



Chase Brexton Health Care

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March 2, 2026

House Health Committee
The Hon. Heather Bagnall, Chair
The Hon. Bonnie Cullison, Vice Chair

Support with Amendments – HB 1114

Dear Chair, Bagnall, Vice Chair Cullison, and Members of the Committee:

On behalf of Chase Brexton Health Care, we write in strong support of HB 1114, with the targeted amendments recommended by the Maryland Commission on LGBTQIA+ Affairs.

Chase Brexton is a federally qualified health center and long-standing provider of HIV prevention, treatment, and LGBTQIA+-affirming care across Maryland. We strongly support HB 1114's elimination of prior authorization, step therapy, and cost-sharing for PrEP and PEP. Administrative and financial barriers continue to delay or interrupt prevention access, particularly for patients experiencing insurance instability or economic hardship.

Preliminary findings from the Maryland LGBTQIA+ Community Needs Assessment underscore the urgency of expanding low-barrier prevention services. Many LGBTQIA+ Marylanders report avoiding or delaying care due to anticipated discrimination, cost concerns, or difficulty navigating the healthcare system. Pharmacy-based PrEP prescribing can serve as a critical safety net - particularly when integrated into a coordinated system of care.

Pharmacy-based PrEP access should function as an integrated entry point into the healthcare system rather than a standalone model of care. Patients who initiate PrEP through a pharmacy setting should be linked to an ongoing primary care or HIV prevention provider for continued monitoring, laboratory testing, and comprehensive preventive services. This is particularly important for individuals who:

- Lack a primary care provider and need linkage to ongoing care;
 - Experience insurance disruption and require connection to financial assistance or coverage navigation services;
 - Live in provider-limited areas and would benefit from coordinated referral to a PrEP-prescribing provider; or
 - Are between clinical appointments and need continuity of prevention services.
- Ensuring a structured referral and care-coordination pathway strengthens both patient safety and long-term prevention outcomes.

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We support clarifying that pharmacists may both initiate and continue or re-initiate PrEP, especially for patients who lose access to primary care. At the same time, dispensing beyond an initial limited supply should require documented HIV-negative status consistent with CDC guidance. Verification of recent HIV testing - either laboratory-based or rapid point-of-care testing - ensures safety while maintaining access.

Because HB 1114 includes both oral and injectable formulations of PrEP, we also support directing the Board of Pharmacy to establish distinct regulatory standards for long-acting injectable PrEP. Injectable formulations require specific infrastructure, including medication storage, administration competency, follow-up scheduling, and management of adverse events and missed doses.

We further support implementation of a statewide protocol incorporating minimum regulatory standards, while allowing collaborative practice agreements as an optional pathway. Mandating collaborative agreements could unintentionally restrict pharmacist participation, particularly in rural or underserved communities.

To ensure sustainable implementation, pharmacists acting in compliance with Board regulations and CDC guidance should be afforded appropriate professional liability protections. In addition, reimbursement parity for pharmacist-provided clinical services is essential to ensure expanded access is financially sustainable.

HB 1114 represents a significant opportunity to reduce new HIV diagnoses and strengthen Maryland's public health infrastructure. With targeted amendments clarifying clinical standards and ensuring coordinated implementation, Maryland can expand access to PrEP and PEP safely and sustainably.

We respectfully urge a favorable report with amendments. For additional information, please contact Robyn Elliott at relliott@policypartners.net

Sincerely,

Sebastian Ruhs, MD
Chief Medical Officer

Mahro Ershadi, PharmD
Chief Pharmacy and Strategy Officer

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