

# HOUSE BILL 836

J1, J3, F2

EMERGENCY BILL

11r1809  
CF 11r1786

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By: **Delegate Pena–Melnyk**

Introduced and read first time: January 29, 2021

Assigned to: Health and Government Operations and Appropriations

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## A BILL ENTITLED

1 AN ACT concerning

2 **COVID–19 Testing, Contact Tracing, and Vaccination Act of 2021**

3 FOR the purpose of requiring, on or before a certain date, the Maryland Department of  
4 Health, in collaboration with local health departments in the State, to adopt and  
5 implement a certain plan to respond to the outbreak of COVID–19; establishing  
6 certain requirements for the plan; requiring the Department, in collaboration with  
7 local health departments and other persons, to include in the plan the establishment  
8 of a Maryland Public Health Jobs Corps; establishing certain requirements for the  
9 Corps; requiring the Department to submit the plan to the General Assembly on or  
10 before a certain date; requiring the Department to provide in certain fiscal years  
11 certain funding in grants to local jurisdictions for certain purposes; authorizing a  
12 local jurisdiction to use certain grant funding for a certain purpose; establishing  
13 certain formulas for the allocation of certain funding to local jurisdictions; requiring  
14 the Department to first use certain federal funding to provide certain funding to local  
15 jurisdictions; requiring the Department to use general funds to provide certain  
16 funding to local jurisdictions under certain circumstances; requiring the  
17 Department, on or before a certain date and with input from certain persons, to  
18 develop and submit to the General Assembly a certain plan for vaccinating residents  
19 of the State against COVID–19; requiring that the plan include certain information;  
20 requiring the Department to provide to the General Assembly, for the duration of a  
21 certain calendar year, certain weekly progress reports on implementation of the  
22 plan; requiring the reports to be submitted to the General Assembly in a certain  
23 manner; requiring the Department to convene a Maryland Public Health  
24 Infrastructure Modernization Workgroup; providing for the composition of the  
25 Workgroup; requiring the Workgroup to conduct a certain assessment and make  
26 certain recommendations; requiring the Workgroup to submit a certain report to the  
27 General Assembly on or before a certain date; requiring, for a certain calendar year,  
28 institutions of higher education in the State to adopt and implement a certain  
29 COVID–19 testing plan; requiring that the COVID–19 testing plan adopted and  
30 implemented by institutions of higher education include a certain requirement;  
31 requiring home health agencies, nursing homes, and assisted living programs to

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EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 adopt and implement COVID–19 testing plans; establishing certain requirements  
2 for the COVID–19 testing plans; requiring the Department to adopt certain  
3 regulations; requiring the Department, to the extent practicable, to provide certain  
4 grant funding to home health agencies and assisted living facilities in certain years  
5 to cover the cost of certain COVID–19 testing; requiring certain insurers, nonprofit  
6 health service plans, and health maintenance organizations to provide coverage for  
7 certain COVID–19 tests and associated costs for the administration of the tests;  
8 prohibiting certain insurers, nonprofit health service plans, and health maintenance  
9 organizations from requiring a member to obtain a certain determination as a  
10 condition for the coverage; prohibiting certain insurers, nonprofit health service  
11 plans, and health maintenance organizations from applying a copayment,  
12 coinsurance requirement, or deductible to the coverage; stating the intent of the  
13 General Assembly; defining certain terms; providing for the application of certain  
14 provisions of this Act; making this Act an emergency measure; providing for the  
15 termination of certain provisions of this Act; and generally relating to public health  
16 and testing, contact tracing, and vaccination for COVID–19.

17 BY adding to

18 Article – Health – General

19 Section 16–201.5; 18–9A–01 through 18–9A–04 to be under the new subtitle

20 “Subtitle 9A. COVID–19 Testing, Contact Tracing, and Vaccination Act”;

21 19–411; 19–14C–01 and 19–14C–02 to be under the new subtitle “Subtitle

22 14C. COVID–19 Testing Plan”; and 19–1814

23 Annotated Code of Maryland

24 (2019 Replacement Volume and 2020 Supplement)

25 BY adding to

26 Article – Education

27 Section 11–1701 and 11–1702 to be under the new subtitle “Subtitle 17. COVID–19

28 Testing Plan”

29 Annotated Code of Maryland

30 (2018 Replacement Volume and 2020 Supplement)

31 BY adding to

32 Article – Insurance

33 Section 15–856

34 Annotated Code of Maryland

35 (2017 Replacement Volume and 2020 Supplement)

36 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,

37 That the Laws of Maryland read as follows:

38 **Article – Health – General**

39 **SUBTITLE 9A. COVID–19 TESTING, CONTACT TRACING, AND VACCINATION ACT.**

40 **18–9A–01.**

1 (A) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS  
2 INDICATED.

