J1, J3

By: **Senator McKay** Introduced and read first time: February 2, 2024 Assigned to: Finance

A BILL ENTITLED

1 AN ACT concerning

 $\mathbf{2}$

Hospitals – Opioid Overdose – Medication–Assisted Treatment

3 FOR the purpose of requiring hospitals to establish and maintain certain protocols and 4 capacity related to the treatment of patients who are being treated for an $\mathbf{5}$ opioid-related overdose; requiring hospitals to connect patients who are 6 administered or prescribed medication-assisted treatment to an appropriate 7 provider to voluntarily continue treatment under certain circumstances; requiring 8 the Governor to include in the annual budget bill for a certain fiscal year a certain 9 appropriation from the Opioid Restitution Fund for hospitals to provide training and resources to implement the requirements of this Act; and generally relating to 1011 hospitals and treatment for opioid use disorder.

- 12 BY adding to
- 13 Article Health General
- 14 Section 19–308.10
- 15 Annotated Code of Maryland
- 16 (2023 Replacement Volume)
- 17 BY repealing and reenacting, with amendments,
- 18 Article State Finance and Procurement
- 19 Section 7–331
- 20 Annotated Code of Maryland
- 21 (2021 Replacement Volume and 2023 Supplement)
- 22 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, 22 That the Laws of Maryland used as follows:
- 23 That the Laws of Maryland read as follows:
- 24

Article – Health – General

25 **19–308.10**.

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW. [Brackets] indicate matter deleted from existing law.



4lr1663 CF HB 1155

1 (A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS 2 INDICATED.

3 (2) "MEDICATION" MEANS A DRUG APPROVED BY THE U.S. FOOD AND
 4 DRUG ADMINISTRATION FOR THE TREATMENT OF OPIOID USE DISORDER.

5 (3) "MEDICATION-ASSISTED TREATMENT" MEANS THE USE OF 6 MEDICATION, IN COMBINATION WITH COUNSELING AND BEHAVIORAL HEALTH 7 THERAPIES, TO PROVIDE A HOLISTIC APPROACH TO THE TREATMENT OF OPIOID USE 8 DISORDER.

9 (4) "OPIOID USE DISORDER" MEANS A MEDICALLY DIAGNOSED 10 PROBLEMATIC PATTERN OF OPIOID USE THAT CAUSES A SIGNIFICANT IMPAIRMENT 11 OR DISTRESS.

12 (B) EACH HOSPITAL SHALL ESTABLISH AND MAINTAIN, AS PART OF ITS 13 EMERGENCY SERVICES, PROTOCOLS AND CAPACITY TO:

14(1) PROVIDE TO A PATIENT BEFORE DISCHARGING THE PATIENT15APPROPRIATE, EVIDENCE-BASED INTERVENTIONS THAT REDUCE THE RISK OF16SUBSEQUENT HARM AND FATALITY FOLLOWING AN OPIOID-RELATED OVERDOSE;

17 (2) POSSESS, DISPENSE, ADMINISTER, AND PRESCRIBE 18 MEDICATION–ASSISTED TREATMENT, INCLUDING AT LEAST ONE FORMULATION OF 19 EACH U.S. FOOD AND DRUG ADMINISTRATION–APPROVED FULL OPIOID AGONIST, 20 PARTIAL OPIOID AGONIST, AND LONG–ACTING OPIOID ANTAGONIST USED FOR THE 21 TREATMENT OF OPIOID USE DISORDER; AND

(3) TREAT A PATIENT WHO PRESENTS IN A HOSPITAL EMERGENCY
 DEPARTMENT FOR CARE AND TREATMENT OF AN OPIOID-RELATED OVERDOSE IF
 THE TREATMENT:

25 (I) OCCURS AS RECOMMENDED BY THE TREATING HEALTH 26 CARE PRACTITIONER; AND

27 (II) IS VOLUNTARILY AGREED TO BY THE PATIENT.

28 (C) A PROTOCOL ESTABLISHED BY A HOSPITAL UNDER THIS SECTION SHALL 29 COMPLY WITH:

30 (1) APPLICABLE TRAINING AND WAIVER REQUIREMENTS 31 ESTABLISHED BY THE FEDERAL DRUG ENFORCEMENT AGENCY; AND

 $\mathbf{2}$

1 (2) ANY REQUIREMENT BY THE DEPARTMENT REGARDING 2 PRESCRIBING OPIOID AGONIST TREATMENT.

3 (D) BEFORE DISCHARGING A PATIENT WHO IS ADMINISTERED OR 4 PRESCRIBED MEDICATION-ASSISTED TREATMENT, A HOSPITAL SHALL CONNECT 5 THE PATIENT WITH AN APPROPRIATE PROVIDER OR FACILITY TO VOLUNTARILY 6 CONTINUE TREATMENT.

 $\overline{7}$

Article – State Finance and Procurement

8 7-331.

9 (a) In this section, "Fund" means the Opioid Restitution Fund.

10 (b) There is an Opioid Restitution Fund.

11 (c) The purpose of the Fund is to retain the amount of settlement revenues 12 deposited to the Fund in accordance with subsection (e)(1) of this section.

13 (d) (1) The Fund is a special, nonlapsing fund that is not subject to § 7–302 of 14 this subtitle.

15 (2) The State Treasurer shall hold the Fund separately, and the 16 Comptroller shall account for the Fund.

