MARYLAND OVERDOSE RESPONSE

ADVISORY COUNCIL

2026 Annual Report

Released: November, 2026

This report has been prepared on behalf of the Maryland Overdose Response Advisory Council pursuant to Executive Order 01.01.2023.21. Copies of this report have been delivered to the Office of the Governor of Maryland as well as the Maryland Department of Legislative Services Library pursuant to Maryland State Education Article § 23-301(e).

Letter from the Chair


Lt. Governor Aruna K. Miller

When Governor Moore and I took office, we committed to leaving no one behind. That commitment put overdose and substance use disorder at the center of our work, a responsibility we share with state agencies, local partners, and every Marylander. And that commitment extends to the people who serve in our state. In September, Governor Moore made the state government a Recovery Friendly Workplace, ensuring that employees who struggle with substance use are offered help before they face discipline, and that stigma is removed from the workplace.

This report comes at a critical moment, as overdose deaths have fallen to their lowest level in a decade, 44 percent below where they stood when this Administration took office. Still, too many Marylanders continue to lose their lives. These individuals are someone's child, parent, coworker, or friend, and each leaves behind people who will carry that loss for the rest of their lives. With the drug supply changing and federal support uncertain, continued statewide coordination has never been more important.

Over two decades in public service, first as a transportation engineer in Montgomery County, then as a delegate, and now as Lt. Governor, I have seen the barriers that stand between people and the help they need. The Maryland Overdose Response Advisory Council (MORAC) was formed to bring state agencies together to remove them. This year, MORAC members formed three workgroups to expand access to stable housing, strengthen support for youth and families, and improve how the state manages grants and evaluates its substance use programs. The MORAC's first Citizen Advisory Workgroup, with members from all five regions of the state, also delivered recommendations. Together, their work will help shape the statewide strategy that guides Maryland's response in 2027.

That same spirit of partnership carried through the year. In February, families, advocates, and people in recovery joined us in Annapolis for the second annual Overdose Prevention Advocacy Day. In April, near real-time drug-checking results became available on the state's Overdose Data Dashboard, so communities can see what is circulating in their drug supply.

We are building a Maryland where help is there the moment someone reaches for it, where families do not have to find their way alone, and where every person has a clear path to recovery. Thank you to the members of the MORAC, our workgroup participants, and every community member who gave their time this year. Together, we will keep saving lives.

Yours in service,



Lt. Governor Aruna Miller

About the Advisory Council

The Maryland Overdose Response Advisory Council (MORAC) was established in December 2023, when Governor Wes Moore signed Executive Order 01.01.2023.21. The advisory council is chaired by Lt. Governor Aruna Miller and includes representatives from 18 state offices and agencies working to reduce overdose morbidity and mortality and increase access to substance use care in Maryland. The advisory council shares data related to the overdose crisis across agencies and provides strategic guidance for overdose response efforts and addressing disparities in overdose outcomes.



MORAC Meeting on September 10, 2026

Members of the Maryland Overdose Response Advisory Council include the following state entities:

- Maryland's Office of Overdose Response
- Maryland Department of Health
- Maryland Department of Human Services
- Maryland Department of Housing and Community Development
- Maryland Department of Labor
- Maryland Department of Commerce
- Maryland State Department of Education
- Maryland Department of Public Safety and Correctional Services
- Maryland Department of Juvenile Services
- Maryland Department of Emergency Management
- Maryland Department of Veterans and Military Families
- Maryland Department of Aging
- Maryland Department of Disabilities
- Governor's Office of Crime Prevention, Youth and Victim Services
- Maryland Institute for Emergency Medical Services Systems
- Office of the Public Defender
- Maryland Judiciary
- Maryland State Police

