Chapter 510

(House Bill 1385)

AN ACT concerning

Public Health – Electronic Advance Directives – Witness Requirements, Information Sheet, and Repository Services <u>Procedures, Information Sheet, and</u> <u>Use of Electronic Advance Directives</u>

FOR the purpose of providing that certain provisions of law apply to managed care organizations in a certain manner; requiring each managed care organization to offer electronic advance directives to its enrollees at a certain time; authorizing managed care organizations to contract with an electronic advance directives service under certain circumstances; repealing a provision of law providing that an electronic advance directive created in a certain manner satisfies certain requirements: prohibiting a certain witness from being required to be physically present at the time a declarant signs or acknowledges the declarant's signature on an electronic advance directive; requiring managed care organizations and the Maryland Health Benefit Exchange to provide a certain information sheet in accordance with certain provisions of law: requiring a certain information sheet to encourage the use of electronic advance directives and provide certain information; prohibiting a certain information sheet from imposing certain requirements; requiring the Department of Health and Mental Hygiene, for a certain purpose, to contract with an electronic advance directives service to connect with health care providers in a certain manner; establishing certain requirements for an electronic advance directives service; requiring the Department to encourage certain persons and entities to engage in certain outreach efforts for a certain purpose; requiring the Department to encourage the use of electronic advance directives; requiring the State-designated health information exchange to make an electronic advance directive available to a certain health care provider under certain circumstances; requiring health insurance carriers to offer electronic advance directives to their members and enrollees at a certain time; authorizing carriers to contract with an electronic advance directives service under certain circumstances; requiring the Exchange to provide a certain information sheet in a certain manner; requiring the Secretary of Budget and Management to offer electronic advance directives to certain employees at a certain time a certain expression of an individual's wishes regarding health care shall be considered under certain circumstances, notwithstanding any other provision of law; repealing a provision of law establishing that a certain electronic advance directive satisfies a certain requirement; establishing that a witness is not required for an electronic advance directive under certain circumstances; authorizing the State-designated health information exchange to accept as valid a certain electronic advance directive in a certain form under certain circumstances; requiring the Maryland Health Benefit Exchange to provide a certain information sheet in accordance with certain provisions of this Act; altering the contents of a certain information sheet; requiring the Department of Health and Mental Hygiene to take certain actions regarding electronic advance directives; repealing the Advance Directive Registry in the Department; establishing an Advance Directive Program in the Department; repealing certain powers and duties of the Secretary of Health and Mental Hygiene and the Department relating to the Registry: authorizing the Secretary to adopt certain regulations for the Program: authorizing an individual to register an advance directive with a certain advance directives service; requiring a registrant to provide certain notice to a certain advance directives service under certain circumstances: requiring a health care provider to provide a registrant with certain information under certain circumstances; providing that an individual is not required to submit an advance directive to a certain advance directives service: requiring the Department to take certain actions before accepting an advance directive into a certain advance directives service; establishing certain immunity for a health care provider for failing to access a certain advance directives service or relving on information provided by a certain advance directives service; altering a certain definition; repealing a certain definition; requiring the Department, for a certain purpose, to contract with an electronic advance directives service to connect with health care providers in a certain manner; requiring certain money in the Spinal Cord Injury Research Trust Fund to be used to administer the Advance Directive Registry Program in the Department; altering the date on or before which the Department must implement a certain plan; requiring the Department to offer to certain recipients a certain information sheet in a certain manner and the use of electronic advance directives through a certain service; requiring the Maryland Health Care Commission to develop certain criteria for a certain purpose: establishing certain requirements that an electronic advance directives service must meet to connect to the State-designated health information exchange; authorizing the State-designated health information exchange to charge a certain fee under certain circumstances; requiring the State-designated health information exchange to ensure that electronic advance directives services do not have access to certain information; altering a certain definition; making conforming changes; and generally relating to electronic advance directives.

