

Chapter 758

(House Bill 1502)

AN ACT concerning

**Baltimore City – AIDS Prevention Sterile Needle and Syringe Exchange Pilot
Program – Revisions**

FOR the purpose of renaming the AIDS Prevention Sterile Needle and Syringe Exchange Pilot Program to be the HIV Prevention Syringe Services Program; altering the duties of the Program, the Director of the Program, and the Baltimore City Health Department regarding the Program; altering the membership and duties of the Program's oversight committee; altering the immunity provided to Program staff and participants; and generally relating to the AIDS Prevention Sterile Needle and Syringe Exchange Pilot Program.

BY repealing and reenacting, without amendments,
Article – Health – General
Section 24–801(a)
Annotated Code of Maryland
(2023 Replacement Volume and 2024 Supplement)

BY repealing and reenacting, with amendments,
Article – Health – General
Section 24–801(e), 24–802 through 24–806, 24–808, and 24–809
Annotated Code of Maryland
(2023 Replacement Volume and 2024 Supplement)

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
That the Laws of Maryland read as follows:

Article – Health – General

24–801.

(a) In this subtitle the following words have the meanings indicated.

(e) “Program” means the [AIDS] **HIV** Prevention [Sterile Needle and] Syringe [Exchange Pilot] **SERVICES** Program.

24–802.

(a) There is an [AIDS] **HIV** Prevention [Sterile Needle and] Syringe [Exchange Pilot] **SERVICES** Program in the Baltimore City Health Department.

(b) The Program shall:

(1) [Provide] **DISTRIBUTE SYRINGES AND PROVIDE** for the exchange by participants of used hypodermic needles and syringes for sterile hypodermic needles and syringes **AS NEEDED**; and

(2) Operate in accordance with the procedures approved, with the advice and approval of the oversight committee, by the Commissioner of Health.

24–803.

The Program shall:

(1) Be designed and maintained to provide [maximum security of exchange locations and equipment, including] security measures [that may be] **AND PROCESSES** required to [control the use and dispersal of] **SAFELY DISTRIBUTE** hypodermic needles and syringes and [security measures that allow for a full accounting of] **ACCOUNT FOR** the number of hypodermic needles and syringes [in circulation] **EXCHANGED AND DISTRIBUTED BY THE BALTIMORE CITY HEALTH DEPARTMENT** and the number of hypodermic needles and syringes in storage;

(2) Be operated to allow participants to exchange used hypodermic needles and syringes at [any exchange location, if more than one location is] available **MOBILE SYRINGE SERVICES SITES**;

(3) Include appropriate levels of staff expertise in working with injecting drug users and adequate staff training in providing community **SERVICE PROVIDER** referrals, counseling, and preventive education;

(4) Provide for the dissemination of other preventive means for [curtailing the spread of the HIV infection] **DECREASING THE RISK OF HIV TRANSMISSION**;

(5) Provide [a linkage for] referrals to drug counseling and treatment services, and follow-up to those referrals to assure that participants receive the treatment they desire;

(6) Educate injecting drug users on the [dangers of contracting the HIV infection] **RISK OF TRANSMITTING HIV** or the hepatitis B virus through **HIGH-RISK** needle-sharing practices and [unsafe] sexual behaviors;

(7) Include policies and procedures for the screening of applicants to the Program in order to preclude noninjecting drug users from participating in the Program; **AND**

(8) [Establish] **IMPLEMENT** procedures for identifying Program participants that are consistent with the confidentiality provisions of this subtitle[; and

(9) Establish a method of identification and authorization for Program staff members who have access to hypodermic needles, syringes, or Program records].

24–804.

(a) The Mayor of Baltimore City shall appoint an oversight committee for the Program.

(b) The oversight committee shall consist of:

(1) [Two representatives] **ONE REPRESENTATIVE** from academia who [specialize] **SPECIALIZES** in public health issues;

(2) One representative from law enforcement[, nominated by the Secretary of Public Safety and Correctional Services];

[(3) One representative of the Baltimore City Police Department;]

[(4)] (3) [Two representatives] **ONE REPRESENTATIVE** from the Maryland Department of Health[, the Department of Juvenile Services, or the Department of Education, nominated by the Secretary of Health];

[(5)] (4) One representative of a Baltimore City community group;

[(6)] (5) One representative of an [AIDS] **HIV** advocacy group;

[(7)] (6) One [drug abuse] **ADDICTION** treatment counselor;

[(8)] (7) One recovering injecting drug user; and

[(9)] (8) Up to three other individuals whom the [Mayor of Baltimore City] **BALTIMORE CITY HEALTH DEPARTMENT** determines to be appropriate for appointment to the oversight committee.

(c) The oversight committee shall:

(1) Provide advice to the Commissioner of Health and the Program Director on developing **AND REVISING AS NECESSARY**:

(i) Program operating procedures for the [furnishing] **DISTRIBUTION** and exchange of hypodermic needles and syringes to injecting drug users;

- (ii) A plan for community outreach and education;
 - (iii) A protocol for providing [a linkage] **REFERRALS** for Program participants to [substance abuse] **ADDICTION** treatment and rehabilitation; and
 - (iv) A plan for evaluating the Program; and
- (2) Provide ongoing oversight of the Program and make recommendations to the Program Director or the Commissioner of Health regarding any aspect of Program procedures, operation, or evaluation.