Advisory Council Membership



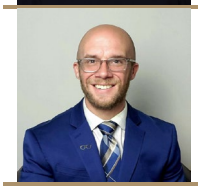
Emily Keller

Maryland's Office of Overdose Response



Anna Sierra

Department of Emergency Management



Brendan Welsh

Department of Health



Roslyn Jones

Department of Veterans and Military Families

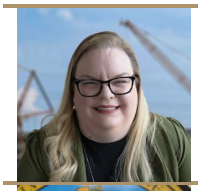
Representative Pending

Department of Human Services



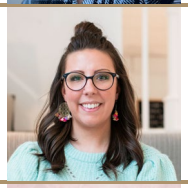
Barbara Sigler

Department of Aging



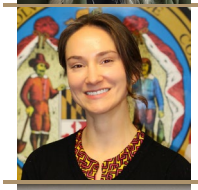
Danielle Meister

Department of Housing and Community Development



Kirsten Bosak

Department of Disabilities



Casey Tiefenwerth

Department of Labor



Micah Ferguson

Governor's Office of Crime Prevention and Policy



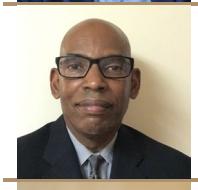
Jerel Registre

Department of Commerce



Ted Delbridge

Maryland Institute for Emergency Medical Services Systems



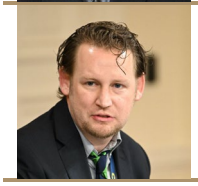
Reginald Burke

Department of Education



Kirsten Downs

Office of the Public Defender



Michael Richards

Department of Public Safety and Correctional Services

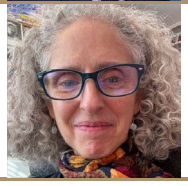


Richard "Gray" Barton

Maryland Judiciary

Jeremy Vogt

Maryland State Police



Jennifer Maehr

Department of Juvenile Services

Advisory Council Updates

The Maryland Overdose Response Advisory Council held five meetings in 2026, a summary of which can be found at StopOverdose.maryland.gov/MORAC. Throughout the year, the council worked to advance several key priorities, including increasing engagement with community members and working to implement its recommendations set forth in its previous annual report.[1]

Public Engagement in 2026

Maryland recognizes that an effective and comprehensive approach to addressing overdose must incorporate the perspectives of individuals, families, and communities directly impacted by substance use and overdose. Accordingly, meaningful community engagement is an integral component of the council's work. Members of the public are welcome to attend MORAC meetings, and each meeting provides an opportunity for members of the public to offer comments and perspectives. Additionally, this year the MORAC hosted a virtual meeting in July dedicated to creating an opportunity for those who may not be able to attend the in-person meetings in Annapolis to provide public comment.



Members of the Public Providing Input during MORAC Meetings

[1] https://stopoverdose.maryland.gov/morac

Citizen Advisory Workgroup

During the June 2025 MORAC meeting, Lt. Governor Miller called for the creation of a workgroup to help strengthen the integration of community expertise into Maryland's overdose response. The MORAC's first-ever Citizen Advisory Workgroup (CAW) was established to answer this call, with the mission of informing the activities of participating state agencies, with particular attention to strategies for preventing overdose and increasing access to substance use treatment, services, and recovery supports.



MORAC Citizen Advisory Workgroup

MOOR initiated the CAW's inaugural recruitment process in fall 2025, inviting Maryland residents with at least one of three areas of experience: lived experience with substance use, experience as a family member of an individual affected by substance use, or professional experience providing substance use-related care in Maryland.

The recruitment process generated more than 100 applications. In selecting members, MOOR considered applicants' personal statements, geographic representation, the breadth of their expertise, and the unique perspectives they could contribute to the workgroup.

The CAW currently includes members from each of Maryland's five regions: the Capital Region, Central Maryland, the Eastern Shore, Southern Maryland, and Western Maryland. The membership reflects a diverse range of experiences, including personal and family experiences with substance use, professional expertise, and firsthand knowledge of the systems and services that support people who use drugs.

In September 2026, the CAW submitted its first report outlining recommendations for consideration by the MORAC.[2] The recommendations will serve as an important source of community-informed guidance alongside available data, agency expertise, existing initiatives, and other stakeholder input to help identify areas where Maryland's response can be strengthened. As Maryland updates its overdose response strategy this fall (see below), the workgroup's recommendations will help inform the refinement of strategic priorities, objectives, and actions, including consideration of how progress should be measured and how implementation can remain responsive to community needs.

