

STATE OF MARYLAND

DHMH

Maryland Department of Health and Mental Hygiene Behavioral Health Administration • Spring Grove Hospital Center • Dix Building 55 Wade Avenue • Catonsville, Maryland 21228

Larry Hogan, Governor – Boyd K. Rutherford, Lt. Governor - Van T. Mitchell, Secretary Barbara J. Bazron, Ph.D., Executive Director

October 25, 2016

Dear Opioid Treatment Program Provider:

In early 2014, the Department was contacted regarding the location of opioid treatment programs (OTPs) in the central Baltimore City area. From this early engagement, the Department began meeting with concerned community members and members of the General Assembly to discuss their concerns about opioid treatment programs. Following a legislative briefing on February 2, 2016 before the Health and Government Operations Committee, the Department provided initial recommendations of strategies to address the application process and improve the quality of care of opioid treatment programs.

The Department then created an *Opioid Treatment Program Work Plan*, (*OTPWP*) which proposed a Goal (#1) to create an integrated state and local process for approval of new programs and recertification of existing programs. This goal has several objectives which pertain to expansion of OTP services: A) to provide existing OTP location and needs assessment data to the LAA for the purpose of recruiting providers into areas of need and informing which locations have sufficient resources; B) to create mechanism to inform potential new OTPs about consulting the LAA for location recommendations prior to submitting application to OHCQ/BHA; and C) to inform potential new OTPs of protocol that requests they meet with the LAA to discuss needs assessment data prior to selection of program location.

The Behavioral Health Administration (BHA) has gathered the statewide opioid disorder needs assessment data for analysis and refinement. The Department also completed the project to geomap existing opioid treatment programs (OTPs). These two pieces of data are being combined into a comprehensive state and jurisdictional analysis of needs and service provision, and will be provided to Local Addictions Authorities (LAAs) by the end of November as per Objective A.

As per Objectives B and C, BHA would request that prior to selecting a site for a new service, you meet with the LAA in the jurisdiction of interest to be informed of under-served areas of need, in order to best serve areas of the state with high instances of heroin overdoses and deaths. This request is not intended to constrain expansion of OTP services, only to ensure that information is received which will assist you in matching your services with geographical areas of greatest need.

If you have any questions regarding any of this information, you may contact me for further information at 410-402-8610.

Sincerely,

Barry Page

State Opioid Treatment Authority, BHA

Barry Page

Cc: Kathleen Rebbert-Franklin, Deputy Director

Population Based Behavioral Health

Audrey Chase, Director of Compliance, BHA

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