24–805.

- (a) The Commissioner of Health shall appoint a Director for the Program.
- (b) With the advice [and approval] of the oversight committee, the Director shall develop **AND REVISE AS NECESSARY**:
 - (1) Program operating procedures for the [furnishing] **DISTRIBUTION** and exchange of hypodermic needles and syringes to injecting drug users;
 - (2) A community outreach and education program; and
 - (3) A protocol for providing [a linkage] **REFERRALS** for Program participants to substance abuse treatment and rehabilitation.
- (c) The Director shall submit the operating procedures, the plan for a community outreach and education program, and the [substance abuse] **ADDICTION** treatment [linkage] **REFERRAL** protocol to the Commissioner of Health **OR THE COMMISSIONER’S DESIGNEE** for approval prior to **THE** implementation **OF REVISED PROCEDURES**.

24–806.

- (a) The Baltimore City Health Department shall include in its Program operating procedures measures to collect the following data:
 - (1) The number of participants served by the Program;
 - (2) The length of time a participant is served by the Program;
 - (3) Demographic profiles of participants served by the Program that include:
 - (i) Age;

- (ii) Sex;
- (iii) Race; **AND**
- [(iv) Occupation;]
- [(v)] **(IV)** Zip code of residence;
- [(vi) Types of drugs used;
- (vii) Length of drug use; and
- (viii) Frequency of injection;]

(4) The number of hypodermic needles and syringes exchanged;

(5) The number of participants [entering drug counseling and] **REFERRED TO ADDICTION** treatment; and

(6) The number of referrals made by the Program for [drug counseling and] **ADDICTION** treatment **FOR PEOPLE WHO INJECT DRUGS**.

(b) With the advice [and approval] of the oversight committee, the Baltimore City Health Department shall develop and implement a plan for Program evaluation that shall include the following issues:

(1) The **ESTIMATED** prevalence **AND INCIDENCE** of HIV among Program participants;

[(2) Changes in the level of drug use among Program participants;

(3) Changes in the level of needle-sharing among Program participants;

(4) Changes in the use of condoms among Program participants;

(5) The status of treatment and recovery for Program participants who entered drug treatment programs;

(6) The impact of the Program on risk behaviors for the transmission of the HIV infection, the hepatitis B virus, and other life-threatening blood-borne diseases among injecting drug users;

(7) The cost-effectiveness of the Program versus the direct and indirect costs of the HIV infection in terms of medical treatment and other services normally required by HIV-infected individuals;]

[(8)] (2) The strengths and weaknesses of the Program; and

[(9)] (3) The advisability of continuing the Program.

(c) As part of its plans for data collection and Program evaluation described under subsections (a) and (b) of this section, the Baltimore City Health Department shall develop and implement a methodology[:

(1) For identifying Program hypodermic needles and syringes, such as through the use of bar coding or any other method approved by the oversight committee; and

(2) To perform HIV antibody testing on the residue left in a sample of hypodermic needles and syringes returned to the Program] **TO COLLECT RETURNED NEEDLES AND SYRINGES AND SEND THEM TO THE RAPID ANALYSIS OF DRUGS PROGRAM OPERATED BY THE CENTER FOR HARM REDUCTION AT THE MARYLAND DEPARTMENT OF HEALTH.**

(d) On or before December 31 of each year, the Baltimore City Health Department shall report to the oversight committee, the Governor, and, in accordance with § 2–1257 of the State Government Article, the General Assembly, on the number of hypodermic needles and syringes exchanged as part of the Program.

24–808.

[(a)] No Program staff member or Program participant may be found guilty of violating § 5–601, § 5–619, § 5–620, § 5–902, or § 5–904 of the Criminal Law Article for possessing or distributing controlled paraphernalia or drug paraphernalia whenever the possession or distribution of the controlled paraphernalia or drug paraphernalia is a direct result of the employee’s or participant’s activities in connection with the work of the Program authorized under this subtitle.

[(b)] Notwithstanding the provisions of subsection (a) of this section, a Program staff member or Program participant is not immune from criminal prosecution for:

(1) The redistribution of hypodermic needles or syringes in any form;

(2) Any activities not authorized or approved by the Program; or

(3) The possession or distribution of controlled paraphernalia or drug paraphernalia or any other unlawful activity outside of the Baltimore City limits.]

24–809.

Except for violations of any laws that could arise from residue attached to or contained within hypodermic needles or syringes being returned or already returned to the Program, [nothing in] this subtitle [provides] **DOES NOT PROVIDE** immunity to a Program staff member or Program participant from criminal prosecution for a violation of any law prohibiting or regulating the use, possession, dispensing, distribution, or promotion of [controlled dangerous substances, dangerous drugs, detrimental drugs, or harmful drugs or any conspiracy or attempt to commit any of those offenses] **ILLICIT DRUGS**.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2025.

Approved by the Governor, May 20, 2025.