BY repealing and reenacting, without amendments,

Article – Health – General Section 5–602(a), 5–620, and 15–109.1 Annotated Code of Maryland (2015 Replacement Volume)

BY repealing and reenacting, with amendments,

Article – Health – General

 Section 5-602(c), 5-615, 5-622, and 5-623
 5-602(a) and (c), 5-615, 5-622, 13-1406,

 and 15-109.1
 Section 5-602(a) and (c), 5-615; 5-619 through 5-623, 5-625,

 and 5-626 to be under the amended part "Part II. Advance Directive Program";

 13-406, and 15-109.1

 Annotated Code of Maryland

 (2015 Replacement Volume)

BY repealing and reenacting, without amendments,

Article – Health – General Section 5–620 Annotated Code of Maryland (2015 Replacement Volume)

BY adding to

Article – Health – General Section 15–102.9 <u>5–615.1 and 19–144</u> Annotated Code of Maryland (2015 Replacement Volume)

BY repealing

<u>Article – Health – General</u> <u>Section 5–624</u> <u>Annotated Code of Maryland</u> (2015 Replacement Volume)

BY repealing and reenacting, with without amendments, Article – Insurance Section <u>15–122.1</u> <u>6–103.1</u> Annotated Code of Maryland (2011 Replacement Volume and 2015 Supplement)

BY adding to

Article – Insurance Section 31–108(g) Annotated Code of Maryland (2011 Replacement Volume and 2015 Supplement)

BY adding to

Article – State Personnel and Pensions Section 2–503(e) Annotated Code of Maryland (2015 Replacement Volume)

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

Article - Health - General

5-602.

(a) (1) Any competent individual may, at any time, make a written or electronic advance directive regarding the provision of health care to that individual, or the withholding or withdrawal of health care from that individual.

(2) NOTWITHSTANDING ANY OTHER PROVISION OF LAW, IN THE ABSENCE OF A VALIDLY EXECUTED OR WITNESSED ADVANCE DIRECTIVE, ANY AUTHENTIC EXPRESSION MADE BY AN INDIVIDUAL WHILE COMPETENT OF THE INDIVIDUAL'S WISHES REGARDING HEALTH CARE FOR THE INDIVIDUAL SHALL BE CONSIDERED.

(c) (1) A written or electronic advance directive shall be dated, signed by or at the express direction of the declarant, and subscribed by two witnesses.

(2) (i) Except as provided in subparagraphs (ii) and (iii) of this paragraph, any competent individual may serve as a witness to an advance directive, including an employee of a health care facility, nurse practitioner, physician assistant, or physician caring for the declarant if acting in good faith.

witness.

(ii) The health care agent of the declarant may not serve as a

(iii) At least one of the witnesses must be an individual who is not knowingly entitled to any portion of the estate of the declarant or knowingly entitled to any financial benefit by reason of the death of the declarant.

(3) [An electronic advance directive that is created in compliance with the electronic witness protocols of the Advance Directive Registry of the Department shall satisfy the witness requirement of paragraph (1) of this subsection] A WITNESS WHO USES AN ELECTRONIC SIGNATURE AT THE DIRECTION OF THE DECLARANT TO WITNESS AN ELECTRONIC ADVANCE DIRECTIVE MAY NOT BE REQUIRED TO BE PHYSICALLY PRESENT AT THE TIME THE DECLARANT SIGNS OR ACKNOWLEDGES THE DECLARANT'S SIGNATURE ON THE ELECTRONIC ADVANCE DIRECTIVE IS NOT REQUIRED FOR AN ELECTRONIC ADVANCE DIRECTIVE IF THE DECLARANT'S IDENTITY HAS BEEN ESTABLISHED USING REMOTE IDENTITY PROOFING AND MULTIFACTOR AUTHENTICATION SERVICES:

(I) <u>Established</u> in accordance with the National Institute of Standards and Technology Special Publication 800–63–2: Electronic Authentication Guideline; AND

(II) APPROVED BY THE MARYLAND HEALTH CARE COMMISSION.