Overdose Prevention Advocacy Day

On February 10, 2026, the Lt. Governor's Office and Maryland's Office of Overdose Response hosted Maryland's second annual Overdose Prevention Advocacy Day rally in Annapolis. Speakers included the Lt. Governor, Special Secretary Keller, and additional state officials from both sides of the aisle. Community organizations, advocates, treatment providers, family members, and others gathered in solidarity to continue our commitment to addressing substance use and overdose in Maryland.



Overdose Prevention Advocacy Day (February 10, 2026)

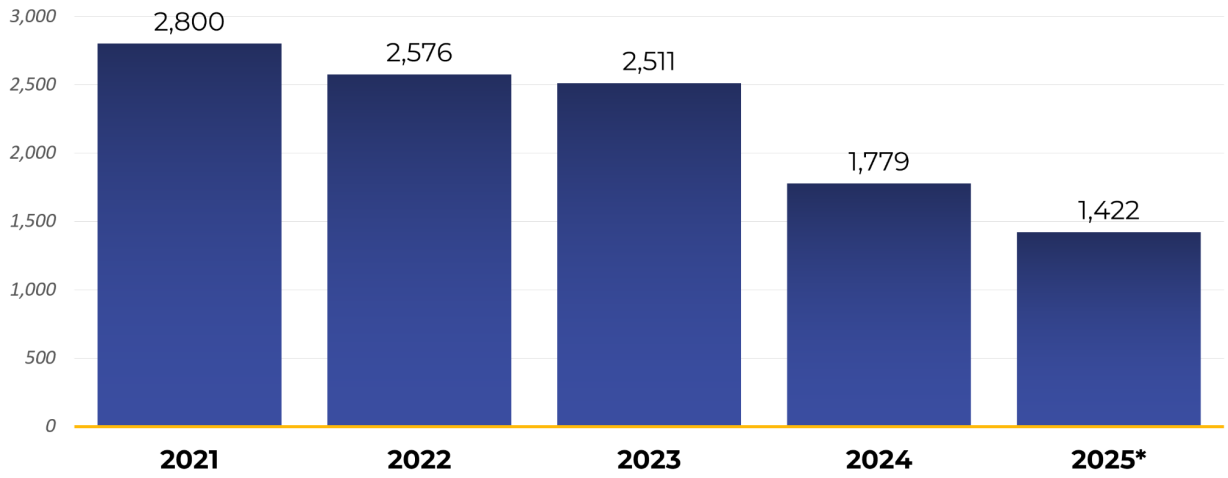
Overdose Trends in Maryland

Maryland has made substantial progress in reducing the number of fatal overdoses in the state. Since 2021, when fatal overdoses in Maryland reached a historic high of 2,800 in the wake of the COVID-19