3 (B) "COVID-19" MEANS, INTERCHANGEABLY AND COLLECTIVELY, THE  
4 CORONAVIRUS KNOWN AS COVID-19 OR 2019-nCoV AND THE SARS-CoV-2  
5 VIRUS.

6 (C) "COVID-19 TEST" MEANS A FEDERAL FOOD AND DRUG  
7 ADMINISTRATION-APPROVED MOLECULAR POLYMERASE CHAIN REACTION (PCR)  
8 TEST OR AN ANTIGEN TEST FOR THE DETECTION OR DIAGNOSIS OF COVID-19.

9 18-9A-02.

10 (A) ON OR BEFORE APRIL 1, 2021, THE DEPARTMENT, IN COLLABORATION  
11 WITH LOCAL HEALTH DEPARTMENTS IN THE STATE, SHALL ADOPT AND IMPLEMENT  
12 A 2-YEAR PLAN TO RESPOND TO THE OUTBREAK OF COVID-19.

13 (B) THE PLAN REQUIRED UNDER THIS SECTION SHALL:

14 (1) INCLUDE MEASURES TO ENHANCE PUBLIC HEALTH EFFORTS AT  
15 THE STATE AND LOCAL LEVEL TO MONITOR, PREVENT, AND MITIGATE THE SPREAD  
16 OF COVID-19;

17 (2) (I) ASSESS THE COVID-19 PUBLIC AND PRIVATE TESTING  
18 INFRASTRUCTURE IN PLACE BOTH STATEWIDE AND IN EACH LOCAL JURISDICTION;

19 (II) IDENTIFY AND ADDRESS THE UNMET NEEDS FOR  
20 COVID-19 TESTING STATEWIDE AND IN EACH LOCAL JURISDICTION, INCLUDING  
21 THE NUMBER AND LOCATION OF PUBLIC AND PRIVATE TESTING PROVIDERS  
22 REQUIRED TO ENSURE ACCESS TO TESTING ON DEMAND FOR ALL RESIDENTS OF THE  
23 STATE;

24 (III) ESTABLISH SPECIFIC MONTHLY GOALS FOR COVID-19  
25 TESTING STATEWIDE AND IN EACH LOCAL JURISDICTION TO ENSURE ACCESS TO  
26 TESTING FOR ALL RESIDENTS OF THE STATE, INCLUDING:

27 1. A GOAL TO ACHIEVE THE CAPACITY TO PERFORM UP  
28 TO 100,000 COVID-19 TESTS PER DAY IN THE STATE IN CALENDAR YEARS 2021 AND  
29 2022 THROUGH A NETWORK OF PUBLIC AND PRIVATE TESTING PROVIDERS; AND

30 2. FOR EACH LOCAL JURISDICTION, A GOAL TO  
31 ESTABLISH IN CALENDAR YEARS 2021 AND 2022 AT LEAST SIX PUBLIC OR PRIVATE

1 **COVID-19 TESTING LOCATIONS PER 100,000 RESIDENTS; AND**

2 **(IV) INCLUDE A REQUIREMENT THAT STATE AND LOCAL**  
3 **JURISDICTION GOVERNMENTAL PROVIDERS OF COVID-19 TESTING BILL HEALTH**  
4 **INSURANCE CARRIERS TO COVER THE COST OF TESTING WHEN:**

5 **1. COVERAGE FOR COVID-19 TESTING IS PROVIDED**  
6 **UNDER A HEALTH BENEFIT PLAN OF AN INDIVIDUAL TESTED; AND**

7 **2. BILLING MAY BE CARRIED OUT IN A MANNER THAT**  
8 **WILL NOT CREATE A BARRIER TO ACCESSING TESTING FOR INDIVIDUALS WHO:**

9 **A. ARE UNINSURED; OR**

10 **B. MAY BE RELUCTANT TO RECEIVE A TEST IF THE**  
11 **INDIVIDUAL IS ASKED TO PROVIDE INFORMATION RELATING TO INSURANCE**  
12 **COVERAGE;**

