HOUSE BILL 28

J1, J2 1lr0452 (PRE–FILED) CF SB 5

By: Delegates Pena-Melnyk and R. Lewis

Requested: July 8, 2020

Introduced and read first time: January 13, 2021 Assigned to: Health and Government Operations

Committee Report: Favorable with amendments

House action: Adopted

Read second time: March 3, 2021

CHAPTER _____

1 AN ACT concerning

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

Public Health – Implicit Bias Training and the Office of Minority Health and Health Disparities

FOR the purpose of altering the information required to be included in a certain report card to include certain disparities in morbidity and mortality rates for dementia; requiring the Office of Minority Health and Health Disparities to publish, to a certain extent, certain data on its website and to update certain data at a certain frequency; requiring the Governor, beginning in a certain fiscal year, to include a certain appropriation in the annual budget bill for the Office; altering a provision of law related to the intent of the General Assembly regarding the funding of the Office; requiring the Office to report certain information to certain committees of the General Assembly on or before a certain date each year; altering the purpose of the Cultural and Linguistic Health Care Professional Competency Program; requiring the Program, in coordination with the Office, to identify and approve certain implicit bias training programs; authorizing the Office to approve only implicit bias training programs that are recognized by a certain board or accredited by a certain council; requiring the Program to provide a certain list on request; requiring an applicant for the renewal of a license or certificate issued by a certain health occupations board to attest in a certain application that the applicant completed a certain implicit bias training program under certain circumstances; making technical changes; and generally relating to implicit bias training and the Office of Minority Health and Health Disparities.

23 BY repealing and reenacting, with amendments,

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

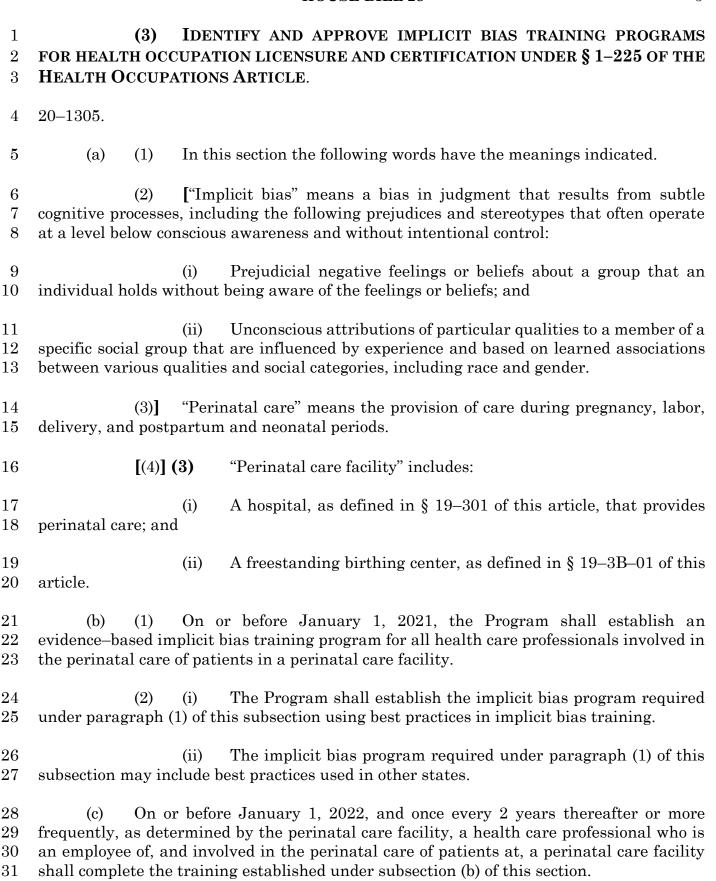
<u>Underlining</u> indicates amendments to bill.