[2] https://stopoverdose.maryland.gov/morac

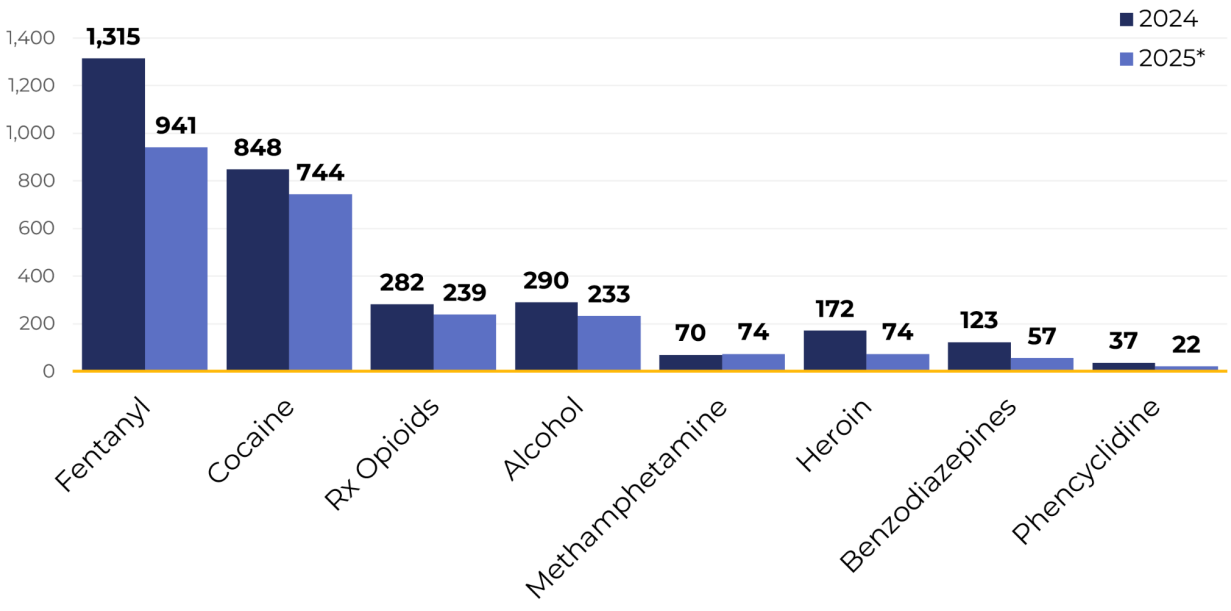
pandemic, the number of overdose deaths in the state has decreased by half. In 2025, there were 1,422 fatal overdoses in Maryland, according to preliminary data on Maryland's Overdose Data Dashboard.[3] These decreases have been observed broadly across most substance categories (see Figure 2, below) and all demographic groups (see Figure 3, on page 9).

Figure 1. Fatal Overdoses in Maryland by Year (2021–2025*)



*Source: Maryland Overdose Data Dashboard. Accessed October 2026. *Data for 2025 are preliminary.*

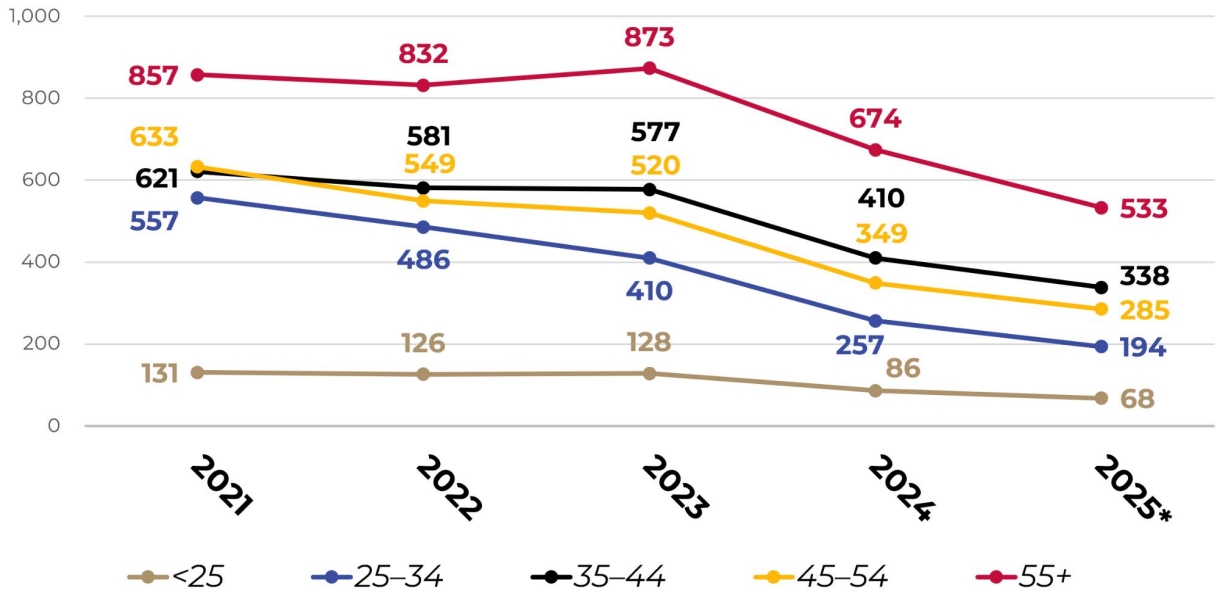
Figure 2. Fatal Overdoses in Maryland by Substance (2024–2025*)