(4) THE STATE-DESIGNATED HEALTH INFORMATION EXCHANGE MAY ACCEPT AS VALID AN UNWITNESSED ELECTRONIC ADVANCE DIRECTIVE IN THE FORM OF A VIDEO RECORD OR FILE TO STATE THE DECLARANT'S WISHES REGARDING HEALTH CARE FOR THE DECLARANT OR TO APPOINT AN AGENT IF THE VIDEO RECORD OR FILE:

(I) IS DATED; AND

(II) IS STORED IN AN ELECTRONIC FILE BY AN ELECTRONIC ADVANCE DIRECTIVES SERVICE RECOGNIZED BY THE MARYLAND HEALTH CARE COMMISSION.

5-615.

(a) In this section, "health care facility" has the meaning stated in § 19–114 of this article.

(b) Each health care facility shall provide each individual on admittance to the facility information concerning the rights of the individual to make decisions concerning health care, including the right to accept or refuse treatment, and the right to make an advance directive, including a living will.

(c) (1) The Department, in consultation with the Office of the Attorney General, shall develop an information sheet that provides information relating to advance directives, which shall include:

(i) Written statements informing an individual that an advance directive:

1. Is a useful, legal, and well established way for an individual to direct medical care;

2. Allows an individual to specify the medical care that the individual will receive and can alleviate conflict among family members and health care providers;

3. Can ensure that an individual's religious beliefs are considered when directing medical care;

4. Is most effective if completed in consultation with family members, or legal and religious advisors, if an individual desires;

5. Can be revoked or changed at any time;

6. Is available in many forms, including model forms developed by religious organizations, estate planners, and lawyers;

7. Does not have to be on any specific form and can be personalized; and

8. If completed, should be copied for an individual's family members, physicians, and legal advisors; and

(ii) The following written statements:

1. That an individual should discuss the appointment of a health care agent with the potential appointee;

2. That advance directives are for individuals of all ages;

3. That in the absence of an appointed health care agent, the next of kin make an individual's health care decisions when the individual is incapable of making those decisions; and

4. That an individual is not required to complete an advance directive.

(2) The information sheet developed by the Department under this subsection shall be provided by:

(i) The Department, in accordance with § 15–109.1 of this article;

(ii) The Motor Vehicle Administration, in accordance with § 12–303.1 of the Transportation Article; [and]

(iii) A carrier, in accordance with § 15–122.1 of the Insurance Article;

AND

(IV) A MANAGED CARE ORGANIZATION, IN ACCORDANCE WITH § 15–102.9 OF THIS ARTICLE; AND

 (\forall) (iv) The Maryland Health Benefit Exchange, in Accordance with § 31–108(G) of the Insurance Article.

(3) The information sheet developed by the Department under this subsection may not contain or promote a specific advance directive form <u>OR AN</u> <u>ELECTRONIC ADVANCE DIRECTIVE TECHNOLOGY OR SERVICE</u>.

(4) THE INFORMATION SHEET DEVELOPED BY THE DEPARTMENT UNDER THIS SUBSECTION <u>AT A MINIMUM SHALL</u>:

(I) SHALL ENCOURAGE THE USE OF ELECTRONIC ADVANCE DIRECTIVES AND PROVIDE INFORMATION ABOUT SUBMITTING ELECTRONIC ADVANCE DIRECTIVES TO THE ADVANCE DIRECTIVE REGISTRY IN THE

Ch. 510

DEPARTMENT, INCLUDING ANY FEES REQUIRED TO USE THE SERVICES OF THE REGISTRY; BUT

(II) MAY NOT REQUIRE THE USE OF AN ELECTRONIC ADVANCE DIRECTIVE, A SPECIFIC ELECTRONIC ADVANCE DIRECTIVE FORM, THE ADVANCE DIRECTIVE REGISTRY, OR A SPECIFIC ADVANCE DIRECTIVE SERVICE.

