SENATE BILL 1071

J1, J3 4lr1663 CF HB 1155

By: Senator McKay

Introduced and read first time: February 2, 2024

Assigned to: Finance

Committee Report: Favorable with amendments

Senate action: Adopted

Read second time: March 4, 2024

CHAPTER

1 AN ACT concerning

2 Hospitals – Opioid Overdose - Medication-Assisted Treatment and 3 <u>Opioid-Related Emergency Medical Conditions – Treatment</u>

4 FOR the purpose of requiring hospitals to establish and maintain certain protocols and 5 capacity related to the treatment of patients who are being treated for an 6 opioid-related overdose or opioid-related emergency medical condition; requiring 7 hospitals to connect make a referral for patients who are diagnosed with opioid use disorder or administered or prescribed medication-assisted treatment medication 8 9 for opioid use disorder to an appropriate provider to voluntarily continue treatment 10 in the community under certain circumstances and work with peer support 11 professionals for a certain purpose; requiring the Governor to include in the annual budget bill for a certain fiscal year a certain appropriation from the Opioid 12 Restitution Fund for hospitals to provide training and resources to implement the 13 requirements of this Act; and generally relating to hospitals and treatment for opioid 14 use disorder and opioid-related emergency medical conditions. 15

16 BY adding to

22

17 Article – Health – General

18 Section 19–308.10

19 Annotated Code of Maryland 20 (2023 Replacement Volume)

21 BY repealing and reenacting, with amendments,

Article - State Finance and Procurement

23 Section 7 331

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

<u>Underlining</u> indicates amendments to bill.

Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.

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	2 SENATE BILL 10/1
1	Annotated Code of Maryland
2	(2021 Replacement Volume and 2023 Supplement)
3 4	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND That the Laws of Maryland read as follows:
5	Article – Health – General
•	v
6	19–308.10.
7	(A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS
8	INDICATED.
9	(2) "Medication" means, "medication for opioid use
10	DISORDER":
11	(1) MEANS A DRUG APPROVED BY THE U.S. FOOD AND DRUG
12	ADMINISTRATION FOR THE TREATMENT OF OPIOID USE DISORDER; AND
13	(2) Does not include a drug administered to mitigate
14	OPIOID-RELATED OVERDOSE SYMPTOMS.
15 16	(3) "MEDICATION ASSISTED TREATMENT" MEANS THE USE OF
16 17	MEDICATION, IN COMBINATION WITH COUNSELING AND BEHAVIORAL HEALTH THERAPIES, TO PROVIDE A HOLISTIC APPROACH TO THE TREATMENT OF OPIOID USE
18	DISORDER.
19	(4) "OPIOID USE DISORDER" MEANS A MEDICALLY DIAGNOSED
20	
21	OR DISTRESS.
22	(B) EACH HOSPITAL SHALL ESTABLISH AND MAINTAIN, AS PART OF ITS
23	EMERGENCY SERVICES, PROTOCOLS AND CAPACITY TO:
2.4	(1) Process so a process process process so a process process so a process process process so a process
24	(1) PROVIDE TO A PATIENT BEFORE DISCHARGING THE PATIENT
25 26	APPROPRIATE, EVIDENCE-BASED INTERVENTIONS THAT REDUCE THE RISK OF SUBSEQUENT HARM AND FATALITY FOLLOWING AN OPIOID-RELATED OVERDOSE OF
27	A VISIT FOR AN OPIOID-RELATED EMERGENCY MEDICAL CONDITION;
-•	
28	(2) Possess , dispense, administer, and prescribe
29	MEDICATION-ASSISTED TREATMENT, INCLUDING AT LEAST ONE FORMULATION OF
30	EACH U.S. FOOD AND DRUG ADMINISTRATION-APPROVED FULL OPIOID AGONIST

