



**Maryland Alliance for
Sensible Drug Policy**
LIVED EXPERIENCE. REAL SOLUTIONS.

February 17, 2026

The Honorable Heather Bagnall
Chair, Health Committee
241 Taylor House Office Building
Annapolis, Maryland 21401

**Re: House Bill 529 – Code Revision: Health – Maryland Medical Assistance Program
– FAVORABLE**

I am submitting this testimony in strong support of HB 529 on behalf of the Maryland Alliance for Sensible Drug Policy, a statewide grassroots advocacy group led by people with lived or living experience with substance use. We support HB 529 because it does something that looks “technical” on paper but matters in real life: it updates stigmatizing language in Medicaid law by replacing phrases like “alcohol and drug abuse” and “substance abuse” with “substance use disorder” and “with substance use disorders.”

When I was struggling in active addiction, I carried a lot of shame, sometimes more than I could handle. What pushed me further down was how often systems treated me like a problem instead of a person. Words like “abuse” and “abuser” don’t just describe a health condition. They suggest intent, moral failure, and danger. They sound like someone who harms others, not someone who needs help. And once that framing is baked into law and policy, it spreads everywhere, from intake forms to case notes to the way people speak across a counter.

That stigma has consequences. It makes people hesitate to seek help because they don’t want to be branded. It makes it easier for staff, providers, and institutions to talk about us like we’re criminals instead of patients. It shapes how family members understand what’s happening. It even shapes how we understand ourselves. If the system tells you, over and over, that you’re an “abuser,” you start to believe you’re permanently broken, and that belief can become a barrier to recovery and stability all by itself.

By contrast, “substance use disorder” communicates what clinicians and public health professionals already know: this is a diagnosable, treatable medical condition. It doesn’t erase accountability. It just stops smuggling judgment into the vocabulary. That matters in Medicaid especially, because Medicaid is often the front door to treatment for people who are struggling and have the least margin for error. If our laws are going to govern access to care, they should reflect dignity and evidence, not outdated labels.

Will changing a few words in a statute end the harms caused by stigma? Of course not. But it is a small step in the right direction, and one that is long overdue.

Request

For these reasons, the Maryland Alliance for Sensible Drug Policy respectfully requests a favorable report on HB 529.

Thank you for your time and for your consideration. Please feel free to contact me if I can provide additional information.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'THIGDON', with a long horizontal flourish extending to the right.

Thomas Higdon
Executive Director
Maryland Alliance for Sensible Drug Policy
thigdon@masdp.org
443-362-2764