(I) EDUCATE THE PUBLIC ON THE USE OF ELECTRONIC ADVANCE DIRECTIVES;

(II) ENCOURAGE THE USE OF ELECTRONIC ADVANCE DIRECTIVES;

(III) PROVIDE INFORMATION ABOUT DEVELOPING AN ELECTRONIC ADVANCE DIRECTIVE;

(IV) <u>DESCRIBE HOW ELECTRONIC ADVANCE DIRECTIVES ARE</u> <u>MADE AVAILABLE AT THE POINT OF CARE;</u>

(V) INDICATE THAT THE USE OF AN ELECTRONIC ADVANCE DIRECTIVE IS NOT REQUIRED; AND

(VI) INDICATE THAT INDIVIDUALS DO NOT HAVE TO PAY TO HAVE THEIR ELECTRONIC ADVANCE DIRECTIVES HONORED.

<u>5-615.1.</u>

THE DEPARTMENT SHALL:

(1) ENCOURAGE THE USE OF ELECTRONIC ADVANCE DIRECTIVES;

(2) <u>CARRY OUT APPROPRIATE EDUCATIONAL AND OUTREACH</u> EFFORTS TO INCREASE PUBLIC AWARENESS OF ELECTRONIC ADVANCE DIRECTIVES; <u>AND</u>

(3) <u>ENCOURAGE THE FOLLOWING PERSONS AND ENTITIES TO</u> ENGAGE IN OUTREACH EFFORTS REGARDING ELECTRONIC ADVANCE DIRECTIVES:

- (I) THE MARYLAND DEPARTMENT OF AGING;
- (II) <u>COUNTY OMBUDSPERSONS;</u>
- (III) LOCAL HEALTH DEPARTMENTS;

2016 LAWS OF MARYLAND

(IV) SENIOR LIVING FACILITIES;

- (V) ACADEMIC INSTITUTIONS;
- (VI) <u>RELIGIOUS ORGANIZATIONS;</u>
- (VII) HOSPITALS; AND

(VIII) OTHER SIMILAR PERSONS OR ENTITIES.

Part II. Advance Directive [Registry] PROGRAM.

<u>5–619.</u>

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

(b) "Advance directive" has the meaning stated in § 5–601 of this subtitle.

(c) <u>"Registrant" means an individual who registers an advance directive with [the</u> <u>Department] AN ELECTRONIC ADVANCE DIRECTIVES SERVICE RECOGNIZED BY THE</u> <u>MARYLAND HEALTH CARE COMMISSION.</u>

[(d) <u>"Registry" means the repository for advance directives in the Department.</u>]

5-620.

There is an Advance Directive Registry **PROGRAM** in the Department.

<u>5–621.</u>

The Secretary may adopt regulations to ensure the efficient operation of the [Registry] **PROGRAM**.

5 - 622.

(a) (1) The Secretary shall, by regulation, set a fee for any service of the Registry, including an initial fee to utilize the services of the Registry and renewal fees.

(2) The fees set by the Secretary may not, in the aggregate, exceed the Department's costs to establish and operate the Registry.

(b) (1) The Department may, by contract, obtain from any person services related to the establishment and operation of the Registry.

(2) Notwithstanding any contract in accordance with paragraph (1) of this subsection, the Department is responsible for the Registry.

(C) (A) (1) TO FACILITATE THE USE OF CLOUD-BASED TECHNOLOGY FOR ELECTRONIC ADVANCE DIRECTIVES, THE DEPARTMENT SHALL CONTRACT WITH AN ELECTRONIC ADVANCE DIRECTIVES SERVICE TO CONNECT WITH HEALTH CARE PROVIDERS AT THE POINT OF CARE THROUGH THE STATE-DESIGNATED HEALTH INFORMATION EXCHANGE.