AND PARTIAL OPIOID AGONIST, AND LONG ACTING OPIOID ANTAGONIST USED FOR

THE TREATMENT OF OPIOID USE DISORDER; AND

	SENATE BILL 10/1
1	(3) Treat a patient who presents in a hospital emergency
2	DEPARTMENT FOR CARE AND TREATMENT OF AN OPIOID–RELATED OVERDOSE OR
3	OPIOID-RELATED EMERGENCY MEDICAL CONDITION WITH A MEDICATION FOR
4	OPIOID USE DISORDER IF THE TREATMENT:
5	(I) OCCURS AS RECOMMENDED BY THE TREATING HEALTH
6	CARE PRACTITIONER; AND
O	CARE PRACTITIONER, AND
7	(II) IS VOLUNTARILY AGREED TO BY THE PATIENT.
•	(ii) is vereithing is at the initial to
8	(C) A PROTOCOL ESTABLISHED BY A HOSPITAL UNDER THIS SECTION SHALL
9	COMPLY WITH INCLUDE:
0	(1) APPLICABLE TRAINING AND WAIVER REQUIREMENTS
1	ESTABLISHED BY THE FEDERAL DRUG ENFORCEMENT AGENCY; AND
	(2)
2	(2) ANY REQUIREMENT BY THE DEPARTMENT REGARDING
13	PRESCRIBING OPIOID AGONIST TREATMENT;
14	(2) Uniform practices for screening and diagnosing
L4 L5	INDIVIDUALS WHO PRESENT WITH AN OPIOID-RELATED OVERDOSE OR
16	OPIOID-RELATED EMERGENCY MEDICAL CONDITION FOR AN OPIOID USE DISORDER
17	BASED ON THE CRITERIA IN THE MOST RECENT EDITION OF THE DIAGNOSTIC AND
18	STATISTICAL MANUAL OF MENTAL DISORDERS;
	SIMISTORIE MINORE OF MENTILE BISONDENS,
9	(3) Uniform practices for offering and administering
20	OPIOID AGONIST MEDICATION TO TREAT AN OPIOID-RELATED OVERDOSE OR
21	OPIOID USE DISORDER; AND
22	(4) Uniform practices to identify community-based
23	TREATMENT SERVICES THAT ARE APPROPRIATE FOR:
24	(I) TREATING OPIOID USE DISORDERS; AND
25	(II) ASSISTING PATIENTS TO VOLUNTARILY ACCESS ONGOING
26	COMMUNITY-BASED TREATMENT AT DISCHARGE.
) /	(D) DEFORE DIGGERADGING A DAMPENTE VIEW OF DAY GIVES DE VIEW AND CONTRACTOR OF THE C
27	(D) BEFORE DISCHARGING A PATIENT WHO IS <u>DIAGNOSED WITH AN OPIOID</u> LISE DISORDER OR ADMINISTERED OR PRESCRIPED MEDICATION ASSISTED
<i>,</i> ×	TISE DISCRIER OR ADMINISTERED OR PRESCRIRED MEDICATION_ASSISTED

28 USE DISORDER OR ADMINISTERED OR PRESCRIBED MEDICATION-ASSISTED
29 TREATMENT MEDICATION FOR OPIOID USE DISORDER, A HOSPITAL SHALL CONNECT
30 THE PATIENT WITH AN APPROPRIATE PROVIDER OR FACILITY TO VOLUNTARILY
31 CONTINUE TREATMENT:

1		(1) Make a referral of the patient to an appropriate
2	PROVIDER	OR FACILITY FOR A TIMELY APPOINTMENT, WHEN POSSIBLE, TO
3	VOLUNTARI	LY CONTINUE TREATMENT IN THE COMMUNITY; AND
		
