “repository” insert “LOCATED IN THE STATE”; in line 20, strike “§ 15–606” and substitute “§ 15–606(A)”; in lines 28 and 30, in each instance, after “drug” insert “, OVER-THE-COUNTER DRUG,”; and strike beginning with the third comma in line 30 down through “entailed” in line 31.

On page 4, in line 2, after “drug” insert “, OVER-THE-COUNTER DRUG,”; in line 3, after “drugs” insert “, OVER-THE-COUNTER DRUGS,”; in line 6, after “(g)” insert “CONSISTENT WITH ITS APPROVAL BY THE BOARD, AN ENTITY LOCATED IN ANOTHER STATE:”

(1) MAY PARTICIPATE IN THE PROGRAM AS A REPOSITORY; AND

(2) SHALL DISPENSE DONATED PRESCRIPTION DRUGS, OVER-THE-COUNTER DRUGS, AND MEDICAL SUPPLIES TO RESIDENTS OF THE STATE ONLY IN ACCORDANCE WITH:

(I) FEDERAL LAW;

(II) LAWS OF THE STATE IN WHICH THE ENTITY IS LOCATED
PERTAINING TO STORAGE AND DISTRIBUTION OF PRESCRIPTION DRUGS, OVER-
THE-COUNTER DRUGS, AND MEDICAL SUPPLIES; AND

(III) STATE LAWS PERTAINING TO NONRESIDENT
PHARMACIES.

(H)”;

in line 8, strike “(h)” and substitute “(I)”; in line 11, strike “the” and substitute “A”; after
line 11, insert:

“(J) A PERSON DONATING, TRANSFERRING, OR RECEIVING
PRESCRIPTION DRUGS, OVER-THE-COUNTER DRUGS, AND MEDICAL SUPPLIES,
OR FACILITATING THE DONATION, TRANSFER, OR RECEIPT, IN ACCORDANCE
WITH THIS SUBTITLE MAY NOT BE REQUIRED TO HOLD A WHOLESALE
DISTRIBUTION LICENSE.

(K) A REPOSITORY LOCATED IN ANOTHER STATE OPERATING PRIMARILY
FOR THE PURPOSE OF PARTICIPATING IN A DRUG DONATION OR REPOSITORY
PROGRAM MAY NOT BE REQUIRED TO POSSESS A COMPREHENSIVE OR MINIMUM
SUPPLY OF PRESCRIPTION DRUGS, OVER-THE-COUNTER DRUGS, OR MEDICAL
SUPPLIES.

(L) A REPOSITORY LOCATED IN THE STATE MAY TRANSFER DONATED
PRESCRIPTION DRUGS, OVER-THE-COUNTER DRUGS, AND MEDICAL SUPPLIES
TO:

(1) ANOTHER REPOSITORY LOCATED IN THE STATE; OR

(Over)

(2) A DROP-OFF SITE LOCATED IN ANOTHER STATE, A REPOSITORY LOCATED IN ANOTHER STATE, OR ANOTHER ENTITY LOCATED IN ANOTHER STATE THAT PARTICIPATES IN A DRUG DONATION OR REPOSITORY PROGRAM IN ACCORDANCE WITH THE LAWS OF THE STATE IN WHICH THE ENTITY IS LOCATED ONLY IF THERE IS NO NEED FOR THE DONATED PRESCRIPTION DRUGS, OVER-THE-COUNTER DRUGS, OR MEDICAL SUPPLIES FOR USE BY ELIGIBLE PATIENTS IN THE STATE, AS DETERMINED BY THE TRANSFERRING REPOSITORY.

(M) UNLESS OTHERWISE PROHIBITED BY FEDERAL LAW OR THE LAWS OF THE STATE IN WHICH IT IS LOCATED, A DROP-OFF SITE OR REPOSITORY LOCATED IN ANOTHER STATE MAY PERFORM AND RECEIVE:

(1) INTRACOMPANY TRANSFERS OF DONATED PRESCRIPTION DRUGS, OVER-THE-COUNTER DRUGS, AND MEDICAL SUPPLIES; AND

(2) TRANSFERS OF DONATED PRESCRIPTION DRUGS, OVER-THE-COUNTER DRUGS, AND MEDICAL SUPPLIES FROM DROP-OFF SITES LOCATED IN ANOTHER STATE, REPOSITORIES LOCATED IN ANOTHER STATE, OR OTHER ENTITIES PARTICIPATING IN A DRUG DONATION OR REPOSITORY PROGRAM IN ACCORDANCE WITH THE LAWS OF THE STATE IN WHICH THE ENTITY IS LOCATED.

