

**Department of Legislative Services**  
Maryland General Assembly  
2007 Session

**FISCAL AND POLICY NOTE**  
**Revised**

House Bill 769

(Delegate Anderson, *et al.*)

Health and Government Operations

Education, Health, and Environmental Affairs

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**Disease Prevention - Sexually Transmitted Diseases - Expedited Partner Therapy  
Pilot Program**

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This bill creates an Expedited Partner Therapy Pilot Program in the Baltimore City Health Department to provide antibiotic therapy to the partner of a patient diagnosed with a specified sexually transmitted infection in order to contain the infection. By December 31, 2007 and annually thereafter, the health department must report to the Governor and the General Assembly on the pilot program's operation and performance.

The bill takes effect July 1, 2007 and terminates June 30, 2010.

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**Fiscal Summary**

**State Effect:** None. The bill primarily affects the Baltimore City Health Department. Existing Department of Health and Mental Hygiene staff could adopt regulations implementing the pilot program with existing city health department staff.

**Local Effect:** Baltimore City Health Department expenditures could increase by \$29,930 annually from FY 2008 through 2010. No effect on revenues.

**Small Business Effect:** None.

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**Analysis**

**Bill Summary:** In a public health clinic established by the Commissioner of the Baltimore City Health Department, a licensed physician, a certified nurse practitioner, and an authorized physician assistant may dispense or otherwise provide antibiotic

therapy to any sexual partner of a patient diagnosed with chlamydia or gonorrhea without making a personal physical assessment of the patient's partner.

The Secretary of Health and Mental Hygiene must adopt regulations to implement the pilot program.

**Current Law/Background:** The Centers for Disease Control and Prevention (CDC) advise that assuring that the sex partners of individuals with sexually transmitted diseases (STDs) receive treatment has long been a central component of preventing and controlling STDs in the United States. Expedited partner therapy (EPT) is an alternative approach to assuring the treatment of partners. EPT is the delivery of medications or prescriptions by an individual infected with an STD to the individual's sex partners without the partners receiving a clinical assessment. CDC recommended EPT for certain populations and specific conditions in its Sexually Transmitted Diseases Treatment Guidelines, 2006.

Chlamydia is the most frequently reported bacterial STD in the United States. An estimated 2.8 million Americans are infected with it each year. In women, untreated infection can progress to serious reproductive and other health problems. Complications among men are rare. Gonorrhea is a bacterial STD. CDC estimates that more than 700,000 individuals in the United States get new gonorrheal infections each year. Left untreated, gonorrhea can cause serious and permanent health problems in women and men.

To help state and local STD programs implement EPT, CDC collaborated with the Center for Law and the Public's Health at Georgetown and Johns Hopkins universities to assess the legal framework concerning EPT across all 50 states and other jurisdictions. According to the CDC, State law does not preclude the administration of prescription drugs to a patient for use by partners. The State Board of Physicians (MBP) and the State Board of Pharmacy, however, are reluctant to support prescriptions issued outside of a bona fide physician patient relationship, CDC found. Also, the Secretary of Health and Mental Hygiene or health officer may take actions necessary to prevent the spread of a communicable disease.

A certified nurse practitioner is authorized to prescribe drugs under regulations adopted jointly by the State Board of Nursing and MBP. A nurse practitioner may personally prepare and dispense a starter dosage of any drug the nurse practitioner is authorized to prescribe to a patient if the starter dosage complies with the statutory labeling requirements, there is not a charge for the starter dosage, and the practitioner enters an appropriate record in the patient's medical record. A starter dosage is an amount of drug sufficient to begin therapy for a 72-hour or less duration or prior to obtaining a larger

quantity of the drug to complete therapy. The nurse practitioner also must provide the patient with a written prescription, except for starter dosages or samples dispensed without charge.

A supervising physician and physician assistant may enter into a delegation agreement under which the physician may delegate prescribing and administering of controlled dangerous substances, prescription drugs, or medical devices. The agreement must meet specified statutory requirements.

**Local Fiscal Effect:** Baltimore City Health Department expenditures could increase by \$29,930 annually from fiscal 2008 through 2010 to provide antibiotic medication and instructions for the partners of individuals diagnosed with gonorrhea and/or chlamydia and who accept EPT therapy. The information and assumptions used in calculating the estimate are stated below:

- 1,000 males with gonorrhea, each with an average of 2 partners, and 260 females with gonorrhea, each with an average of 1.5 partners;
- 800 females with chlamydia, each with an average of 1.5 partners, and no males with chlamydia;
- a total of 2,993 packages of antibiotic medication and instructions annually given to individuals diagnosed with gonorrhea and/or chlamydia at an estimated cost to the health department of \$10 per package; and
- existing health department staff conducting the pilot program.

The health department would not charge individuals receiving the packages of antibiotics and information for their partners.

Existing health department staff could write the annual reports regarding the pilot program's operation and performance.

The health department advises that it is examining several options to fund the pilot program, including through savings associated with restructuring other existing programs.

## Additional Information

**Prior Introductions:** None.

**Cross File:** SB 349 (Senator McFadden) – Education, Health, and Environmental Affairs.

**Information Source(s):** Department of Health and Mental Hygiene, Baltimore City, Centers for Disease Control and Prevention, Department of Legislative Services

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