*Source: Maryland Overdose Data Dashboard. Accessed October 2026. *Data for 2025 are preliminary.*

[3] https://health.maryland.gov/dataoffice/Pages/mdh-dashboards.aspx

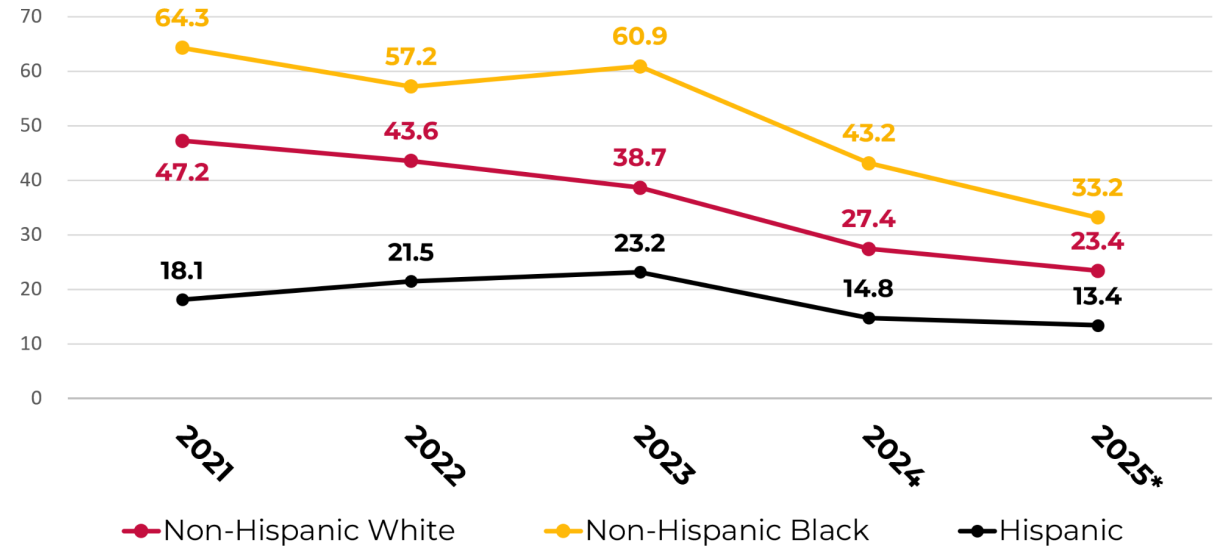
Figure 3. Fatal Overdoses in Maryland by Age Group (2020–2025)



*Source: Maryland Overdose Data Dashboard. Accessed October 2026. *Data for 2025 are preliminary.*

However, while fatal overdoses have decreased across all demographic groups since 2021, disparities remain. For example, in 2025, Black people in Maryland had a fatal overdose rate of 33.2 per 100,000 individuals, substantially higher than the statewide rate of 22.7 per 100,000 individuals. In 2025, the MORAC established a workgroup to assess the state's progress in addressing these disparities. Their findings, which are summarized in the 2025 MORAC Report, showed that while state agencies have made progress, opportunities remain to expand programming to reduce disparities.

Figure 4. Fatal Overdoses in Maryland per 100,000 Population by Race/Ethnicity (2020–2025)



*Source: Maryland Overdose Data Dashboard. Accessed October 2026. *Data for 2025 are preliminary.*

Progress Update: 2025 Recommendations

In 2026, the MORAC formed three workgroups to advance the recommendations outlined in the 2025 report. The workgroups focused on three key pillars: Youth & Families, Housing, and Grants Management and Program Evaluation. The following section details the recommendations from the 2025 MORAC report and key progress updates from the respective workgroups in 2026.

