

Janet T. Mills
Governor

Jeanne M. Lambrew, Ph.D.
Commissioner



Maine Department of Health and Human Services
Office of Behavioral Health
11 State House Station
41 Anthony Avenue
Augusta, Maine 04333-0011
Tel.: (207) 287-2595; Fax: (207) 287-9152
TTY: Dial 711 (Maine Relay)

April 23, 2021

Senator Ned Claxton, Chair
Representative Michele Meyer, Chair
Members, Joint Standing Committee on Health and Human Services
100 State House Station
Augusta, ME 04333-0100

Re: LD 1428 An Act To Increase the Availability of Nasal Naloxone in Community Settings

Senator Claxton, Representative Meyer, and Members of the Joint Standing Committee on Health and Human Services:

This letter is to provide information on LD 1428 An Act To Increase the Availability of Nasal Naloxone in Community Settings. This bill allows community organizations, defined as private or nonprofit organizations operating a facility that serves the community, to store and administer nasal naloxone hydrochloride upon a standing order from a licensed health care professional authorized by law to prescribe nasal naloxone. It requires entities that provide nasal naloxone hydrochloride to provide nasal naloxone hydrochloride to a community organization that has provided training so that the community organization may possess and administer nasal naloxone hydrochloride to an individual who appears to be experiencing a drug-related overdose. The bill also requires the Department to adopt routine technical rules to implement this section.

The Office of Behavioral Health funds a network of naloxone distribution and supply of naloxone for distribution. Both intranasal and intramuscular naloxone are distributed by this network. This bill appears restrictive in limiting distribution to intranasal naloxone. That restriction could present barriers to reasonable policy changes; we recommend leaving open the possibility of intramuscular naloxone given that research suggests it is more effective than intranasal in reversing overdose.¹ Other than the requirement for intranasal, the language in this LD is already allowable under OBH's existing Rule Governing Community-Based Drug Overdose Prevention Programs authorized by 22 M.R.S. §2353. We note that requiring the Department to engage in rulemaking as required by this LD would thus not be an efficient use of resources, particularly given other important demands.

We wanted the Committee to be aware of the above information as it considers this bill moving forward. If you have any further questions, please feel free to contact me.

Sincerely,

A handwritten signature in black ink that reads "Jessica Monahan Pollard, PhD".

Jessica Monahan Pollard, PhD, Director
Office of Behavioral Health

1. Dietze P, Jauncey M, Salmon A, et al. Effect of Intranasal vs Intramuscular Naloxone on Opioid Overdose: A Randomized Clinical Trial. JAMA Netw Open. 2019;2(11):e1914977. doi:10.1001/jamanetworkopen.2019.14977