



March 3, 2026

**Senate Finance Committee
TESTIMONY IN SUPPORT**

SB 562 - State Board of Pharmacy - Prescriber-Pharmacist Agreements

Behavioral Health System Baltimore (BHSB) is a nonprofit organization that serves as the local behavioral health authority (LBHA) for Baltimore City. BHSB works to increase access to a full range of quality behavioral health (mental health and substance use) services and advocates for innovative approaches to prevention, early intervention, treatment and recovery for individuals, families, and communities. Baltimore City represents nearly 35 percent of the public behavioral health system in Maryland, serving over 100,000 people with mental illness and substance use disorders (collectively referred to as “behavioral health”) annually.

Behavioral Health System Baltimore supports SB 562 - State Board of Pharmacy - Prescriber-Pharmacist Agreements. This bill would authorize prescriber-pharmacist agreements to treat opioid use disorder (OUD) using controlled dangerous substance drug therapy. Buprenorphine, a safe and effective medication for opioid use disorder (MOUD), is the only applicable medication. SB 562 would safely expand access to MOUD, prevent overdose, and help more Marylanders achieve recovery from OUD.

Buprenorphine is the gold standard for treating OUD. MOUD reduces cravings associated with OUD and reduces all-cause mortality by half. This pharmacological support reduces the likelihood of relapse and overdose, increases treatment retention, and improves a variety of other health and socioeconomic outcomes. Treatment outcomes for MOUD are consistently better than outcomes for OUD treatment without medications. It is also very safe, with little risk for abuse or unintentional overdose.^{1,2,3,4}

SB 562 would recognize buprenorphine’s importance and safety by allowing prescriber-pharmacist agreements for this critical MOUD. MOUD prescriber-pharmacist agreements have been shown to have very high patient retention and satisfaction rates.^{5,6} Allowing pharmacists to more directly support individuals who are prescribed MOUD will increase access and reduce the likelihood that an individual in recovery drops out of care.

In recognition of the safety of buprenorphine, the Drug Enforcement Agency has eliminated the prescriber limitations and training requirements that were originally imposed but Maryland’s prescriber-pharmacist

¹ National Academies of Sciences, Engineering, and Medicine; Health and Medicine Division; Board on Health Sciences Policy; Committee on Medication-Assisted Treatment for Opioid Use Disorder; Mancher M, Leshner AI, editors.

Washington (DC): National Academies Press (US); 2019 Mar 30. Available at: <https://www.ncbi.nlm.nih.gov/books/NBK538936/>.

² National Institute on Drug Abuse (NIDA). How Effective Are Medications to Treat Opioid Use Disorder? June 1, 2018. Available at <https://nida.nih.gov/publications/research-reports/medications-to-treat-opioid-addiction/efficacy-medications-opioid-use-disorder>.

³ Bart G. Maintenance Medication for Opiate Addiction: The Foundation of Recovery. Journal of Addictive Diseases. 2012;31(3). Available at <https://pubmed.ncbi.nlm.nih.gov/22873183/>.

⁴ Wakeman SE, Laroche MR, Ameli O, et al. Comparative Effectiveness of Different Treatment Pathways for Opioid Use Disorder. JAMA Network Open. 2020;3(2). Available at <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2760032>.

⁵ Li-Tzy W, et al. Buprenorphine physician-pharmacist collaboration in the management of patients with opioid use disorder: Results from a multisite study of the National Drug Abuse Treatment Clinical Trials Addiction. 2021 Jan 11;116(7):1805–1816.

⁶ DiPaula BA, Menachery E. Physician-pharmacist collaborative care model for buprenorphine-maintained opioid-dependent patients. J Am Pharm Assoc (2003). 2015 Mar-Apr;55(2):187-92.

agreement statute has not been similarly updated. Prescriber-pharmacist agreements include numerous safeguards including disease-specific protocols and a requirement that the prescriber remain involved directly in patient care. Establishing MOUD agreements is a reasonable and important next step.

Expanding access to MOUD is one of Maryland's top priorities in preventing overdose and supporting recovery from OUD. **BHSB urges the Senate Finance Committee to support SB 562.**

For more information, please contact BHSB Policy Director Dan Rabbitt at 443-401-6142