4		(2) WORK WITH PEER SUPPORT PROFESSIONALS, AS AVAILABLE, OR
5	ОТИБЬ БЕО	SOURCES TO ASSIST THE PATIENT IN ACCESSING THE IDENTIFIED
6	TREATMEN	TSERVICES.
7		Article - State Finance and Procurement
'		THE TOTAL THAIRCE AND THOUSENESS.
8	7–331.	
0	7=331.	
9	(a)	In this section "Eurod" magneths Origid Postitution Fund
9	(a)	In this section, "Fund" means the Opioid Restitution Fund.
10	(l ₂)	Thomais on Onicid Doctitution Fund
10	(b)	There is an Opioid Restitution Fund.
11	(a)	The number of the Fund is to note in the amount of settlement necessary
11	` '	The purpose of the Fund is to retain the amount of settlement revenues
12	aepositea to	the Fund in accordance with subsection (e)(1) of this section.
1.0	(1)	(1) III I 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
13	` '	(1) The Fund is a special, nonlapsing fund that is not subject to § 7–302 of
14	this subtitle.	,
4 5		(a) mi (i i m
15	O 11	(2) The State Treasurer shall hold the Fund separately, and the
16	Comptroller	shall account for the Fund.
1.5		
17	(e)	The Fund consists of:
10		(1) 11 : 11 : 1 : 11 : 11
18	. 11 6	(1) all revenues received by the State from any source resulting, directly or
19	<i>U</i> /	com any judgment against, or settlement with, opioid manufacturers, opioid
20		ociations, or any other person in the opioid industry relating to any claims
21	made or pros	secuted by the State to recover damages for violations of State law; and
22		(2) the interest earnings of the Fund.
23	(f)	The Fund may be used only to provide funds for:
24		(1) programs, services, supports, and resources for evidence-based
25	substance us	se disorder prevention, treatment, recovery, or harm reduction that have the
26	purpose of:	
27		(i) improving access to medications proven to prevent or reverse an
28	overdose;	
29		(ii) supporting peer support specialists and screening, brief
30	intervention	, and referral to treatment services for hospitals, correctional facilities, and
31		isk populations;

1	(iii) increasing access to medications that support recovery from
2	substance use disorders;
3	(iv) expanding the Heroin Coordinator Program, including for
4	administrative expenses;
5	(v) expanding access to crisis beds and residential treatment
6	services for adults and minors;
7	(vi) expanding and establishing safe stations, mobile crisis response
8	systems, and crisis stabilization centers;
9	(vii) supporting the behavioral health crisis hotline;
10	(viii) organizing primary and secondary school education campaigns
11	to prevent opioid use, including for administrative expenses;
12	(ix) enforcing the laws regarding opioid prescriptions and sales,
13	including for administrative expenses;
14	(x) research regarding and training for substance use treatment and
15	everdose prevention, including for administrative expenses; and
16	(xi) supporting and expanding other evidence-based interventions
17	for overdose prevention and substance use treatment;
18	(2) evidence-informed substance use disorder prevention, treatment
19	recovery, or harm reduction pilot programs or demonstration studies that are not
20	evidence-based if the Opioid Restitution Fund Advisory Council, established under §
21	7.5-902 of the Health - General Article:
22	(i) determines that emerging evidence supports the distribution of
23	money for the pilot program or that there is a reasonable basis for funding the
24	demonstration study with the expectation of creating an evidence-based program; and
25	(ii) approves the use of money for the pilot program or demonstration
26	study; and
27	(3) evaluations of the effectiveness and outcomes reporting for substance
28	use disorder abatement infrastructure, programs, services, supports, and resources for
29	which money from the Fund was used, including evaluations of the impact on access to
30	harm reduction services or treatment for substance use disorders and the reduction in
31	drug-related mortality.
32	(g) (1) The State Treasurer shall invest the money of the Fund in the same

manner as other State money may be invested.

