

HB0922/966382/1

BY: Health and Government Operations Committee

AMENDMENTS TO HOUSE BILL 922

(First Reading File Bill)

AMENDMENT NO. 1

On page 1, in the sponsor line, strike “and K. Young” and substitute “K. Young, Morhaim, Pendergrass, Angel, Cullison, Hayes, Hill, Pena–Melnik, Rosenberg, Saab, and Sample–Hughes”; in line 2, after “Line” insert “and Overdose Report”; in line 4, strike “establish” and substitute “identify a method for establishing”; strike beginning with “requiring” in line 6 down through “manner;” in line 8; in line 9, strike “investigated by” and substitute “forwarded to”; strike beginning with “requiring” in line 10 down through “date” in line 11 and substitute “requiring, on or before a certain date each year, the Secretary of Health to examine the prescription and treatment history of certain individuals who suffered fatal overdoses involving opiates and other controlled dangerous substances; requiring the Secretary to collaborate with certain entities when conducting the examination; requiring the Secretary to provide a certain report to the Governor and the General Assembly on or before a certain date each year; requiring a certain assessment to include accessing certain data sets; requiring, on or before a certain date, certain entities to share data with the Department and enter into a certain agreement with the Department; providing that certain records and information are not public records and are not subject to discovery, subpoena, or other means of legal compulsion in civil or criminal litigation; requiring the Department to seek certain funding for a certain purpose; requiring the Department to examine the feasibility to establishing a certain program, develop a certain model, and determine a certain cost; requiring, on or before a certain date, the Department to report to certain committees of the General Assembly on certain findings; providing for the termination of this Act”; strike beginning with “a” in line 11 down through “line” in line 12 and substitute “the inappropriate prescribing of medication and the assessment and reporting of overdose data”; and after line 17, insert:

“BY adding to

(Over)

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Article – Health – General

Section 7.5–701 to be under the new subtitle “Subtitle 7.5 Overdose Report”
Annotated Code of Maryland
(2015 Replacement Volume and 2017 Supplement)”.

AMENDMENT NO. 2

On page 2, in line 1, strike “(1)”; in line 2, strike “ESTABLISH A” and substitute “IDENTIFY A METHOD FOR ESTABLISHING A”; strike in their entirety lines 6 through 9, inclusive; in line 11, strike “INVESTIGATED BY” and substitute “FORWARDED TO”.

AMENDMENT NO. 3

On page 2, after line 12, insert:

“Article – Health – General

SUBTITLE 7.5. OVERDOSE REPORT.

7.5–701.

(A) ON OR BEFORE JULY 1 EACH YEAR, THE SECRETARY SHALL EXAMINE THE PRESCRIPTION AND TREATMENT HISTORY, INCLUDING COURT-ORDERED TREATMENT OR TREATMENT PROVIDED THROUGH THE CRIMINAL JUSTICE SYSTEM, OF INDIVIDUALS IN THE STATE WHO SUFFERED FATAL OVERDOSES INVOLVING OPIATES AND OTHER CONTROLLED DANGEROUS SUBSTANCES IN THE IMMEDIATELY PRECEDING 4 CALENDAR YEARS.

(B) IN CONDUCTING THE EXAMINATION REQUIRED UNDER SUBSECTION (A) OF THIS SECTION, THE SECRETARY SHALL COLLABORATE WITH THE DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONAL SERVICES, THE DEPARTMENT OF HUMAN SERVICES, THE DEPARTMENT OF JUVENILE

SERVICES, THE MARYLAND INSTITUTE FOR EMERGENCY MEDICAL SERVICES SYSTEMS, THE DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT, AND ANY OTHER STATE AND LOCAL AGENCY THAT THE SECRETARY CONSIDERS NECESSARY.

(c) (1) BEGINNING JULY 1, 2019, AND EACH YEAR THEREAFTER, THE SECRETARY SHALL PROVIDE A REPORT ON THE FINDINGS OF THE EXAMINATION REQUIRED UNDER SUBSECTION (A) OF THIS SECTION TO THE GOVERNOR AND, IN ACCORDANCE WITH § 2-1246 OF THE STATE GOVERNMENT ARTICLE, THE GENERAL ASSEMBLY.

(2) THE REPORT REQUIRED UNDER PARAGRAPH (1) OF THIS SUBSECTION SHALL:

(i) INCLUDE AN ASSESSMENT OF THE FACTORS ASSOCIATED WITH FATAL AND NONFATAL OPIOID OVERDOSE RISK AND AN ASSESSMENT OF THE PROGRAMS TARGETED AT OPIOID USE AND MISUSE, INCLUDING:

1. UTILIZATION OF MENTAL HEALTH AND SUBSTANCE USE DISORDER TREATMENT AND RECOVERY SUPPORT SERVICES, INCLUDING CLAIMS DATA FROM THE MARYLAND MEDICAL ASSISTANCE PROGRAM;

2. UTILIZATION OF HOSPITAL SERVICES;

3. UTILIZATION OF EMERGENCY MEDICAL SERVICES;

4. UTILIZATION OF CONTROLLED PRESCRIPTION DRUGS AND ANTIDOTES;

(Over)