15-606.

(A) To be eligible to receive donated prescription drugs, OVER-THE-COUNTER DRUGS, or medical supplies FROM A REPOSITORY LOCATED IN THE STATE, an individual [shall] MUST:

(1) Be a resident of the State; and

(2) Be [a needy] AN ELIGIBLE patient[, as indicated by the individual's health care practitioner].

(B) TO BE ELIGIBLE TO RECEIVE DONATED PRESCRIPTION DRUGS, OVER-THE-COUNTER DRUGS, OR MEDICAL SUPPLIES FROM A REPOSITORY LOCATED IN ANOTHER STATE, AN INDIVIDUAL MUST BE AN ELIGIBLE PATIENT.”;

in lines 14 and 21, in each instance, after “drugs” insert “, OVER-THE-COUNTER DRUGS,”; in line 18, strike “and”; in line 19, after “Pharmacists” insert “;

(6) PHARMACY TECHNICIANS; AND

(7) STAFF EMPLOYED BY OR VOLUNTEERING FOR AN ENTITY PARTICIPATING IN THE PROGRAM”;

in line 20, after “accepting,” insert “TRANSFERRING,”; in line 21, after “Program,” insert “OR FACILITATING THE DONATION, ACCEPTANCE, TRANSFER, DISPOSITION OF, OR DISPENSING,”; and after line 31, insert:

“15-608.

(a) On or before January 1, 2007, and in consideration of the recommendations of the Task Force on the Establishment of a Prescription Drug Repository Program, the Board shall adopt regulations governing the Program.

(b) The regulations shall include:

(1) Categories of drugs that a repository will not accept, including a statement as to why the drug is ineligible for donation;

(Over)

(2) A standard form each donor **DONATING TO A DROP-OFF SITE LOCATED IN THE STATE** must sign stating that the donor is the owner of the drugs and intends to voluntarily donate them to the Program;

(3) Requirements for designation of drop-off sites to accept donated prescription drugs, **OVER-THE-COUNTER DRUGS**, and medical supplies under the Program;

(4) Requirements for designation of repositories to dispense or dispose of donated prescription drugs, **OVER-THE-COUNTER DRUGS**, and medical supplies under the Program;

(5) Standards and procedures for **DROP-OFF SITES AND REPOSITORIES LOCATED IN THE STATE RELATED TO** accepting, safely storing, dispensing, shipping, and disposing of donated prescription drugs, **OVER-THE-COUNTER DRUGS**, and medical supplies;

(6) Standards and procedures for **REPOSITORIES LOCATED IN THE STATE RELATED TO** inspecting donated prescription drugs, **OVER-THE-COUNTER DRUGS**, and medical supplies intended for dispensing to determine that:

(i) The [original packaging is:

1. Sealed and tamper-evident; and

2. In the case of prescription drugs, in the undisturbed single unit dose packaging; and] **PRESCRIPTION DRUGS AND OVER-THE-COUNTER DRUGS ARE IN ORIGINAL UNOPENED, SEALED, AND TAMPER-EVIDENT PACKAGING, WHICH MAY INCLUDE PACKAGING PLACED BY THE MANUFACTURER AND PACKAGING PLACED BY AN ENTITY AUTHORIZED TO REPACKAGE DRUGS IN THE STATE IN WHICH THE ENTITY IS LOCATED;**

(ii) The MEDICAL SUPPLIES ARE IN THEIR ORIGINAL UNOPENED AND SEALED PACKAGING; AND

(III) THE prescription drugs, OVER-THE-COUNTER DRUGS, and medical supplies are unadulterated, safe, and suitable for dispensing;

(7) [A standard form for health care practitioners to submit to a repository to indicate a patient's need for the Program;

