



THE MARYLAND HOUSE OF DELEGATES
ANNAPOLIS, MARYLAND 21401

HB1131: Public Health - Buprenorphine - Training Grant Program and Workgroup
Health and Government Operations Committee
Wednesday, March 5th, 2025 1:00PM

HB1131 proposes a training grant program to train Maryland's paramedics to administer buprenorphine in the field. The aim of this bill is to equip paramedics across Maryland with the necessary training to initiate buprenorphine in the field, thereby enabling rapid and emergency access to the medication for individuals experiencing acute withdrawal symptoms. The bill also stipulates that a work group is convened to efficiently study access to buprenorphine in the state.

The goals of this work group are to address service gaps and ensure sustainable support for expansion efforts, with the report on findings due to the governor by December 31, 2025. The proposed work group will identify infrastructure needs for MIEMMS, linking patients to next-day care for ongoing treatment of opioid addiction with buprenorphine.

Buprenorphine is safe and effective when appropriately prescribed. It can weakly mimic the effects of opioids but is less likely to be fatal in case of an overdose, has lower abuse potential than opioids, and has the ability to block the full effects of subsequently ingested opioids thus providing disincentive for ongoing opioid use. Medically assisted treatment of opioid dependence is the most effective treatment at reducing mortality and lowering critical hospital or other acute care usage¹.

Evidence shows that commencing buprenorphine in the field, coupled with linkage to medical care, improves their retention rates and engagement in ongoing treatment for opioid dependence²³. As first responders, paramedics and EMTs are some of the only providers who may interact with those suffering from an opioid use disorder⁴. As such, they are well positioned to initiate buprenorphine in the field, especially in high-risk individuals that require naloxone reversal of opioid overdose and may often refuse transport to hospital after naloxone administration.

The bill aims to expand and streamline access to the life-saving medication buprenorphine, by leveraging the untapped potential of our specialized paramedics and EMTs, and investing funds from the opioid restitution fund to implement the initiative. This positive step of initiating pre-hospital buprenorphine to increase safety post-overdose, and simultaneously commence medical treatment of opioid use disorder will save lives. It will also bridge the gap and enhance access to community-based care for opioid dependence. By passing this bill, Maryland will lead the way in harm reduction and empower vulnerable Marylanders struggling with opioid addiction to take back control of their life.

I urge the committee to give a favorable report on HB 1131.

¹ [Comparative Effectiveness of Different Treatment Pathways for Opioid Use Disorder | Psychiatry and Behavioral Health | JAMA Network Open](#)

² [Prehospital Buprenorphine Treatment for Opioid Use Disorder by Paramedics: First Year Results of the EMS Buprenorphine Use Pilot - PubMed](#)

³ [City of Seattle to become first in nation with fire department EMTs administering buprenorphine medication in the field - Office of the Mayor](#)

⁴ [Department of Health partners with local responders to tackle opioid crisis](#)