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

1 2 3 4	Article – Health – General Section 20–1004(21) and (22), 20–1007, 20–1301, 20–1302, and 20–1305 Annotated Code of Maryland (2019 Replacement Volume and 2020 Supplement)
5 6 7 8 9	BY adding to Article – Health – General Section 20–1004(23) and 20–1306 Annotated Code of Maryland (2019 Replacement Volume and 2020 Supplement)
10 11 12 13 14	BY adding to Article – Health Occupations Section 1–225 Annotated Code of Maryland (2014 Replacement Volume and 2020 Supplement)
15 16	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:
17	Article – Health – General
18	20–1004.
19	The Office shall:
20 21	(21) Work collaboratively with the Governor's Office of Small, Minority, and Women Business Affairs as the Office determines necessary; [and]
22 23 24	(22) In collaboration with the Maryland Health Care Commission, publish annually on the Department's website and provide in writing on request a "Health Care Disparities Policy Report Card" that includes:
25 26	(i) An analysis of racial and ethnic variations in insurance coverage for low–income, nonelderly individuals;
27 28	(ii) The racial and ethnic composition of the physician population compared to the racial and ethnic composition of the State's population; and
29 30 31	(iii) The racial and ethnic disparities in morbidity and mortality rates for cardiovascular disease, cancer, diabetes, HIV/AIDS, infant mortality, asthma, <u>DEMENTIA</u>, and other diseases identified by the Maryland Health Care Commission; AND
32 33	(23) TO THE EXTENT AUTHORIZED UNDER FEDERAL AND STATE PRIVACY LAWS, PUBLISH ON ITS WEBSITE HEALTH DATA THAT INCLUDES RACE AND

- 1 ETHNICITY INFORMATION COLLECTED BY THE OFFICE AND UPDATE THE DATA AT
- 2 LEAST ONCE EVERY 6 MONTHS.
- 3 20–1007.
- 4 (A) FOR FISCAL YEAR 2023 AND EACH FISCAL YEAR THEREAFTER, THE
- 5 GOVERNOR SHALL INCLUDE IN THE ANNUAL BUDGET BILL AN APPROPRIATION FOR
- 6 THE OFFICE IN AN AMOUNT THAT IS AT LEAST \$1,788,314 OR $\frac{1.2\%}{1.2\%}$.012% OF THE
- 7 TOTAL FUNDS APPROPRIATED TO THE DEPARTMENT IN THAT FISCAL YEAR,
- 8 WHICHEVER IS GREATER.
- 9 (B) It is the intent of the General Assembly that the Office [be funded]
- 10 SUPPLEMENT THE FUNDING FOR THE OFFICE PROVIDED UNDER SUBSECTION (A) OF
- 11 THIS SECTION WITH FUNDING from federal and special funding sources.
- 12 (C) ON OR BEFORE OCTOBER 1 EACH YEAR, THE OFFICE SHALL REPORT TO
- 13 THE HOUSE HEALTH AND GOVERNMENT OPERATIONS COMMITTEE AND THE
- 14 SENATE FINANCE COMMITTEE, IN ACCORDANCE WITH § 2–1257 OF THE STATE
- 15 GOVERNMENT ARTICLE, THE FOLLOWING INFORMATION FROM THE IMMEDIATELY
- 16 PRECEDING FISCAL YEAR:
- 17 (1) THE OFFICE'S EFFORTS TO OBTAIN FUNDING DESCRIBED UNDER
- 18 SUBSECTION (B) OF THIS SECTION; AND
- 19 (2) THE AMOUNT OF FUNDING FROM FEDERAL AND SPECIAL
- 20 FUNDING SOURCES THE OFFICE RECEIVED.
- 21 20-1301.
- 22 (a) In this subtitle the following words have the meanings indicated.
- 23 (b) "Cultural and linguistic competency" means cultural and linguistic abilities
- 24 that can be incorporated into the rapeutic and medical evaluation and treatment, including:
- 25 (1) Direct communication in the patient's primary language;
- 26 (2) Understanding and applying the roles that culture, ethnicity, and race
- 27 play in diagnosis, treatment, and clinical care; and
- 28 (3) Awareness of how the attitudes, values, and beliefs of health care
- 29 providers and patients influence and impact professional and patient relations.
- 30 (c) "Health care professional" includes a physician, nurse, dentist, social worker,
- 31 psychologist, pharmacist, health educator, or other allied health professional.