17 (e) The Fund consists of:

18 (1) all revenues received by the State from any source resulting, directly or 19 indirectly, from any judgment against, or settlement with, opioid manufacturers, opioid 20 research associations, or any other person in the opioid industry relating to any claims 21 made or prosecuted 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 use disorder prevention, treatment, recovery, or harm reduction that have the 26 purpose of:

(i) improving access to medications proven to prevent or reverse anoverdose;

1 (ii) supporting peer support specialists and screening, brief 2 intervention, and referral to treatment services for hospitals, correctional facilities, and 3 other high-risk populations;

4 (iii) increasing access to medications that support recovery from 5 substance use disorders;

6 (iv) expanding the Heroin Coordinator Program, including for 7 administrative expenses;

8 (v) expanding access to crisis beds and residential treatment 9 services for adults and minors;

10 (vi) expanding and establishing safe stations, mobile crisis response 11 systems, and crisis stabilization centers;

12

(vii) supporting the behavioral health crisis hotline;

(viii) organizing primary and secondary school education campaigns
 to prevent opioid use, including for administrative expenses;

(ix) enforcing the laws regarding opioid prescriptions and sales,
 including for administrative expenses;

17 (x) research regarding and training for substance use treatment and
 18 overdose prevention, including for administrative expenses; and

19 (xi) supporting and expanding other evidence-based interventions 20 for overdose prevention and substance use treatment;

21 (2) evidence-informed substance use disorder prevention, treatment 22 recovery, or harm reduction pilot programs or demonstration studies that are not 23 evidence-based if the Opioid Restitution Fund Advisory Council, established under § 24 7.5–902 of the Health – General Article:

(i) determines that emerging evidence supports the distribution of money for the pilot program or that there is a reasonable basis for funding the demonstration study with the expectation of creating an evidence-based program; and

(ii) approves the use of money for the pilot program or demonstrationstudy; and

30 (3) evaluations of the effectiveness and outcomes reporting for substance 31 use disorder abatement infrastructure, programs, services, supports, and resources for 32 which money from the Fund was used, including evaluations of the impact on access to 33 harm reduction services or treatment for substance use disorders and the reduction in 34 drug-related mortality. 1 (g) (1) The State Treasurer shall invest the money of the Fund in the same 2 manner as other State money may be invested.

3

(2) Any interest earnings of the Fund shall be credited to the Fund.

4 (h) (1) Expenditures from the Fund may be made only in accordance with the 5 State budget.

6 (2) FOR FISCAL YEAR 2026, THE GOVERNOR SHALL INCLUDE IN THE 7 ANNUAL BUDGET BILL AN APPROPRIATION OF \$500,000 FROM THE FUND TO 8 PROVIDE TRAINING AND RESOURCES TO HOSPITALS TO IMPLEMENT THE 9 REQUIREMENTS OF \$19–308.10 OF THE HEALTH – GENERAL ARTICLE.

10 [(2)] (3) For settlement funds received in accordance with the final 11 distributor agreement of July 21, 2021, with McKesson Corporation, Amerisource Bergen 12 Corporation, and Cardinal Health Incorporated, as amended, the Janssen settlement 13 agreement of July 21, 2021, as amended, or any other opioid-related court or 14 administrative judgment or settlement agreement involving the State and one or more of 15 its political subdivisions:

16 (i) appropriations from the Fund in the State budget shall be made 17 in accordance with the allocation and distribution of funds to the State and its political 18 subdivisions:

19 1. as agreed on in the State–subdivision agreement of 20 January 21, 2022, as amended; or

21 2. required under any other opioid-related court or 22 administrative judgment or settlement agreement, or any similar agreement reached under 23 an opioid-related court or administrative judgment or settlement agreement, involving the 24 State and one or more of its political subdivisions; and

(ii) the Secretary of Health shall establish and administer a grant
 program for the distribution of funds to political subdivisions of the State in accordance
 with:

28 20. amond 1. the State-subdivision agreement of January 21, 2022, as

29 amended; or

30 2. the requirements of any other opioid-related court or 31 administrative judgment or settlement agreement, or any similar agreement reached under 32 an opioid-related court or administrative judgment or settlement agreement, involving the 33 State and one or more of its political subdivisions.

1 [(3)] (4) The Attorney General shall identify and designate the 2 controlling version of any agreement or amendment described under paragraph [(2)] (3) of 3 this subsection.

4 (i) (1) Money expended from the Fund for the programs and services described 5 under subsection (f) of this section is supplemental to and is not intended to take the place 6 of funding that otherwise would be appropriated for the programs and services.

7 (2) Except as specified in subsection (f) of this section, money expended 8 from the Fund may not be used for administrative expenses.

9 (j) The Governor shall:

10 (1) develop key goals, key objectives, and key performance indicators 11 relating to substance use treatment and prevention efforts;

12 (2) subject to subsection [(h)(2)] (H)(3) of this section, at least twice 13 annually, consult with the Opioid Restitution Fund Advisory Council to identify 14 recommended appropriations from the Fund; and

(3) report on or before November 1 each year, in accordance with § 2–1257
of the State Government Article, to the General Assembly on:

(i) an accounting of total funds expended from the Fund in theimmediately preceding fiscal year, by:

- 19 1. use;
- 20 2. if applicable, jurisdiction; and
- 21 3. budget program and subdivision;

(ii) the performance indicators and progress toward achieving the
 goals and objectives developed under item (1) of this subsection; and

24 (iii) the recommended appropriations from the Fund identified in 25 accordance with item (2) of this subsection.

26 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect 27 October 1, 2024.