Housing Workgroup

In its annual report for 2025, the MORAC specified that "access to stable housing is an essential component for supporting individuals in recovery." In 2026, the Housing Workgroup reviewed each of the 2025 recommendations that address housing, identified barriers to progress, and identified actions to further enhance housing supports for individuals with substance use disorders and those in recovery.

2025 Recommendations to Increase Access to Housing

- Increase coordination across agencies to ensure that ASAM level 3.1 programs, temporary recovery housing, and permanent supportive housing are meeting the needs of Marylanders.[4]
- Promote Housing First approaches at the state and local level.
- Expand the reimbursable length of stay in recovery housing.
- Expand recovery housing options that can accommodate parents of young children.
- Promote awareness of recovery housing availability, such as through Maryland's substance use service locator tool.[5]
- Utilize peers in community housing settings to provide support and expand overdose prevention education.

Progress in 2026

Based on its review of the MORAC's 2025 housing recommendations, the workgroup reviewed progress by Maryland state agencies in 2026. Broadly, this includes the following:

- BHA is prioritizing the expansion of ASAM level 3.1 services in high-overdose jurisdictions. Additionally, proposed rule changes to COMAR 3.1 rules would require that residences help their clients establish discharge plans and "coordination of aftercare services through peer recovery support or a licensed provider."BHA is working to track inpatient bed availability through a new tool, Maryland Connect, and is studying how other states use similar locator tools.

[4] https://www.asam.org/asam-criteria/about-the-asam-criteria
[5] https://search.988.mdinfonet.org/

- Maryland state agencies provided funding to support housing services, such as $1,182,080 to support recovery housing for women and children through DHCD's Recovery Housing Program.
- The workgroup also compared states that expanded recovery beds through a Centers for Medicare and Medicaid Services (CMS) Section 1115 waiver with states that expanded beds without a waiver (Section 7). The states with the fastest growth in recovery housing did so without a waiver, through housing finance, certification, and braided state and settlement funds.

Youth & Families Workgroup

The Youth and Families Workgroup was composed of representatives from several agencies that understand the complex challenges faced by families affected by the overdose crisis across Maryland. Agency representatives participated in bi-weekly meetings throughout the year. Meetings focused on evaluating the 2025 recommendations for progress, feasibility, and barriers to implementation.

2025 Recommendations to Increase Engagement with Youth & Families

- Senate Bill 708 of 2024 shifts child welfare to a kin-first approach. Maryland should explore kin-first approaches to prevention, services that promote drug user health, treatment, and recovery services for children in out-of-home care.[6]
- Maryland should expand the age limit of its Sobriety Treatment and Recovery Teams (START) Model (which provides specialized coaching and social services to families with a parent with a substance use disorder) from five years of age to 18.[7]
- Maryland should support the expansion of the Office of the Public Defender's Better Together program, which aims to reduce family separations for parents with substance use disorders in the criminal legal system.[8]
- Maryland should expand peer recovery services in school settings.
- Maryland should explore the expansion of recovery high schools across the state for youth with substance use disorders.
- Maryland should expand youth outreach efforts with an emphasis on underserved and disproportionately impacted communities, such as Hispanic youth.
- Maryland should explore establishing a register of local-level substance use disorder services (similar to Maryland's Treatment Locator tool) to help families access care.

Progress in 2026

Maryland state agencies made significant progress in addressing the prior year's recommendations in two key areas:

[6] https://mgaleg.maryland.gov/mgawebsite/Legislation/Details/SB0708?ys=2024rs
[7] https://dhs.maryland.gov/child-protective-services/risk-of-harm/substance-exposed-newborn/service-programs/
[8] https://opd.state.md.us/bettertogether

- In 2025, Maryland expanded the age limit of the Sobriety Treatment and Recovery Teams (START) Model from five years to 17.
- Maryland will begin providing a centralized way to search for local substance use disorder services through MD Behavioral Health Connect, which is set to launch in January 2027.

The workgroup received presentations on three recovery support models for youth with substance use disorders: Montgomery County's Recovery and Academic Program, the Roots Project, and Phoenix Academy. These programs show how recovery-focused services can help young people stay in school while maintaining their recovery. These models can inform future planning for funding opportunities.