13 **(3) (I) ASSESS THE CONTACT TRACING INFRASTRUCTURE IN**  
14 **PLACE FOR COVID-19 BOTH STATEWIDE AND IN EACH LOCAL JURISDICTION;**

15 **(II) DETERMINE THE OPTIMAL NUMBER OF CONTACT TRACING,**  
16 **CASE MANAGEMENT, CARE RESOURCE COORDINATION, AND OTHER PERSONNEL PER**  
17 **100,000 RESIDENTS NEEDED IN EACH JURISDICTION TO EFFECTIVELY MONITOR,**  
18 **PREVENT, AND MITIGATE THE SPREAD OF COVID-19;**

19 **(III) IDENTIFY AND ADDRESS THE UNMET NEEDS FOR**  
20 **COVID-19 CONTACT TRACING AND RELATED OUTBREAK PREVENTION AND**  
21 **MITIGATION EFFORTS BOTH STATEWIDE AND IN EACH LOCAL JURISDICTION; AND**

22 **(IV) 1. ESTABLISH GOALS FOR IDENTIFYING, LOCATING, AND**  
23 **TESTING INDIVIDUALS WHO HAVE BEEN IN CLOSE CONTACT WITH INDIVIDUALS WHO**  
24 **TEST POSITIVE FOR COVID-19 THAT ARE IN ALIGNMENT WITH CENTERS FOR**  
25 **DISEASE CONTROL AND PREVENTION GUIDANCE FOR EFFECTIVE CONTACT**  
26 **TRACING PROGRAMS; AND**

27 **2. INCLUDE A MECHANISM FOR MONITORING**  
28 **PERFORMANCE OF CONTACT TRACING AND TESTING OF CONTACTS BOTH**  
29 **STATEWIDE AND FOR EACH LOCAL JURISDICTION;**

30 **(4) REQUIRE THE DEPARTMENT TO ASSIST LOCAL JURISDICTIONS**  
31 **THAT ADOPT STRATEGIES TO:**

1 (I) ACCELERATE ACCESS TO AND THE USE OF AT-HOME  
2 COLLECTION AND POINT-OF-CARE TESTS FOR COVID-19; AND

3 (II) INCENTIVIZE AND ENCOURAGE PHARMACIES AND HEALTH  
4 CARE PROVIDERS, INCLUDING PRIMARY CARE PROVIDERS, TO PROVIDE COVID-19  
5 TESTING; AND

6 (5) ALLOW EACH LOCAL JURISDICTION TO ESTABLISH AND  
7 IMPLEMENT A PROGRAM FOR COVID-19 CONTACT TRACING THAT IS INDEPENDENT  
8 FROM THE CONTACT TRACING PROGRAM PERFORMED BY THE STATE OR THE ENTITY  
9 WITH WHOM THE STATE HAS CONTRACTED TO PERFORM CONTACT TRACING FOR  
10 THE STATE.

11 (C) (1) THE DEPARTMENT, IN COLLABORATION WITH LOCAL HEALTH  
12 DEPARTMENTS, HEALTH CARE PROVIDERS, REPRESENTATIVES OF AREA HEALTH  
13 EDUCATION CENTERS, AND OTHER RELEVANT STAKEHOLDERS, SHALL INCLUDE IN  
14 THE PLAN REQUIRED UNDER THIS SECTION THE ESTABLISHMENT OF A MARYLAND  
15 PUBLIC HEALTH JOBS CORPS.

16 (2) THE MARYLAND PUBLIC HEALTH JOBS CORPS SHALL BE  
17 COMPOSED OF COMMUNITY HEALTH WORKERS AND OTHER HEALTH CARE  
18 PERSONNEL RECRUITED, TRAINED, AND DEPLOYED FOR EMPLOYMENT BY LOCAL  
19 HEALTH DEPARTMENTS, NONPROFIT ORGANIZATIONS, AND OTHER ENTITIES TO  
20 RESPOND TO THE OUTBREAK OF COVID-19 BY PROVIDING OR FACILITATING:

21 (I) TESTING;

22 (II) CONTACT TRACING;

23 (III) VACCINE ADMINISTRATION, INCLUDING VACCINE  
24 OUTREACH AND NAVIGATION SUPPORTS; AND

25 (IV) OTHER CASE MANAGEMENT AND RESOURCE SUPPORT  
26 SERVICES FOR INDIVIDUALS WHO HAVE BEEN EXPOSED TO OR TEST POSITIVE FOR  
27 COVID-19.

