

Witness Testimony for the Maryland Senate Finance Committee (HB1377)

Witness Name: Matthew Hollister (James Hollister Wellness Foundation)

Witness Address: 4804 Topping Road, Rockville, MD 20852

Position: FAVORABLE

Chair, Vice Chair, and Members of the Committee, thank you for the opportunity to testify. My name is Matthew Hollister, and I am the co-founder and chairman of the James Hollister Wellness Foundation, based in Rockville. Our mission is to save viable, unopened medications from being needlessly destroyed and redirect them for charitable use both here in the United States and abroad. Through this work, we have seen firsthand the enormous volume of safe, sealed medications that go to waste every day—and we have successfully donated some of these medications into Maryland’s existing Prescription Drug Repository Program.

HB1377 is important because it addresses two problems Maryland faces simultaneously: the high cost of prescription medication for underinsured residents, and the millions of dollars’ worth of safe, sealed, and non-expired medications that are destroyed each year during National Drug Take Back Day. This pilot gives Maryland a responsible, evidence-based way to redirect qualifying medications collected during Drug Take Back Day to the people who need them most through the Drug Repository Program.

The logistics of the pilot are straightforward. SIRUM, the nation’s largest medication-donation platform, would serve as the pilot’s donation intake system. They provide the online donor portal, shipping labels, and logistics coordination, and they perform the first level of eligibility screening to ensure only sealed, unexpired, non-controlled medications collected from National Drug Take Back Day sites move forward into the repository system. Then Good Pill, their nonprofit pharmacy partner, would serve as the dispensing pharmacy. Good Pill would complete the pharmacist verification, ensure safety and compliance, and dispense medications directly to Maryland patients at ultra-low cost through home delivery.

Financially, this pilot is one of the most cost-effective health access programs the state could implement. The intake and dispensing infrastructure already exists. The medications themselves are donated. And the cost of medicine for patients is significantly reduced. For the state, the primary expenses are outreach, coordination, and evaluation, while the return is substantial: reduced waste, lower environmental impact, and expanded access to life-saving medications for residents who otherwise cannot afford them.

HB1377 is a fiscally responsible and compassionate solution to help maximize the output of Maryland’s Drug Repository Program. I respectfully urge a favorable report.