(2) THE ELECTRONIC ADVANCE DIRECTIVES SERVICE SHALL:

(I) BE APPROVED BY THE MARYLAND HEALTH CARE COMMISSION AND THE DEPARTMENT; AND

(II) MEET THE TECHNOLOGY, SECURITY, AND PRIVACY STANDARDS SET BY THE MARYLAND HEALTH CARE COMMISSION.

[(c)] (D) (B) (1) The Department shall carry out appropriate educational and outreach efforts to increase public awareness of the Registry <u>AN ELECTRONIC ADVANCE</u> <u>DIRECTIVES SERVICE RECOGNIZED BY THE MARYLAND HEALTH CARE COMMISSION</u>.

(2) TO INCREASE PUBLIC AWARENESS OF ELECTRONIC ADVANCE DIRECTIVES, THE DEPARTMENT SHALL ENCOURAGE THE FOLLOWING PERSONS AND ENTITIES TO ENGAGE IN OUTREACH EFFORTS ABOUT ELECTRONIC ADVANCE DIRECTIVES:

- (I) THE MARYLAND DEPARTMENT OF AGING;
- (II) COUNTY OMBUDSPERSONS;
- (III) LOCAL HEALTH DEPARTMENTS;
- (IV) SENIOR LIVING FACILITIES;
- (V) ACADEMIC INSTITUTIONS;
- (VI) RELIGIOUS ORGANIZATIONS; AND
- (VII) ANY SIMILAR PERSON OR ENTITY.

5-623.

(a) (1) An individual may register with the Department an advance directive.

Ch. 510

(2) THE DEPARTMENT SHALL ENCOURAGE THE USE OF ELECTRONIC ADVANCE DIRECTIVES.

(b) (1) The registrant shall notify the Registry if the registrant has amended or revoked a registered advance directive.

(2) A health care provider that becomes aware that a registrant has amended or revoked a registered advance directive shall, at the request of the registrant, provide the registrant with information on how to notify the Registry.

(c) An individual is not required to submit an advance directive to the Registry.

(d) Nothing in this Part II of this subtitle affects the validity of an advance directive that is not submitted to the Registry.

(E) IF AN INDIVIDUAL HAS SUBMITTED AN ELECTRONIC ADVANCE DIRECTIVE TO THE REGISTRY OR ANOTHER ADVANCE DIRECTIVES SERVICE, THE STATE DESIGNATED HEALTH INFORMATION EXCHANCE SHALL MAKE THE ELECTRONIC ADVANCE DIRECTIVE AVAILABLE TO THE INDIVIDUAL'S HEALTH CARE PROVIDER ON REQUEST OF THE INDIVIDUAL.

15-102.9.

(A) THE PROVISIONS OF § 15–122.1 OF THE INSURANCE ARTICLE APPLY TO MANAGED CARE ORGANIZATIONS IN THE SAME MANNER THE PROVISIONS APPLY TO CARRIERS.

(B) EACH MANAGED CARE ORGANIZATION SHALL OFFER ELECTRONIC ADVANCE DIRECTIVES TO ITS ENROLLEES DURING OPEN ENROLLMENT.

(C) A MANAGED CARE ORGANIZATION MAY CONTRACT WITH ANY ELECTRONIC ADVANCE DIRECTIVES SERVICE IF THE SERVICE:

(1) IS APPROVED BY THE MARYLAND HEALTH CARE COMMISSION AND THE DEPARTMENT; AND

(2) MEETS THE TECHNOLOGY, SECURITY, AND PRIVACY STANDARDS SET BY THE MARYLAND HEALTH CARE COMMISSION.

