



Karen Saylor, MD, President | Jeffrey S. Barkin, MD, President-Elect | Erik N. Steele, DO, FAAFP, Chair, Board of Directors
Andrew B. MacLean, JD, CEO | Dan Morin, Director of Communications & Government Affairs

TO: The Honorable Ned Claxton, Chair
The Honorable Michele Meyer, Chair
Members, Joint Standing Committee On Health and Human Services

FM: Dan Morin, Director of Communications and Government Affairs

DATE: April 23, 2021

RE: **Support**
LD 1333, An Act Concerning the Dispensation of Naloxone Hydrochloride by Emergency Medical Services Providers, As Amended

The Maine Medical Association is the state's largest professional physician organization representing more than 4300 physicians, residents, and medical students across all clinical specialties, organizations, and practice settings.

The MMA supports LD 1333, An Act Concerning the Dispensation of Naloxone Hydrochloride by Emergency Medical Services Providers, as amended.

While we support both proposed amendments, our written comments are reserved for the amendment to improve the intent of the our prescription monitoring program and to provide better patient care by independent, community based physicians.

The passage of [P.L. 2017, Chapter 213](#) included the ability for the chief medical officer, medical director or other administrative prescriber employed by a licensed hospital to access prescriptions written by prescribers employed by that licensed hospital. The intent for granting such access was to better oversee the prescription practices of their employed clinicians to ensure effective prescribing practices, and to assist in possibly identifying and helping clinicians treating patients for pain who may also suffer from substance use disorder towards treatment.

Use of such data in other environments has already enhanced patient safety and helps

countless clinicians and supervisors better evaluate a patient's treatment as it pertains to controlled substance prescribing and dispensing.

Access to someone's healthcare records by a medical provider typically requires a direct health care-related relationship with the patient in question. No clinician or staff member should be accessing protected information however, without a medical need. This amendment will not change that. However, it will give larger independent, community physician practice chief medical officers the same public safety tool currently afforded their hospital and health system-based colleagues.

Thank you for allowing us to comment today. It is our sincere hope you will vote Ought to Pass as Amended and allow our EMS colleagues to further assist all of us in combatting the opioid epidemic. They are an integral part of Maine's health care delivery system. The amended bill will also allow another corner of the system, larger independent, community physician practices, the same ability to combat the heartbreaking and life-threatening opioid use epidemic as their hospital and health system colleagues. We will be available to answer any questions prior to the work session and intend to be in virtual attendance for the discussion.