



The Maryland State Medical Society
1211 Cathedral Street
Baltimore, MD 21201-5516
410.539.0872
Fax: 410.547.0915
1.800.492.1056
www.medchi.org

House Health and Government Operations Committee

March 5, 2025

House Bill 1131 – *Public Health – Buprenorphine – Training Grant Program and Workgroup*

POSITION: SUPPORT

The Maryland State Medical Society (MedChi), the largest physician organization in Maryland, strongly supports House Bill 1131. This bill establishes the Buprenorphine Training Grant Program within the Maryland Department of Health to assist counties in offsetting the cost of training paramedics to administer buprenorphine. Under this legislation, counties may apply for grants that will be funded by an annual \$50,000 appropriation from the Opioid Restitution Fund, ensuring sustainable investment in expanding access to evidence-based opioid use disorder (OUD) treatment. Additionally, the Maryland Office of Overdose Response will convene a workgroup to study buprenorphine access across the state.

Buprenorphine is a well-established, evidence-based treatment for OUD that significantly reduces withdrawal symptoms, curbs cravings, and lowers the risk of overdose. However, timely access to this medication remains a challenge, particularly in emergency situations. By equipping paramedics with the ability to administer buprenorphine in the field, House Bill 1131 helps ensure that individuals experiencing opioid withdrawal or overdose can receive immediate treatment, reducing the likelihood of further harm and improving long-term recovery outcomes.

From a medical perspective, enabling paramedics to administer buprenorphine enhances the continuum of care. Early initiation of treatment in the pre-hospital setting facilitates smoother transitions to follow-up care with primary care physicians, addiction specialists, and behavioral health providers. This approach not only improves patient outcomes but also alleviates strain on emergency departments, which are often the primary point of contact for individuals experiencing withdrawal.

MedChi has long been an advocate for expanding access to buprenorphine and has actively participated in training programs to equip healthcare professionals with the necessary knowledge to administer this lifesaving medication. As outlined in MedChi's House of Delegates resolution from 2019, we recognize the critical role of buprenorphine training in addressing Maryland's opioid crisis and, if appropriate, would welcome the opportunity to facilitate future training efforts.

House Bill 1131 is a vital step toward reducing opioid-related fatalities, strengthening Maryland's response to the opioid crisis, and ensuring that individuals with OUD receive timely, evidence-based care. For these reasons, MedChi urges a favorable report on House Bill 1131.

For more information call:

Christine K. Krone
Andrew G. Vetter
J. Steven Wise
Danna L. Kauffman
410-244-7000

MEDCHI, THE MARYLAND STATE MEDICAL SOCIETY
HOUSE OF DELEGATES

Resolution 8-19

INTRODUCED BY: Opioid Task Force

SUBJECT: Support for Buprenorphine Training to Encourage More Buprenorphine
Providers

Whereas, the MedChi Opioid Task Force recognizes the value in Buprenorphine use in medication-assisted treatment (MAT) to help people reduce or quit their use of heroin or other opiates, such as pain relievers like morphine; and

Whereas, research has shown that buprenorphine in any formulation is effective for the treatment of chronic pain; and

Whereas, unlike methadone treatment, which must be performed in a highly structured clinic, buprenorphine is the first medication to treat opioid dependency that is permitted to be prescribed or dispensed in physician offices, significantly increasing treatment access; and

Whereas, health officials seek to double the Buprenorphine providers in the state of Maryland; and

Whereas, in order to begin prescribing buprenorphine, eligible physicians must submit a waiver notification form documenting the physician's qualifying information to the Center for Substance Abuse Treatment (CSAT). Once the notification is received, the Drug Enforcement Agency (DEA) issues an identification number, known as a waiver or "X," which is to be included on all buprenorphine prescriptions, in addition to the physician's regular DEA number; and

Whereas, an additional requirement for physicians includes a limit on the number of patients each provider can treat at any one time with buprenorphine. Previously, this number was 30, however, Congress passed bill H.R. 6344 in December 2006 that allows certified physicians, who have been prescribing for at least 12 months, to treat up to 100 patients; and

Whereas, there is an 8 hour specialized training requirement on buprenorphine therapy for prescribers to obtain a Buprenorphine prescribing waiver; therefore be it

Resolved, that MedChi support, encourage, and facilitate the training of both current and additional Buprenorphine prescribers by providing outreach, advertising, and hosting Buprenorphine trainings.

As amended and adopted by the House of Delegates at its meeting on April 28, 2019.