<u>5–623.</u>

(a) An individual may register AN ADVANCE DIRECTIVE with [the Department an advance directive] AN ELECTRONIC ADVANCE DIRECTIVES SERVICE RECOGNIZED BY THE MARYLAND HEALTH CARE COMMISSION. (b) (1) The registrant shall notify the [Registry] ELECTRONIC ADVANCE DIRECTIVES SERVICE RECOGNIZED BY THE MARYLAND HEALTH CARE COMMISSION if the registrant has amended or revoked a registered advance directive.

(2) <u>A health care provider that becomes aware that a registrant has</u> amended or revoked a registered advance directive shall, at the request of the registrant, provide the registrant with information on how to notify the [Registry] ELECTRONIC ADVANCE DIRECTIVES SERVICE RECOGNIZED BY THE MARYLAND HEALTH CARE COMMISSION.

(c) <u>An individual is not required to submit an advance directive to [the Registry]</u> <u>AN ELECTRONIC ADVANCE DIRECTIVES SERVICE RECOGNIZED BY THE MARYLAND</u> <u>HEALTH CARE COMMISSION.</u>

(d) Nothing in this Part II of this subtitle affects the validity of an advance directive that is not submitted to [the Registry] AN ELECTRONIC ADVANCE DIRECTIVES SERVICE RECOGNIZED BY THE MARYLAND HEALTH CARE COMMISSION.

<u>[5-624.</u>

(a) <u>The Registry shall consist of a secure, electronic database to which authorized</u> access is available 24 hours per day, 7 days per week.

(b) The Secretary shall specify in regulations the persons who are authorized to access the Registry, including:

(1) <u>The registrant or the registrant's designee; and</u>

(2) <u>Representatives of a health care facility in which a registrant is receiving</u> <u>health care.</u>

(c) <u>The Secretary shall adopt regulations regarding access to the Registry</u>, <u>including procedures to protect confidential information</u>.

(d) The Department may perform evaluations of the Registry.]

[5-625.] **5-624.**

<u>Before accepting an advance directive into [the Registry] AN ELECTRONIC ADVANCE</u> <u>DIRECTIVES SERVICE RECOGNIZED BY THE MARYLAND HEALTH CARE COMMISSION,</u> <u>the Department shall review and verify that the advance directive includes:</u>

(1) The signature of the declarant;

(2) The date on which the advance directive was signed by the declarant;

and

(3) The signature of two witnesses as provided in § 5-602(c) of this subtitle.

[5-626.] **5-625.**

<u>A health care provider is not subject to criminal prosecution or civil liability or</u> <u>deemed to have engaged in unprofessional conduct as determined by the appropriate</u> <u>licensing authority for:</u>

(1) Failure to access [the Registry] AN ELECTRONIC ADVANCE DIRECTIVES SERVICE RECOGNIZED BY THE MARYLAND HEALTH CARE COMMISSION; or

(2) <u>Relying on information provided by [the Registry] AN ELECTRONIC</u> <u>ADVANCE DIRECTIVES SERVICE RECOGNIZED BY THE MARYLAND HEALTH CARE</u> <u>COMMISSION.</u>

<u>13–1406.</u>

(a) <u>There is a Spinal Cord Injury Research Trust Fund.</u>

(b) The Fund shall consist of money transferred to the Fund under § 6–103.1 of the Insurance Article or received from any other lawful source.

(c) (1) Money in the Fund shall be used to [make]:

(I) MAKE grants for spinal cord injury research that is focused on basic, preclinical, and clinical research for developing new therapies to restore neurological function in individuals with spinal cord injuries; AND

(II) ADMINISTER THE ADVANCE DIRECTIVE **REGISTRY PROGRAM** ESTABLISHED UNDER § 5–620 OF THIS ARTICLE.