(8)] A standard form that an individual receiving a prescription drug, OVER-THE-COUNTER DRUG, or medical supply from [the Program] A REPOSITORY LOCATED IN THE STATE must sign before receiving the drug or supply to confirm that the individual understands that:

(i) The individual is receiving prescription drugs, OVER-THE-COUNTER DRUGS, or medical supplies that have been donated to the Program; and

(ii) Entities involved in the Program have certain immunity from liability;

[(9)] (8) Record keeping and reporting requirements for a repository LOCATED IN THE STATE; and

[(10)] (9) Any other standards and procedures the Board considers appropriate FOR DROP-OFF SITES AND REPOSITORIES LOCATED IN THE STATE.”.

On page 5, in line 2, after “repository” insert “LOCATED IN THE STATE”; in line 3, after “Maintain” insert “WRITTEN OR ELECTRONIC”; in lines 3 and 9, in each instance, after “drugs” insert “, OVER-THE-COUNTER DRUGS,”; in line 8, after

(Over)

“repositories” insert “LOCATED IN THE STATE”; and in line 10, strike “the repository” and substitute “REPOSITORIES LOCATED IN THE STATE”.

MCHI_FAV_HB1310_SenateHearing.pdf

Uploaded by: Vincent DeMarco

Position: FAV



Testimony in Support of House Bill 1310
Prescription Drug Repository Program – Out-of-State Pharmacies
By Vincent DeMarco, President of Maryland Citizens' Health Initiative
Before the Senate Finance Committee
March 25, 2025

Chair Beidle, Vice-Chair Hayes, and Members of the Committee;

Thank you for your consideration of House Bill 1310, which would allow our state to expand our existing Prescription Drug Repository Program to include out-of-state pharmacies, greatly expanding the pool of available medications available for patients that participate in this program. I am writing today in support of this legislation on behalf of our individual organization, Maryland Citizens' Health Initiative, Inc, as we have not reviewed the bill with the full Maryland Health Care for All! Coalition.

As you know, the skyrocketing cost of prescription drugs is a critical issue that we face as a state and a nation. While we are all hurt by these exorbitant costs, as these prices burden taxpayers and drive-up insurance premiums, patients who struggle to afford these lifesaving medications face the most suffering. We know from polling that 45% of Marylanders report difficulty affording their prescription drugs, with one-third of respondents indicating they have skipped a dose, rationed medication, or left a prescription unfilled due to cost.¹

The Prescription Drug Repository Program is a common-sense way to get unused medication safely and affordably into the hands of patients who need it. By expanding eligibility, we enable Maryland patients to utilize existing programs in a broader network, increasing the availability of medications, improving efficiency in medication delivery, and reducing prescription drug waste.

We thank Delegate Bhandari for introducing this important bill and the Committee for your work on this issue. We respectfully request a favorable report of HB 1310.

¹ <https://healthcareforall.com/wp-content/uploads/2023/09/Statewide-MD-Poll-on-Prescription-Drug-Affordability-PDAB-091123.pdf>

Maryland HB 1310 Written Comment.pdf

Uploaded by: George Wang

Position: FWA



March 21, 2025

Chair Pamela Beidle
3 East Miller Senate Office Building
Annapolis, Maryland 21401

RE: Comments on HB 1310

To the Finance Committee Members:

We are writing to comment on HB 1310 regarding the Prescription Drug Repository Program. Thank you for the opportunity to submit these comments. Please let us know if we can further clarify anything or provide any additional information.

About SIRUM

SIRUM is a 501(c)3 nonprofit, founded at Stanford University that helps implement state-based programs to donate unused medications to patients in need. Donated medication is often the safety-net's last line of defense for vulnerable patients. SIRUM is the national leader in operationalizing donation programs, currently assisting donation programs in eleven states, helping tens of thousands of patients access millions of dollars of donated medication that they would not otherwise have been able to afford or access. SIRUM has provided testimony on over 25 state laws and regulations.

Support with Amendments

We believe that the modifications to the Prescription Drug Repository Program presented in HB 1310, if amended, have enormous potential to reduce health care costs and reduce needless waste for Maryland and Maryland residents.

We support HB 1310 with amendments.

Sincerely,





George Wang, PhD
Co-Founder & Director

SIRUM | Saving Medicine. Saving Lives.



