

HB0184/806583/1

BY: Health and Government Operations Committee

AMENDMENTS TO HOUSE BILL 184

(First Reading File Bill)

AMENDMENT NO. 1

On page 1, in the sponsor line, strike “and K. Young” and substitute “K. Young, Pena-Melnyk, and Platt”; in line 2, after “Disorder -” insert “Identification and Posting”; in the same line, strike “Notice”; in line 3, strike “Guidelines” and substitute “Information”; in line 4, strike “develop” and substitute “identify”; strike beginning with the first “the” in line 5 down through “of” in line 7 and substitute “certain stakeholders, certain information relating to”; strike beginning with “in” in line 7 down through the second “certain” in line 8 and substitute “; requiring the Department to post certain information in a certain form on the Department’s”; strike beginning with “requiring” in line 9 down through “office;” in line 10; in line 10, after “to” insert “the identification and”; in the same line, strike “notice” and substitute “posting”; and in line 11, strike “guidelines” and substitute “information”.

AMENDMENT NO. 2

On page 2, in line 4, strike “**DEVELOP**” and substitute “**IDENTIFY**”; strike beginning with “**THE**” in line 4 down through “**PEDIATRICS**” in line 5 and substitute “**STAKEHOLDERS WHO WISH TO PARTICIPATE**”; strike beginning with “**A**” in line 5 down through “**OF**” in line 7 and substitute “**UP-TO-DATE, EVIDENCE-BASED, WRITTEN INFORMATION RELATING TO**”; in line 8, strike “**IN CHILDREN AND ADOLESCENTS**” and substitute “**THAT:**”

(I) HAS BEEN REVIEWED BY MEDICAL EXPERTS, MENTAL HEALTH CARE PRACTITIONERS, AND NATIONAL AND LOCAL ORGANIZATIONS SPECIALIZING IN THE PROVISION OF SERVICES FOR THE TREATMENT OF ATTENTION-DEFICIT/HYPERACTIVITY DISORDER;

(Over)

(II) IS DESIGNED FOR USE BY HEALTH CARE PRACTITIONERS AND THE FAMILIES OF CHILDREN AND ADOLESCENTS WHO ARE DIAGNOSED WITH ATTENTION-DEFICIT/HYPERACTIVITY DISORDER;

(III) IS CULTURALLY AND LINGUISTICALLY APPROPRIATE FOR POTENTIAL RECIPIENTS OF THE INFORMATION; AND

(IV) INCLUDES:

1. TREATMENT OPTIONS FOR ATTENTION-DEFICIT/HYPERACTIVITY DISORDER, INCLUDING MEDICATION USAGE, BEHAVIORAL HEALTH SERVICES, AND NONPHARMACOLOGICAL INTERVENTION STRATEGIES; AND

2. CONTACT INFORMATION FOR NATIONAL AND LOCAL EDUCATION PROGRAMS AND SUPPORT SERVICES”;

in line 10, strike “NOTICE” and substitute “INFORMATION IDENTIFIED BY THE DEPARTMENT UNDER ITEM (1) OF THIS SUBSECTION”; in line 11, after “SITE” insert “THAT MAY BE ACCESSED BY HEALTH CARE PRACTITIONERS ENGAGED IN TREATING CHILDREN AND ADOLESCENTS FOR ATTENTION-DEFICIT/HYPERACTIVITY DISORDER”; and strike in their entirety lines 12 through 16, inclusive.