



March 11, 2026

**House Health Committee  
TESTIMONY IN SUPPORT**

*HB 1249 - Certified Recovery Residences - Refusing Services to Individuals Receiving  
Medication-Assisted Treatment - Prohibition*

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 strongly supports HB 1249 - Certified Recovery Residences - Refusing Services to Individuals Receiving Medication-Assisted Treatment - Prohibition.** This bill would prohibit recovery residences from denying someone placement if they are receiving medication for opioid use disorder (MOUD) as part of their treatment and recovery from opioid use disorder (OUD). MOUD is safe and effective. MOUD should not be discriminated against or stigmatized in any setting serving those with OUD.

MOUD 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.<sup>1,2,3,4</sup>

Despite this strong record of safety and effectiveness, many programs and stakeholders view MOUD skeptically. This stigma comes from a belief that obtaining recovery through MOUD is not real recovery and that MOUD just substitutes one drug for another. **BHSB fully rejects this perspective.** OUD changes brain chemistry that makes ceasing opioid use incredibly challenging. Treatment outcomes without MOUD are very poor, but MOUD provides the neurological support that most people need to overcome OUD. It should be fully embraced as the essential OUD treatment intervention that it is.

One area where stigma against MOUD is especially prominent is in recovery housing. These residences often prohibit possession of MOUD and deny individuals placement unless they cease taking MOUD. This is discriminatory and incredibly dangerous. The risk of relapse and fatal overdoses without MOUD is significant. Any decision regarding MOUD should be made by the individual and their treatment – not the owners or operators of their residence.

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<sup>1</sup> 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/>.

<sup>2</sup> 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>.

<sup>3</sup> 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/>.

<sup>4</sup> 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>.

Maryland appropriately promotes MOUD throughout the treatment system. It should extend this to recovery housing and require any certified in Maryland to at least accept the legitimacy of MOUD. **BHSB urges the House Health Committee to support HB 1249.**

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