HB1310_BoPharm_FWA

Uploaded by: State of Maryland

Position: FWA



Wes Moore, Governor · Aruna Miller, Lt. Governor · Ryan Moran, DrPH, MHSA, Acting Secretary

**2025 SESSION
MARYLAND BOARD OF PHARMACY
POSITION PAPER**

BILL NO: HB 1310 – Prescription Drug Repository Program – Out-of-State Pharmacies

COMMITTEE: Finance Committee

POSITION: Letter of Support with Amendments

TITLE: Prescription Drug Repository Program – Out-of-State Pharmacies

The State Board of Pharmacy (the “Board”) respectfully submits this Letter of Support with Proposed Amendments for House Bill 1310 – Prescription Drug Repository Program - Out-of-State Pharmacies (“HB 1310”). Although the purpose of the bill is well-intended, the Board is extremely concerned about the use of expired medications.

The primary goal of the Board of Pharmacy is to ensure the safe delivery of pharmaceutical services to the people of Maryland. While the Board supports the amendments submitted by Delegate Bhandari as drafted, it received a request for a further amendment to allow a repository to accept donated drugs with less than a 90-day expiration date in order to increase access to drugs in high demand. The Board supports such an amendment provided that there is assurance that any donated drug that is re-dispensed bears an expiration date that fully covers the days supply prescribed. In other words, a repository may only dispense donated drugs, including drugs that are short-dated, provided that the drugs bear an expiration date that covers the entire course of the prescription.

The proposed amendment should read as follows:

“(c) The Program may not accept prescription drugs, over-the-counter drugs, or medical supplies for dispensing that:

(1) (i) Bear an expiration date that is less than 90 days from the date the drug is donated UNLESS THE DRUG IS IN HIGH DEMAND; AND

(ii) NOTWITHSTANDING (C)(1)(I), A REPOSITORY MAY NOT DISPENSE ANY DONATED DRUG THAT DOES NOT BEAR AN EXPIRATION DATE THAT COVERS THE FULL DAYS SUPPLY PRESCRIBED.”

Therefore, the Board would urge the Committee to submit a favorable report for HB1310 with amendments. For more information, please contact Julie Gaskins, Legislative Liaison, at 410-764-4709 or julie.gaskins2@maryland.gov, or Deena Speights-Napata, MA, Executive Director, Maryland Board of Pharmacy at (410) 764-4753 or deena.speights-napata@maryland.gov.

2025 HB1310 Opp Drug Repository Program.pdf

Uploaded by: Deborah Brocato

Position: UNF



Opposition Statement HB1310

Prescription Drug Repository Program – Out-of-State Pharmacies
Deborah Brocato, Legislative Consultant
Maryland Right to Life

On behalf of our Board of Directors and followers across the State, Maryland Right to Life opposes HB1310 without an amendment to exclude its use for abortion purposes.

Maryland Right to Life opposes the promotion and funding of abortion, including the expansion of accessibility to the dangerous and deadly abortion drugs. This bill extends the Prescription Drug Repository Program to pharmacies outside of Maryland. The State of Maryland already spends over \$33 million for abortion, including the use of taxpayer funded Medicaid to cover the cost of abortion drugs. Marylanders have many other health concerns, such as diabetes, wound care, heart disease, lung disease, post-operative care, etc., (and the list goes on) that should be addressed, but the State of Maryland prioritizes abortion. Governor Wes Moore and the Board of Public Works spent over \$1.3 million to stockpile Mifepristone and Misoprostol. Maryland taxpayers paid for this, and they should not be forced to fund abortion drugs for other states. To prevent appropriations from this bill from being exploited by the profit-minded, multi-billion dollar abortion industry, we ask for an amendment to exclude abortion purposes from this bill.

Maryland taxpayers subsidize the abortion industry in Maryland through direct Maryland Medicaid reimbursements to abortion providers, through various state grants and contracts, and through pass-through funding in various state programs. Health insurance carriers are required to provide reproductive health coverage to participate with the Maryland Health Choice program.

