HOUSE BILL 761

By: Delegates Patterson, D. Barnes, Brooks, Carey, Charles, D.M. Davis, Fennell, W. Fisher, Harrison, Healey, Hill, Ivey, Jackson, Proctor, Queen, Sample-Hughes, Turner, and Valentino-Smith Valentino-Smith, Pendergrass, Pena-Melnyk, Bagnall, Barron, Bhandari, Carr, Chisholm, Cullison, Johnson, Kelly, Kerr, Kipke, Krebs, R. Lewis, Metzgar, Morgan, <u>Rosenberg, Saab, Szeliga, and K. Young</u> Introduced and read first time: February 8, 2019

Assigned to: Health and Government Operations

Committee Report: Favorable with amendments House action: Adopted Read second time: March 13, 2019

CHAPTER _____

1 AN ACT concerning

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Health – Sickle Cell Disease – Steering Committee, and Services, Testing, and Funding (Sickle Cell Treatment Act of 2019)

 $\mathbf{5}$ FOR the purpose of altering the intent of certain provisions of law regarding sickle cell 6 anemia to include the provision of certain resources; altering the representatives $\overline{7}$ required to be included on the Statewide Steering Committee on Services for Adults 8 with Sickle Cell Disease; altering the duties of the Steering Committee; requiring 9 authorizing the Maryland Department of Health to provide certain services relating 10 to sickle cell disease in consultation with the Steering Committee; requiring the Department to provide certain services through community-based organizations to 11 the extent practicable; requiring a local health department to provide sickle cell 1213 disease testing and counseling at no cost to any individual referred by certain health 14care providers: requiring a local health department to notify an individual if certain testing is positive for sickle cell disease: requiring the Marvland Public Health 1516 Laboratory, under certain circumstances, to provide an individual's sickle cell 17screening test results to a local health department or entity contracting with the local health department providing certain services to the individual; and generally 18 19relating to sickle cell disease.

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.



1 BY repealing and reenacting, with amendments, $\mathbf{2}$ Article – Health – General Section 18-501 and 18-506 3 4 Annotated Code of Maryland (2015 Replacement Volume and 2018 Supplement) $\mathbf{5}$ 6 BY adding to 7 Article – Health – General Section 18–507 and 18–508 8 9 Annotated Code of Maryland (2015 Replacement Volume and 2018 Supplement) 10 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, 11 That the Laws of Maryland read as follows: 12Article – Health – General 13 14 18 - 501.The intent of this subtitle is: 1516 (1)To educate parents and physicians regarding homozygous sickle cell anemia; [and] 1718 (2)To monitor each affected infant's health in that regard; AND TO PROVIDE RESOURCES FOR DETECTING SICKLE CELL DISEASE 19 (3) 20AND SUPPORTING INDIVIDUALS WITH SICKLE CELL DISEASE. 2118 - 506.22(a) In this section, "Steering Committee" means the Statewide Steering Committee on Services for Adults with Sickle Cell Disease. 2324(b) There is a Statewide Steering Committee on Services for Adults with Sickle 25Cell Disease. 26The Steering Committee shall include representatives from: (c) 27(1)Local and national groups that advocate for individuals with sickle cell 28disease; 29(2)Interest and support groups for individuals with sickle cell disease; The Genetic Alliance: 30 (3)

HOUSE BILL 761

 $\mathbf{2}$

HOUSE BILL 761

1	(4)	Faith	-based organizations;]
2	[(5)]	(3)	Community and consumer groups;
$\frac{3}{4}$	[(6)] experience caring		Academic and private clinical settings with knowledge and alts with sickle cell disease;
5	[(7)]	(5)	Area hospitals caring for individuals with sickle cell disease; and
6	[(8)]	(6)	Pediatric clinics that care for children with sickle cell disease.
7	(d) The Steering Committee shall:		
8	(1)	Estal	olish institution and community partnerships;
9 10	(2) Establish a statewide network of stakeholders who care for individuals with sickle cell disease;		
$\begin{array}{c} 11 \\ 12 \end{array}$	(3) Educate individuals with sickle cell disease, the public, and health care providers about the State options for care of sickle cell disease; and		
13	[(4)	Seek	grant funding to:
$\begin{array}{c} 14 \\ 15 \end{array}$	sickle cell disease	(i) ;	Develop and establish a case management system for adults with
16		(ii)	Establish an adult sickle cell disease day infusion center;
17 18	and treatment pro	(iii) ogram i	Develop, implement, and lead a State comprehensive education for adults with sickle cell disease; and
19 20 21 22	(iv) Develop and implement a health care provider awareness and education campaign to increase provider awareness of health disparities, community dynamics, cultural practice, behavioral and psychosocial issues, and the use of standardized treatment and emergency room protocols.]		
$23 \\ 24 \\ 25$	(4) IDENTIFY FUNDING SOURCES FOR IMPLEMENTING OR SUPPORTING THE ACTIONS, STUDIES, POLICIES, REGULATIONS, OR LAWS RECOMMENDED BY THE STEERING COMMITTEE, INCLUDING FUNDING FROM:		
26		(I)	STATE, FEDERAL, AND LOCAL GOVERNMENT SOURCES; AND
27		(II)	PRIVATE SOURCES.
28	18–507.		