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1	(2) Any interest earnings of the Fund shall be credited to the Fund.
2	(h) (1) Expenditures from the Fund may be made only in accordance with the
3	State budget.
J	State Staget.
4	(2) FOR FISCAL YEAR 2026, THE GOVERNOR SHALL INCLUDE IN THE
5	ANNUAL BUDGET BILL AN APPROPRIATION OF \$500,000 FROM THE FUND TO
6	PROVIDE TRAINING AND RESOURCES TO HOSPITALS TO IMPLEMENT THE
7	REQUIREMENTS OF § 19-308.10 OF THE HEALTH - GENERAL ARTICLE.
8	[(2)] (3) For settlement funds received in accordance with the final
9	distributor agreement of July 21, 2021, with McKesson Corporation, Amerisource Bergen
10	Corporation, and Cardinal Health Incorporated, as amended, the Janssen settlement
11	agreement of July 21, 2021, as amended, or any other opioid-related court or
12	administrative judgment or settlement agreement involving the State and one or more of
13	its political subdivisions:
14	(i) appropriations from the Fund in the State budget shall be made
15	in accordance with the allocation and distribution of funds to the State and its political
16	subdivisions:
17	1. as agreed on in the State-subdivision agreement of
18	January 21, 2022, as amended; or
19	2. required under any other opioid-related court or
20	administrative judgment or settlement agreement, or any similar agreement reached under
21	an opioid-related court or administrative judgment or settlement agreement, involving the State and one or more of its political subdivisions; and
22	State and one or more of its pontical subdivisions; and
23	(ii) the Secretary of Health shall establish and administer a grant
24	program for the distribution of funds to political subdivisions of the State in accordance
25	with:
26	1. the State-subdivision agreement of January 21, 2022, as
27	amended; or
28	2. the requirements of any other opioid-related court or
29	administrative judgment or settlement agreement, or any similar agreement reached under
30	an opioid-related court or administrative judgment or settlement agreement, involving the
31	State and one or more of its political subdivisions.
32	(3) (4) The Attorney General shall identify and designate the
33	controlling version of any agreement or amendment described under paragraph [(2)] (3) of
34	this subsection.
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1	(i) (1) Money expended from the Fund for the programs and services described
2	under subsection (f) of this section is supplemental to and is not intended to take the place
3	of funding that otherwise would be appropriated for the programs and services.
4	(2) Except as specified in subsection (f) of this section, money expended
5	from the Fund may not be used for administrative expenses.
J	Hom the Fund may not be used for administrative expenses.
6	(j) The Governor shall:
7	(1) develop key goals, key objectives, and key performance indicators
8	relating to substance use treatment and prevention efforts;
0	relating to substance use treatment and prevention enorts,
9 10	(2) subject to subsection [(h)(2)] (H)(3) of this section, at least twice annually, consult with the Opioid Restitution Fund Advisory Council to identify
11	recommended appropriations from the Fund; and
	11 1 /
12	(3) report on or before November 1 each year, in accordance with § 2–1257
13	of the State Government Article, to the General Assembly on:
14	(i) an accounting of total funds expended from the Fund in the
15	immediately preceding fiscal year, by:
10	immediately preceding fiscar year, sy.
16	1. use;
17	2. if applicable, jurisdiction; and
18	3. budget program and subdivision;
19	(ii) the performance indicators and progress toward achieving the
20	goals and objectives developed under item (1) of this subsection; and
20	goals and objectives developed under item (1) or tims subsection, and
21	(iii) the recommended appropriations from the Fund identified in
	accordance with item (2) of this subsection.
22	accordance with item (2) or this subsection.
23	SECTION 2. AND BE IT FURTHER ENACTED, That:
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24	(a) The Maryland Department of Health shall study whether and how funding
25	from the Opioid Restitution Fund can be used to provide training and resources to hospitals
26	to implement Section 1 of this Act, including a recommended funding amount.
27	(b) On or before January 1, 2025, the Department shall report its findings and
28	recommendations to the Senate Finance Committee and House Health and Government
29	Operations Committee, in accordance with § 2–1257 of the State Government Article.
30	SECTION 3. AND BE IT FURTHER ENACTED, That Section 1 of this Act shall take

	Speaker of the House of Delegates.
	President of the Senate.
	Governor.
Approved:	