Programs that utilize public funding for abortion-related activities include:

- the Maryland State Department of Education,
- Maryland Department of Health,
- Maryland Family Planning Program,
- Maternal and Child Health Bureau,
- the Children's Cabinet,
- Maryland Council on School Based Health Centers,
- Maryland Assembly for the Advancement of School Based Health,
- Community Health Resource Commission,
- Maryland Children's Health Program (MCHP),
- Maryland Stem Cell Research Fund and even the
- Maryland Department of Public Works, and
- Maryland Abortion and Reproductive Clinical Health Training Program.



Abortion is not healthcare, and abortion is never medically necessary. The fact that 85% of OB-GYNs in a representative national survey do not commit abortions is glaring evidence that abortion is not an essential part of women's healthcare. **Abortion enables the exploitation of women and girls by sexual abusers and sex traffickers to continue their crimes and victimization.**

Funding restrictions are constitutional. The Supreme Court of the United States, in *Dobbs v. Jackson Women's Health* (2022), overturned *Roe v. Wade* (1973) and held that there is no right to abortion found in the Constitution of the United States. As early as 1980 the Supreme Court affirmed in *Harris v. McRae*, that *Roe* had created a limitation on government, not a government funding entitlement. The Court ruled that the government may distinguish between abortion and other procedures in funding decisions – noting that “*no other procedure involves the purposeful termination of a potential life*” and held that there is “*no limitation on the authority of a State to make a value judgment favoring childbirth over abortion, and to implement that judgment by the allocation of public funds.*”

More funding and resources directed toward abortion means less funding and resources for other health care concerns, including support for women choosing to continue their pregnancies. For these reasons, we respectfully ask to amend HB1310 to exclude the bill being used for abortion purposes. Without an amendment, we urge you to oppose HB1310.

HB 1310 - FIN - Opposition.pdf

Uploaded by: Kristopher Rusinko

Position: UNF



Wes Moore, Governor · Aruna Miller, Lt. Governor · Ryan Moran, DrPH, MHSA, Acting Secretary

**2025 SESSION
MARYLAND BOARD OF PHARMACY
POSITION PAPER**

BILL NO: HB 1310 – Prescription Drug Repository Program – Out-of-State Pharmacies
COMMITTEE: Finance Committee
POSITION: Opposition

TITLE: Prescription Drug Repository Program – Out-of-State Pharmacies

The State Board of Pharmacy (the “Board”) respectfully submits this opposition for House Bill 1310 – Prescription Drug Repository Program - Out-of-State Pharmacies (“HB 1310”). Although the purpose of the bill is well-intended, the Board is extremely concerned about the use of expired medications.

The primary goal of the Board of Pharmacy is to ensure the safety of the people of Maryland. The distribution of expired medications exposes patients to a gravely detrimental risk. This is a safety risk that the Board is not willing to take regardless of the safeguards a company can self-attest to. With public safety being the number one goal, the Board feels very strongly about prohibiting the use of expired medications.

The Board also feels very strongly about changing the concept of the repository program. The repository program was designed to serve poor residents throughout the State of Maryland. The Board remains extremely concerned that allowing out-of-state repositories to dispense to non-eligible patients directly conflicts with the stated purpose of the State’s repository program. Given the current economic conditions, the language in this bill would place Furthermore, since such dispensing would be solely “as determined by the repository”, it would allow for a substantial opportunity for abuse at the expense of eligible Maryland patients.

Therefore, the Board would urge the Committee to submit an unfavorable report for HB1310. For more information, please contact Julie Gaskins, Legislative Liaison, at 410-764-4709 or julie.gaskins2@maryland.gov, or Deena Speights-Napata, MA, Executive Director, Maryland Board of Pharmacy at (410) 764-4753 or deena.speights-napata@maryland.gov.

HB 1310 - BoPharm - FIN - LOO.pdf

Uploaded by: State of Maryland (MD)

Position: UNF



Wes Moore, Governor · Aruna Miller, Lt. Governor · Ryan Moran, DrPH, MHSA, Acting Secretary

**2025 SESSION
MARYLAND BOARD OF PHARMACY
POSITION PAPER**

BILL NO: HB 1310 – Prescription Drug Repository Program – Out-of-State Pharmacies
COMMITTEE: Finance Committee
POSITION: Opposition

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