

Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

February 18, 2025

The Honorable Luke Clippinger Chair House Judiciary Committee 100 Taylor House Office Building Annapolis, Maryland 21401

RE: House Bill (HB) 779 – Correctional Services - Medication Review Committee -Administration of Psychotropic Medication to an Incarcerated Individual– Letter of Support

Dear Chair Clippinger and Committee Members:

The Maryland Department of Health (Department) is submitting this letter of support for House Bill (HB) 779– Correctional Services - Medication Review Committee - Administration of Psychotropic Medication to an Incarcerated Individual.

House Bill (HB) 779 aims to establish guidelines for administering psychotropic medication to incarcerated individuals who object to treatment. The legislation proposes the creation of a Medication Review Committee and outlines procedures for reviewing and approving the use of psychotropic medications in non-emergency situations within correctional settings.

HB 779 seeks to align with existing processes permitted in inpatient psychiatric facilities under the Health General Article §10-708. Currently, there is a gap in treating individuals with mental illness in correctional facilities, where policies prevent the appropriate administration of psychotropic medications against an individual's will. This discrepancy means that individuals experiencing severe symptoms and lacking insight into their condition cannot receive adequate treatment in correctional settings. The gap can result in individuals with significant mental health challenges being unable to access necessary medications. HB 779 addresses this critical issue by establishing procedures for the use of psychotropic medications over objection in correctional environments.

One of the strengths of HB 779 is its incorporation of multiple safeguards to protect patients' rights throughout the medication administration process. These safeguards include the right to legal representation and the right to appeal, which mirror existing processes for the involuntary administration of medications in hospital settings. Implementing robust policies, procedures, and staff

training could significantly improve access to essential treatment for individuals with severe mental illness in correctional facilities.

In conclusion, the Department supports HB 779's efforts to enhance the care and treatment of incarcerated individuals with mental illness, ensuring they have access to necessary medications even when they cannot provide consent.

If you would like to discuss this further, please do not hesitate to contact Sarah Case-Herron, Director of Governmental Affairs at <u>sarah.case-herron@maryland.gov</u>.

Sincerely,

Laura Herrera Scott, MD, MPH Secretary