5. INVOLVEMENT WITH THE STATE AND LOCAL CRIMINAL JUSTICE SYSTEM, INCLUDING ARREST, INCARCERATION, AND COMMUNITY SUPERVISION;

6. INVOLVEMENT WITH SOCIAL SERVICES AGENCIES;

7. SOCIOECONOMIC STATUS, RACE, AGE, ETHNICITY, LOCATION OF OVERDOSE, MARITAL STATUS, AND EMPLOYMENT STATUS;

8. EDUCATION STATUS; AND

9. ACCESS TO PUBLIC OR PRIVATE HEALTH INSURANCE COVERAGE;

(II) IDENTIFY AND ASSESS METHODS OF INTERVENING WITH POPULATIONS FOUND TO BE AT RISK OF OVERDOSE OR A SUBSTANCE USE DISORDER; AND

(III) INCLUDE RECOMMENDATIONS FOR IMPROVING AND PROVIDING STATEWIDE PREVENTION, RESPONSE, AND DATA COLLECTION EFFORTS RELATED TO SUBSTANCE USE DISORDER.

(3) THE ASSESSMENT REQUIRED UNDER PARAGRAPH (2) OF THIS SUBSECTION SHALL INCLUDE ACCESSING, AND WHERE FEASIBLE LINKS TO, THE FOLLOWING DATA SETS:

(I) OVERDOSE DEATHS AND OTHER FATAL DRUG POISONINGS;

(II) SUBSTANCE USE TREATMENT;

(III) PRESCRIPTION DRUG MONITORING PROGRAM;

(IV) EMERGENCY MEDICAL SERVICES DATABASE;

(V) SELECT BIRTH INFORMATION FOR CHILDREN EXPOSED TO OPIOIDS DURING GESTATION;

(VI) CANCER REGISTRY;

(VII) CAUSE AND MANNER OF DEATH AND TOXICOLOGY;

(VIII) HOSPITAL CASE MIX, EMERGENCY DEPARTMENT AND INPATIENT RECORDS ASSOCIATED WITH SUBSTANCE USE DISORDER AND NONFATAL CONTROLLED DANGEROUS SUBSTANCE-RELATED POISONINGS;

(IX) ALL PAYER CLAIMS DATABASE;

(X) CORRECTIONS MENTAL HEALTH AND SUBSTANCE USE DISORDER DATA AND INCARCERATIONS IN CORRECTIONAL FACILITIES INCLUDING COUNTY DETENTION CENTERS;

(XI) NEEDLE EXCHANGE PROGRAM;

(XII) DRUG SEIZURES;

(XIII) INDEX OF CONCENTRATION AT THE EXTREMES;

(Over)

(XIV) MARYLAND VIOLENT DEATH RECORDS SYSTEM;

(XV) ELECTRONIC SURVEILLANCE SYSTEM FOR THE EARLY NOTIFICATION OF COMMUNITY-BASED EPIDEMICS;

(XVI) VITAL STATISTICS;

(XVII) STATE AND LOCAL FATALITY REVIEW RECORDS; AND

(XVIII) MARYLAND MEDICAL ASSISTANCE PROGRAM PHARMACY CLAIMS.

(4) ON OR BEFORE SEPTEMBER 1, 2018, EACH ENTITY IDENTIFIED UNDER SUBSECTION (B) OF THIS SECTION SHALL PROVIDE DATA TO THE DEPARTMENT IN ACCORDANCE WITH THIS SECTION AND ENTER INTO A DATA SHARING USE AGREEMENT WITH THE DEPARTMENT.

(D) ANY RECORDS AND INFORMATION PROVIDED TO THE DEPARTMENT IN ACCORDANCE WITH THIS SECTION THAT COULD IDENTIFY ANY INDIVIDUAL ARE NOT PUBLIC RECORDS AND ARE NOT SUBJECT TO DISCOVERY, SUBPOENA, OR OTHER MEANS OF LEGAL COMPULSION IN CIVIL OR CRIMINAL LITIGATION.

(E) THE DEPARTMENT SHALL SEEK ANY AVAILABLE FEDERAL FUNDING TO IMPLEMENT THE REQUIREMENTS OF THIS SECTION.”.

AMENDMENT NO. 4

On page 2, strike in their entirety lines 13 through 23, inclusive, and substitute:

“SECTION 2. AND BE IT FURTHER ENACTED, That, the Maryland Department of Health shall:

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(1) examine the feasibility of establishing a Hub and Spoke model program in the State;

(2) develop a proposed model for the State and determine the cost of the model; and

(3) on or before January 1, 2019, report to the Senate Finance Committee, the House Health and Government Operations Committee, and the Joint Committee on Behavioral Health and Opioid Use Disorders, in accordance with § 2–1246 of the State Government Article, on the findings of the examination.”;

in line 24, strike “July” and substitute “June”; in line 25, after the period insert “It shall remain effective for a period of 4 years and 2 months and, at the end of July 31, 2022, this Act, with no further action required by the General Assembly, shall be abrogated and of no further force and effect.”.