



**House Health Committee
March 10, 2026**

**House Bill 1162
Correctional Services – Medication–Assisted Treatment Funding
Support only with Amendments**

NCADD-Maryland supports implementation of the law passed in 2019 to require local detention centers to provide medication assisted treatment to people in their custody who have opioid use disorders (OUD). We oppose, however, the use of the Opioid Restitution Fund (ORF) to pay for these health care services.

We know the importance of providing people with OUDs with the medications that have proven for decades to help people achieve and maintain recovery. People with OUD are at high risk of overdose, especially after release from incarceration when they may have reduced tolerance. While in a carceral setting, medications help manage withdrawal symptoms and reduce cravings, avoiding additional medical expenses reducing problematic behaviors. Studies also show that providing medication for OUD in jails can decrease the likelihood of re-offending after release.

Funding for these health care services should be considered a normal part of health care provision, for people in jails and in the community alike. We understand local governments need assistance getting these services up and running in their local detention centers, but the end-goal should be building in these health care services into their health care contracts. Addiction treatment is not a special service and should not be seen as an add-on. The cost to provide these services, along with recognizing the savings by providing care, should be a routine part of health care contracts local governments have with vendors. Providing this care is also something that is required by federal law, further supporting the premise that treatment for substance use disorders is not optional.

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With this in mind, NCADD-Maryland offers an amendment to replace the language in the bill with a requirement for the State to convene a workgroup with stakeholders that include local governments, community-based treatment providers, and the state agencies that currently provide significant funding to support these efforts to:

- Create a coordinated grant process related to existing state funding to local jurisdictions;
- Ensure all jurisdictions are meeting the requirements of the 2019 law using best practices learned since implementation began; and
- Develop a plan for how local governments will pursue the inclusion of these health care services in their health care contracts.

As one of the lead organizations involved in passage of House Bill 116 in 2019, the law that requires local detention centers to provide this essential health care service to people with opioid use disorders, NCADD-Maryland stands ready to work with local governments and the State to achieve our collective public health and public safety goals.