(2) For the purpose specified in paragraph (1) of this subsection, a grant may include an award to or for:

- (i) <u>A public or private entity;</u>
- (ii) <u>A university researcher;</u>
- (iii) <u>A research institution;</u>
- (iv) <u>Private industry;</u>

- (v) <u>A clinical trial;</u>
- (vi) A supplement to an existing charitable or private industry grant;
- (vii) A matching fund;
- (viii) <u>A fellowship in spinal cord injury research;</u>
- (ix) <u>A research meeting concerning spinal cord injury research; or</u>

(x) Any other recipient or purpose which the Board determines is consistent with the purpose specified in paragraph (1) of this subsection.

(d) (1) The Fund is a continuing, nonlapsing fund, not subject to § 7–302 of the State Finance and Procurement Article.

(2) (i) <u>The Fund shall be used exclusively to offset the actual</u> <u>documented direct costs of fulfilling the statutory and regulatory duties of the Board under</u> <u>this subtitle.</u>

(ii) <u>The Department shall pay the indirect costs the Board incurs in</u> <u>fulfilling the statutory and regulatory duties of the Board under this subtitle.</u>

(3) Any unspent portions of the Fund may not be transferred or revert to the General Fund of the State, but shall remain in the Fund to be used for the purpose specified in subsection (c) of this section.

(e) <u>The chairman of the Board or the designee of the chairman shall administer</u> the Fund.

(f) The Legislative Auditor shall audit the accounts and transactions of the Fund as provided in § 2–1220 of the State Government Article.

15-109.1.

(a) The Department, in consultation with the Office of the Attorney General, shall:

(1) Develop and implement a plan for making the advance directive information sheet developed under 5-615 of this article widely available; and

(2) Make the information sheet described in item (1) of this subsection available in a conspicuous location in each local health department, in each local department of social services, and in community health centers.

(b) The Department shall implement the plan on or before June 30, 2005 **JANUARY 1, 2017**.

(c) During the development of the plan under subsection (a) of this section and the information sheet under § 5-615 of this article, the Office of the Attorney General shall consult with any interested party including the State Advisory Council on Quality Care at the End of Life.

(D) THE DEPARTMENT SHALL OFFER:

(1) <u>The information sheet developed under § 5–615 of this</u> <u>ARTICLE AS PART OF THE MONTHLY ENROLLMENT PACKET MAILED TO A RECIPIENT</u> <u>BY THE ENROLLMENT BROKER; AND</u>

(2) <u>THE USE OF ELECTRONIC ADVANCE DIRECTIVES TO A RECIPIENT</u> THROUGH AN ADVANCE DIRECTIVES SERVICE THAT:

(I) IS APPROVED BY THE MARYLAND HEALTH CARE COMMISSION AND THE DEPARTMENT; AND

(II) MEETS THE TECHNOLOGY, SECURITY, AND PRIVACY STANDARDS ESTABLISHED BY THE MARYLAND HEALTH CARE COMMISSION.

<u>19–144.</u>

(A) TO FACILITATE THE USE OF WEB-BASED TECHNOLOGY FOR ELECTRONIC ADVANCE DIRECTIVES, THE MARYLAND HEALTH CARE COMMISSION SHALL DEVELOP CRITERIA FOR RECOGNIZING ELECTRONIC ADVANCE DIRECTIVES SERVICES THAT ARE AUTHORIZED TO CONNECT TO THE STATE-DESIGNATED HEALTH INFORMATION EXCHANGE.

(B) TO BE AUTHORIZED TO CONNECT TO THE STATE–DESIGNATED HEALTH INFORMATION EXCHANGE, AN ELECTRONIC ADVANCE DIRECTIVES SERVICE SHALL:

(1) <u>BE RECOGNIZED BY THE MARYLAND HEALTH CARE</u> <u>COMMISSION;</u>

(2) MEET NATIONAL PRIVACY AND SECURITY STANDARDS AND INDUSTRY BEST PRACTICES FOR SECURITY AUDITS IDENTIFIED BY THE MARYLAND HEALTH CARE COMMISSION;

