

February 26, 2025

The Honorable Chair Delegate Joseline A. Peña-Melnyk
Chairman, Health Government and Operations Committee
Room 240 Taylor House Office Building
Annapolis, Maryland 21401

RE: SUPPORT of House Bill 845

(Public Health – Overdose and Infectious Disease Prevention Services Program) - FAVORABLE

Dear Chair Peña-Melnyk and members of the Health Government and Operations Committee,

My name is Celeste Fuentes, and I am writing to support House Bill 845, which would allow community-based organizations to establish overdose prevention programs (OPS) aimed at reducing the alarming number of overdose deaths occurring in Maryland.

I support OPS in Maryland based on my professional and personal experience in the harm reduction movement. I worked at the Drug Policy Alliance, helping to further drug policy advocacy and harm reduction efforts and, before that, at OnPoint NYC, where I assisted the Senior Director of Programs to help run the Drop-In Centers and the nation's first two legally sanctioned OPS centers, located in Washington Heights and East Harlem. I saw first-hand how this policy can keep people and communities safer. I have since relocated to Baltimore, where I work on the Harm Reduction Team at Behavioral Health System Baltimore. By joining states like Minnesota and Rhode Island in authorizing OPS programs, Maryland has the opportunity to become a national leader in addressing the overdose crisis through this innovative approach.

OPS programs are an evidence-based approach to reducing the harms of the opioid epidemic. Overdose deaths are prevalent across the country and have only been exacerbated by the COVID-19 pandemic. These programs provide a safe environment for people who use drugs, particularly those at the highest risk of overdose, with trained staff available to intervene and prevent or reverse overdose. OPS programs are designed to accommodate various drug use patterns and incorporate comprehensive harm reduction strategies to promote safer use. These strategies include drug-checking services for substances like fentanyl and xylazine, access to sterile equipment, and prioritizing oxygen interventions over naloxone. Additionally, OPS programs are often co-located with other supportive services, linking participants to vital resources such as restrooms, showers, laundry services, medical care, STI/HIV testing, case management, and even voluntary treatment options.

Between December 2023 and November 2024, we lost 1,689 Marylanders to fatal overdoses. We urge the Maryland General Assembly to authorize overdose and infectious disease prevention services, an intervention proven for over 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 across the world in 14 countries, including two in the United States.

This is an emergency and we urge you to act now. **We ask that the Health Government and Operations Committee give HB845 a favorable report.**