HOUSE BILL 761

1 (A) THE DEPARTMENT SHALL MAY, IN CONSULTATION WITH THE 2 STATEWIDE STEERING COMMITTEE ON SERVICES FOR ADULTS WITH SICKLE CELL 3 DISEASE, PROVIDE SERVICES RELATING TO SICKLE CELL DISEASE, INCLUDING:

4 (1) EDUCATIONAL PROGRAMS ON SICKLE CELL DISEASE FOR 5 INDIVIDUALS AFFECTED BY THE DISEASE, INCLUDING:

- 6 (I) INDIVIDUALS WITH SICKLE CELL DISEASE;
- 7 (II) FAMILIES OF INDIVIDUALS WITH SICKLE CELL DISEASE;
- 8 (III) CAREGIVERS OF INDIVIDUALS WITH SICKLE CELL DISEASE;
- 9 (IV) EMPLOYEES AT PRIMARY AND SECONDARY SCHOOLS; AND
- 10 (V) HEALTH CARE PROVIDERS;

11 (2) SOCIAL SERVICES SUPPORT TO INDIVIDUALS WITH SICKLE CELL 12 DISEASE, INCLUDING SUPPORT FROM SOCIAL WORKERS AND COMMUNITY HEALTH 13 WORKERS TO PROVIDE INFORMATION ON SERVICES THAT MAY BE AVAILABLE TO 14 THE INDIVIDUAL;

- 15 **(3) TESTING;**
- 16 (4) GENETIC COUNSELING;

17 **(5)** By establishing sickle cell disease infusion centers in 18 The State;

19(6) (5)ASSISTANCE WITH ANY AVAILABLE REIMBURSEMENT FOR20MEDICAL EXPENSES RELATED TO SICKLE CELL DISEASE;

21(7) (6)EDUCATION AND COUNSELING SERVICES AFTER THE22RECEIPT OF SICKLE CELL TRAIT TEST RESULTS FROM THE STATE'S NEWBORN23SCREENING PROGRAM; AND

24 (8) (7) ANY OTHER PROGRAMS OR SERVICES THAT ARE NECESSARY
25 TO DECREASE THE USE OF ACUTE CARE SERVICES BY INDIVIDUALS WHO HAVE
26 SICKLE CELL DISEASE.

(B) THE DEPARTMENT SHALL PROVIDE THE SERVICES IN SUBSECTION (A)
OF THIS SECTION THROUGH COMMUNITY-BASED ORGANIZATIONS TO THE EXTENT
PRACTICABLE.

1 18-508.

2 (A) (1) A LOCAL HEALTH DEPARTMENT SHALL PROVIDE SICKLE CELL 3 DISEASE TESTING AND COUNSELING AT NO COST TO ANY INDIVIDUAL WHO IS 4 REFERRED BY:

5 (I) A PHYSICIAN LICENSED TO PRACTICE MEDICINE IN THE 6 STATE;

7 (II) A PHYSICIAN ASSISTANT LICENSED UNDER TITLE 15 OF THE 8 HEALTH OCCUPATIONS ARTICLE; OR

9 (III) A NURSE PRACTITIONER LICENSED TO PRACTICE 10 REGISTERED NURSING IN THE STATE WHO IS CERTIFIED AS A NURSE PRACTITIONER 11 BY THE STATE BOARD OF NURSING UNDER TITLE 8 OF THE HEALTH OCCUPATIONS 12 ARTICLE.

13 (2) A LOCAL HEALTH DEPARTMENT SHALL NOTIFY AN INDIVIDUAL IF
 14 ANY TESTING CONDUCTED BY THE DEPARTMENT IS POSITIVE FOR SICKLE CELL
 15 DISEASE.

16 **(B)** THE MARYLAND PUBLIC HEALTH LABORATORY SHALL PROVIDE AN 17 INDIVIDUAL'S SICKLE CELL SCREENING TEST RESULTS TO ANY LOCAL HEALTH 18 DEPARTMENT OR ENTITY CONTRACTING WITH THE LOCAL HEALTH DEPARTMENT 19 THAT IS PROVIDING SICKLE CELL SERVICES TO THE INDIVIDUAL UNDER 20 SUBSECTION (A) OF THIS SECTION:

- 21 (1) ON REQUEST; AND
- 22 (2) WITH THE INDIVIDUAL'S AUTHORIZATION.

23 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect June
 24 1, 2019.

Approved:

Governor.

Speaker of the House of Delegates.

President of the Senate.