

Maryland's Office of Overdose Response

Wes Moore, Governor · Aruna Miller, Lt. Governor · Emily Keller, Special Secretary of Overdose Response

April 1, 2026

The Honorable Brian J. Feldman
Chair, Education, Energy, and the Environment Committee
2 West Miller Senate Office Building
Annapolis, MD 21401

Re: House Bill 222 – Educational Institutions - Opioid Overdose-Reversing Medications - Policy Requirements (Naloxone Access Act)

Dear Chair Feldman:

Maryland's Office of Overdose Response (MOOR) submits this letter of support with amendments for House Bill (HB) 222 – Educational Institutions – Opioid Overdose-Reversing Medications – Policy Requirements (Naloxone Access Act).

HB 222 requires the State Board of Education, county boards of education, and institutions of higher education in Maryland authorize certain individuals, including high school students, to carry naloxone on school property and provides immunity from liability to individuals who respond in good faith to an overdose emergency.

Students in Maryland must be equipped with the information and tools necessary to prevent and respond to overdoses that occur in their communities. Youth under the age of 25 account for nearly 5% of all overdose deaths in the state, according to the most recent finalized fatal overdose data from the Maryland Department of Health's Vital Statistics Administration.¹ Our youth deserve to have all possible resources at their disposal, especially those that are evidence-based, safe, and effective. Naloxone is an effective medication for reversing an overdose, and it is safe; if administered when an overdose is not occurring, there is no harm. Students in schools are closest to the issue of youth overdose and must be empowered to be part of the solution to this issue. Education about how naloxone works and how to respond to an overdose is a vital component of addressing the issue of adolescent overdose mortality.

It is important to note that under the Annotated Code of Maryland Article - Health - General §13–3108(a), legal immunity is provided to individuals (including minors) who “administers an opioid overdose reversal drug approved by the federal Food and Drug Administration to an individual who is or in good faith is believed to be experiencing an opioid overdose.”²

¹<https://health.maryland.gov/dataoffice/Pages/mdh-dashboards.aspx>

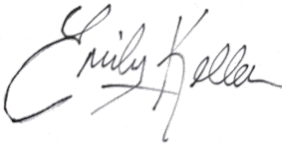
² <https://mgaleg.maryland.gov/mgawebsite/Laws/StatuteText?article=ghg§ion=13-3108&enactments=False&archived=False>

MOOR supports the intent of this legislation and requests an amendment to state that training and education should be provided only for the utilization of naloxone and that any mention of “other opioid overdose-reversing medication” be stricken from the bill text. The introduction of new reversal drugs in the school setting would require a significant amount of education and training, especially for reversal drugs that pose a clinical risk of more prolonged or severe withdrawal symptoms. In 2023, the American College of Medical Toxicology and the American Academy of Clinical Toxicology released a joint position statement that expressed concern at the use of nalmefene and cautioned against using it in place of naloxone due to its potential to cause unintended harm.³

This would also keep the bill in alignment with the Maryland Statewide Standing Order for Opioid Overdose Reversal Drugs.

If you would like to discuss this further, please do not hesitate to contact Benjamin Fraifeld, Associate Director for Policy & Advocacy at MOOR, 443-346-3013.

Sincerely,



Emily Keller
Special Secretary of Overdose Response

³Stolbach, A. I., Mazer-Amirshahi, M. E., Nelson, L. S., & Cole, J. B. (2023). American College of Medical Toxicology and the American Academy of Clinical Toxicology position statement: nalmefene should not replace naloxone as the primary opioid antidote at this time. *Clinical Toxicology*, 61(11), 952-955