

MARYLAND PSYCHIATRIC SOCIETY



February 11, 2025

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

RE: Support – HB 1013: Maryland Medical Assistance Program and Health Insurance
- Nonopioid Drugs for the Treatment of Pain

Dear Chairwoman Pena-Melnyk and Honorable Members of the Committee:

The Maryland Psychiatric Society (MPS) and the Washington Psychiatric Society (WPS) are state medical organizations whose physician members specialize in diagnosing, treating, and preventing mental illnesses, including substance use disorders. Formed more than sixty-five years ago to support the needs of psychiatrists and their patients, both organizations work to ensure available, accessible, and comprehensive quality mental health resources for all Maryland citizens; and strive through public education to dispel the stigma and discrimination of those suffering from a mental illness. As the district branches of the American Psychiatric Association covering the state of Maryland, MPS and WPS represent over 1100 psychiatrists and physicians currently in psychiatric training.

The opioid crisis has demonstrated the vulnerability of pain patients to addiction, dependence, and sadly, lethal overdose. It would be ethically and morally irresponsible of physicians not to use a safer, non-opioid pain medication first if available. It would therefore be unethical for insurers to deny patients access to such medications. In addition, step-therapy and fail-first protocols interfere with physicians' judgment. Step therapy and fail first protocols substitute the judgement of pharmacy benefit managers and other bureaucrats for the judgment of the treating physician in treating a patient's pain. Step therapy and fail first protocols would force physicians to prescribe medication that in their judgment would not be effective in relieving patient's pain; and would therefore prolong patient's suffering unnecessarily. Pain and psychiatric conditions complicate each other and many of our patients require prolonged treatment for both. It would therefore also be cost-effective to minimize addiction in the population.

We therefore ask for a favorable report of HB 1013. If you have any questions regarding this testimony, please contact Lisa Harris Jones at lisa.jones@mdlobbyist.com.

Respectfully submitted,
The Maryland Psychiatric Society and the Washington Psychiatric Society
Legislative Action Committee