Grants Management & Program Evaluation Workgroup

Initially established as two separate workgroups, the Program Evaluation Workgroup and Grants Management Workgroup were formally integrated into a single workgroup in June 2026. Given the significant overlap in mission and objectives, the merger created a more efficient structure for advancing statewide efforts related to grants management, program evaluation, performance measurement, and strategic planning.

2025 Recommendations to Enhance Grants Management

- ➢ State agencies should increase technical assistance opportunities for grant applicants to reduce barriers to accessing and managing grant funds.
- ➢ Maryland should implement a unified grants management system for state agencies to simplify grantmaking and monitoring.
- ➢ Maryland should promote awareness of all funding opportunities related to substance use and overdose through the Governor's Grants Office.

Progress in 2026

The Grants Management & Program Evaluation Workgroup reviewed survey findings from nine State agencies to better understand existing grant management and technical assistance practices, program inventories, data collection methods, and evaluation approaches across Maryland. The workgroup concluded that while agencies are providing technical assistance to applicants and grantees in various ways (e.g., including pre-application webinars, post-award training, and one-on-one meetings), grantees could benefit from additional support. The workgroup acknowledges that a unified grants management system would streamline applications and tracking, but discovered that the Maryland Efficient Grants Application Council is exploring potential technology solutions as part of their work.[9]

At the recommendation of the workgroup, MORAC agencies took the following actions in 2026:

- Agencies added the following resources to their websites:
  - Nonprofit Navigator Request Form
  - The Governor's Grants Office

[9] https://dbm.maryland.gov/employees/Pages/megacouncil.aspx

- Agencies reviewed the information on the Governor's Grants Office website to ensure that their agency is represented and that their funding opportunities are listed.

2025 Recommendations to Improve Program Evaluation

- ➢ Maryland state agencies should work to enhance evaluation of the impacts of their programs addressing substance use and overdose.
- ➢ Maryland state agencies should standardize performance measures where feasible.

Progress in 2026

The Grants Management & Program Evaluation Workgroup identified considerable variation in how agencies collect and manage program data, with most existing reporting emphasizing grant outputs rather than measurable program outcomes. To address this, the workgroup began standardizing statewide program classifications by aligning agency program inventories with the Maryland Overdose Response Strategy framework, creating a common structure that can be consistently applied across agencies. Central to this effort was a strategic focus on transitioning from measuring program activities (e.g., training conducted or individuals served) toward evaluating program effectiveness, long-term outcomes, and system-level impact. To aid in the process, the workgroup reviewed existing federal and state evaluation resources, including CDC performance measures and Maryland's developing Substance Use Vulnerability Index, to identify opportunities for future alignment and performance measurement.

The workgroup concluded that Maryland has substantial programmatic and performance data available across state agencies. Members agreed that establishing a standardized framework for categorizing programs is an essential step toward improving statewide performance measures and evaluating outcomes across funding streams and agencies.

The workgroup participating agencies bring significant subject matter expertise to this work. The workgroup's 2026 recommendations outline next steps to expand program evaluation capacity.

2026 Recommendations

The recommendations below were adopted by the MORAC during the October 15th meeting.

Citizen Advisory Workgroup

MOOR should incorporate the Citizen Advisory Workgroup recommendations into its strategic planning process, using it to facilitate conversations with state agency partners to determine opportunities and challenges.

Housing Workgroup

The Housing Workgroup identified several recommendations to increase housing supports for Marylanders on their paths to substance use recovery:

- Support the expansion of DHCD's new permanent supportive housing program, which will prioritize individuals who are chronically homeless.
- Implement training and technical assistance opportunities for housing and service providers on quality standards for supportive housing, to include education on ASAM levels of care, referral standards, and developing overdose response plans.
- Expand outreach and education on the new criminal background and substance use treatment protections for rental housing applicants and tenants under the Fair Chance Housing Act (SB 937) of 2026.
- BHA will publish an interactive map of county-level recovery home capacity, once available.
- Continue to support housing-first models that can accommodate individuals with criminal histories or those who relapse while in recovery housing.
- Identify funding to extend recovery housing reimbursements from 60 to 90 days through MDRN bed rate to up to 90 days for priority groups, such as individuals on conditional release.
- Continue to expand support for recovery and treatment services that can accommodate parents with young children.
- Continue to expand re-entry planning support for incarcerated individuals, to include expanding the implementation of the CMS 1115 waiver in more correctional facilities.