- 1 (D) "IMPLICIT BIAS" MEANS A BIAS IN JUDGMENT THAT RESULTS FROM
 2 SUBTLE COGNITIVE PROCESSES, INCLUDING THE FOLLOWING PREJUDICES AND
 3 STEREOTYPES THAT OFTEN OPERATE AT A LEVEL BELOW CONSCIOUS AWARENESS
 4 AND WITHOUT INTENTIONAL CONTROL:
- 5 (1) PREJUDICIAL NEGATIVE FEELINGS OR BELIEFS ABOUT A GROUP 6 THAT AN INDIVIDUAL HOLDS WITHOUT BEING AWARE OF THE FEELINGS OR BELIEFS; 7 AND
- 8 (2) UNCONSCIOUS ATTRIBUTIONS OF PARTICULAR QUALITIES TO A
 9 MEMBER OF A SPECIFIC SOCIAL GROUP THAT ARE INFLUENCED BY EXPERIENCE AND
 10 BASED ON LEARNED ASSOCIATIONS BETWEEN VARIOUS QUALITIES AND SOCIAL
 11 CATEGORIES, INCLUDING RACE AND GENDER.
- 12 **[**(d)**] (E)** "Program" means the Cultural and Linguistic Health Care Professional Competency Program.
- 14 20–1302.
- 15 (a) There is a Cultural and Linguistic Health Care Professional Competency 16 Program.
- 17 (b) The purpose of the Program is to:
- 18 (1) Provide for a voluntary program in which educational classes are 19 offered to health care professionals to teach health care professionals:
- 20 (i) Methods to improve the health care professionals' cultural and linguistic competency to communicate with non–English speaking patients and patients from other cultures who are English speaking;
- (ii) Cultural beliefs and practices that may impact patient health care practices and allow health care professionals to incorporate the knowledge of the beliefs and practices in the diagnosis and treatment of patients; and
- 26 (iii) Methods to enable health care professionals to increase the 27 health literacy of their patients to improve the patient's ability to obtain, process, and 28 understand basic health information and services to make appropriate health care 29 decisions; and
- 30 (2) Establish and provide an evidence—based implicit bias training 31 program for health care professionals involved in the perinatal care of patients under § 32 20–1305 of this subtitle; AND



- 1 (d) The Program shall offer the training established under subsection (b) of this 2 section to any health care professional involved in perinatal care of patients at a perinatal care facility who is not required to complete the training under subsection (c) of this section 4 because the health care professional is not an employee of a perinatal care facility.
- 5 **20–1306.**
- 6 (A) (1) THE PROGRAM SHALL, IN COORDINATION WITH THE OFFICE OF
 7 MINORITY HEALTH AND HEALTH DISPARITIES, IDENTIFY AND APPROVE IMPLICIT
 8 BIAS TRAINING PROGRAMS THAT AN INDIVIDUAL MAY COMPLETE TO SATISFY THE
 9 REQUIREMENTS OF § 1–225 OF THE HEALTH OCCUPATIONS ARTICLE.
- 10 (2) THE PROGRAM MAY APPROVE ONLY IMPLICIT BIAS TRAINING
 11 PROGRAMS UNDER PARAGRAPH (1) OF THIS SUBSECTION THAT ARE RECOGNIZED BY
 12 A HEALTH OCCUPATIONS BOARD ESTABLISHED UNDER THE HEALTH OCCUPATIONS
 13 ARTICLE OR ACCREDITED BY THE ACCREDITATION COUNCIL FOR CONTINUING
 14 MEDICAL EDUCATION.
- 15 **(B)** THE PROGRAM SHALL PROVIDE A LIST OF TRAINING PROGRAMS 16 APPROVED UNDER SUBSECTION (A) OF THIS SECTION ON REQUEST.

Article - Health Occupations

18 **1–225.**

17

- 19 (A) AN APPLICANT FOR THE RENEWAL OF A LICENSE OR CERTIFICATE
 20 ISSUED BY A HEALTH OCCUPATIONS BOARD UNDER THIS ARTICLE SHALL ATTEST IN
 21 THE APPLICATION THAT THE APPLICANT HAS COMPLETED AN IMPLICIT BIAS
 22 TRAINING PROGRAM APPROVED BY THE CULTURAL AND LINGUISTIC HEALTH CARE
 23 PROFESSIONAL COMPETENCY PROGRAM UNDER § 20–1306 OF THE HEALTH –
 24 GENERAL ARTICLE ## THE APPLICATION FOR RENEWAL IS THE FIRST APPLICATION
 25 FOR RENEWAL SUBMITTED BY THE APPLICANT AFTER OCTOBER 1, 2021.
- 26 (B) THE REQUIREMENTS OF SUBSECTION (A) OF THIS SECTION SHALL
 27 APPLY ONLY TO AN APPLICANT'S FIRST LICENSE OR CERTIFICATE RENEWAL CYCLE
 28 AFTER APRIL 1, 2022.
- SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect 30 October 1, 2021.