(3) USE REMOTE IDENTITY PROOFING AND MULTIFACTOR AUTHENTICATION SERVICES: (1) (2) ESTABLISHED BE ESTABLISHED IN ACCORDANCE WITH THE NATIONAL INSTITUTE OF STANDARDS AND TECHNOLOGY SPECIAL PUBLICATION 800–63–2: ELECTRONIC AUTHENTICATION GUIDELINE; AND

(II) <u>Approved by the Maryland Health Care</u> <u>Commission;</u>

(4) (3) <u>BE RESPONSIBLE FOR ALL COSTS ASSOCIATED WITH</u> CONNECTING TO THE STATE-DESIGNATED HEALTH INFORMATION EXCHANGE; AND

(5) (4) STORE ELECTRONIC ADVANCE DIRECTIVES THAT ARE RECEIVED BY FACSIMILE OR OTHER ELECTRONIC MEANS.

(C) THE STATE-DESIGNATED HEALTH INFORMATION EXCHANGE MAY CHARGE ELECTRONIC ADVANCE DIRECTIVES SERVICES RECOGNIZED BY THE MARYLAND HEALTH CARE COMMISSION A FEE FOR CONNECTING TO THE STATE-DESIGNATED HEALTH INFORMATION EXCHANGE.

(D) <u>The State-designated health information exchange shall</u> <u>Ensure that electronic advance directives services do not have access</u> <u>to information stored on the State-designated health information</u> <u>exchange.</u>

Article – Insurance

$\frac{15-122.1}{15-122.1}$

(a) (1) In this section the following words have the meanings indicated.

(2) "Advance directive" has the meaning stated in § 5–601 of the Health – General Article.

- (3) (i) "Carrier" means:
 - 1. an insurer;
 - 2. a nonprofit health service plan;
 - 3. a health maintenance organization; and

4. any other person that provides health benefit plans subject to regulation by the State.

(ii) "Carrier" does not include a managed care organization.

2016 LAWS OF MARYLAND

(b) A carrier shall provide the advance directive information sheet developed under § 5–615 of the Health – General Article:

(1) in the carrier's member publications;

(2) if the carrier maintains a Web site on the Internet, on the carrier's Web site; and

(3) at the request of a member.

(C) EACH CARRIER SHALL OFFER ELECTRONIC ADVANCE DIRECTIVES TO ITS MEMBERS OR ENROLLEES DURING OPEN ENROLLMENT.

(D) A CARRIER MAY CONTRACT WITH ANY ELECTRONIC ADVANCE DIRECTIVES SERVICE IF THE SERVICE:

(1) IS APPROVED BY THE MARYLAND HEALTH CARE COMMISSION AND THE DEPARTMENT OF HEALTH AND MENTAL HYGIENE; AND

(2) MEETS THE TECHNOLOGY, SECURITY, AND PRIVACY STANDARDS SET BY THE MARYLAND HEALTH CARE COMMISSION.

6-103.1.

Notwithstanding § 2–114 of this article, beginning January 15, 2006, from the tax imposed on the health insurers under this subtitle, \$500,000 shall be distributed annually to the Spinal Cord Injury Research Trust Fund created under § 13–1406 of the Health – General Article.

31–108.

(G) THE EXCHANGE SHALL PROVIDE THE ADVANCE DIRECTIVE INFORMATION SHEET DEVELOPED UNDER § 5-615 of the Health – General Article:

- (1) IN THE EXCHANGE'S CONSUMER PUBLICATIONS;
- (2) ON THE EXCHANGE'S WEB SITE; AND
- (3) AT THE REQUEST OF AN APPLICANT.

Article - State Personnel and Pensions

2-503.

Ch. 510

(E) THE SECRETARY SHALL OFFER ELECTRONIC ADVANCE DIRECTIVES TO EMPLOYEES DURING OPEN ENROLLMENT FOR HEALTH INSURANCE BENEFITS UNDER THE PROGRAM.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2016.

Approved by the Governor, May 10, 2016.