Youth & Families Workgroup

The workgroup recognizes that services targeting youth and families are provided through a broad spectrum of state and local agencies and community organizations. After discovery, program input, and discussion, the workgroup identified several opportunities to expand services for youth and families in key areas. As this effort continues, additional service provider input is needed to understand the unique challenges faced by Maryland families, barriers to program implementation, and success stories.

- Maryland should expand youth outreach efforts and peer recovery services in school and community settings with an emphasis on underserved and disproportionately impacted communities, such as Hispanic youth. Such services should meet youth and families where they are, promote lived experience, and strive to break generational cycles of addiction.
- Maryland should also support the continued expansion of the Office of the Public Defender's Better Together program, which aims to reduce family separations for parents with substance use disorders in the criminal legal system.[10]
- Families continue to experience challenges when seeking services. Maryland should explore establishing a multi-agency supported registry of local-level substance use disorder services (similar to Maryland's Treatment Locator tool) to help families access care.

[10] https://opd.state.md.us/bettertogether

Grants Management & Program Evaluation Workgroup

To avoid duplicating efforts, the workgroup recommends monitoring the status of the Maryland Efficient Grants Application Council, which was established by Senate Bill 459 of 2024 to streamline the grant application process and improve grant administration efficiency.[11]

The workgroup recommends that MORAC agencies prioritize supporting the development of additional statewide program evaluation capacity and expertise, which may include dedicated evaluation personnel within MOOR, external technical assistance, or exploring partnerships with state agencies and offices possessing specialized expertise in program evaluation and performance measurement. Strengthening Maryland's program evaluation capacity will position the State to move beyond measuring activities and outputs toward assessing long-term outcomes, identifying effective strategies, informing future policy decisions, and maximizing the impact of overdose response investments statewide.

Looking Forward

Updating Maryland's Overdose Response Strategy

Maryland is currently working to update its Overdose Response Strategy, which identifies five broad objectives for reducing overdose mortality, corresponding with the state's five priority areas of *Prevention*, *Meeting People Where They Are*, *Treatment*, *Recovery*, and *Public Safety.* Last updated in 2025, the strategy was compiled using input from state agencies, local partners through each of Maryland's 24 local Overdose Prevention Teams, subject matter experts, and direct community feedback.

To update the plan, Maryland's Office of Overdose Response is working with the Lt. Governor's Office to coordinate the interagency process to gather relevant data, identify gaps in current response programming, and refine strategies across the continuum of care to reduce overdoses further, increase supportive services for people with substance use disorders and individuals who use drugs, and bolster avenues to recovery. In addition to contributions from state, local, and community partners, as with previous strategic planning, this update will also incorporate the recommendations outlined in this report as well as the recommendations provided by the Citizen Advisory Workgroup. Following this process, MOOR aims to release the updated Overdose Response Strategy in January 2027, and it will guide programming through 2029.

Response Strategy Implementation

Beginning in 2027, MORAC meetings will be restructured to place greater emphasis on implementation, accountability, and continuous improvement of Maryland's strategic priorities outlined in the forthcoming 2027–2029 Overdose Response Strategy. MORAC meetings will serve as a forum to monitor progress toward the strategy's goals, assess implementation across participating agencies, identify barriers and opportunities for coordination, and determine where additional action or support is needed. This structure is intended to create a clearer connection between the strategy's priorities and

[11] https://mgaleg.maryland.gov/2024RS/bills/sb/sb0459T.pdf

the work of individual state agencies, while allowing MORAC to track collective progress and address issues that require cross-agency coordination.

The council will also continue to incorporate community perspectives, including public comment and input from the Citizen Advisory Workgroup, so that implementation remains responsive to the experiences of Maryland residents affected by substance use and overdose.