28 (3) THE MARYLAND PUBLIC HEALTH JOBS CORPS SHALL HAVE A  
29 DESIGN THAT:

30 (I) PRIORITIZES THE RECRUITMENT, TRAINING, AND  
31 DEPLOYMENT OF INDIVIDUALS FOR THE WORKFORCE WHO HAVE BEEN DISPLACED  
32 FROM OTHER WORKFORCE SECTORS THAT HAVE BEEN IMPACTED NEGATIVELY AS A  
33 RESULT OF THE OUTBREAK OF COVID-19; AND

1 (II) INCLUDES A PATHWAY DESIGNED TO ENABLE MEMBERS OF  
2 THE PUBLIC HEALTH RESPONSE WORKFORCE TO TRANSITION TO POSITIONS WITH A  
3 RESPONSIBILITY TO MEET ONGOING POSTPANDEMIC POPULATION HEALTH NEEDS  
4 OF UNDERSERVED COMMUNITIES AND VULNERABLE POPULATIONS.

5 (D) ON OR BEFORE APRIL 1, 2021, THE DEPARTMENT SHALL SUBMIT THE  
6 PLAN REQUIRED UNDER THIS SECTION TO THE GENERAL ASSEMBLY, IN  
7 ACCORDANCE WITH § 2-1257 OF THE STATE GOVERNMENT ARTICLE.

8 (E) (1) (I) FOR FISCAL YEARS 2021 AND 2022, THE DEPARTMENT  
9 SHALL PROVIDE \$25,000,000 EACH YEAR IN GRANTS TO LOCAL JURISDICTIONS TO  
10 EXPAND CAPACITY FOR COVID-19 TESTING AND CONTACT TRACING.

11 (II) GRANT FUNDING PROVIDED FOR COVID-19 TESTING AND  
12 CONTACT TRACING UNDER SUBPARAGRAPH (I) OF THIS PARAGRAPH SHALL BE  
13 DIVIDED BETWEEN LOCAL JURISDICTIONS IN PROPORTION TO THEIR RESPECTIVE  
14 POPULATIONS.

15 (III) THE DEPARTMENT SHALL PROVIDE ADDITIONAL GRANT  
16 FUNDING TO A LOCAL JURISDICTION TO SUPPLEMENT THE GRANT FUNDING  
17 ALLOCATED TO THE LOCAL JURISDICTION UNDER SUBPARAGRAPHS (I) AND (II) OF  
18 THIS PARAGRAPH IF THE DEPARTMENT DETERMINES THAT THE INITIAL  
19 ALLOCATION OF GRANT FUNDING IS NOT SUFFICIENT TO MEET THE COVID-19  
20 TESTING AND CONTACT TRACING NEEDS OF THE LOCAL JURISDICTION.

21 (IV) A LOCAL JURISDICTION MAY USE GRANT FUNDING  
22 PROVIDED UNDER THIS SUBSECTION TO EXPAND COVID-19 TESTING CAPACITY  
23 THROUGH DIRECT TESTING EFFORTS BY THE HEALTH DEPARTMENT OF THE LOCAL  
24 JURISDICTION OR BY CONTRACTING WITH OTHER ENTITIES TO PROVIDE TESTING.

25 (2) (I) FOR FISCAL YEARS 2021 AND 2022 AND IN ADDITION TO ANY  
26 FUNDING PROVIDED UNDER PARAGRAPH (1) OF THIS SUBSECTION, THE  
27 DEPARTMENT SHALL PROVIDE FUNDING TO LOCAL JURISDICTIONS THAT ELECT TO  
28 ESTABLISH AND IMPLEMENT A PROGRAM FOR COVID-19 CONTACT TRACING THAT  
29 IS INDEPENDENT FROM THE CONTACT TRACING PROGRAM PERFORMED BY THE  
30 STATE OR THE ENTITY WITH WHOM THE STATE HAS CONTRACTED TO PERFORM  
31 CONTACT TRACING FOR THE STATE.

32 (II) THE AMOUNT OF FUNDING PROVIDED TO A LOCAL  
33 JURISDICTION FOR COVID-19 CONTACT TRACING UNDER SUBPARAGRAPH (I) OF  
34 THIS PARAGRAPH SHALL BE EQUIVALENT TO THE COST PER CASE AMOUNT  
35 PROVIDED TO THE ENTITY WITH WHOM THE STATE HAS CONTRACTED TO PERFORM

1 CONTACT TRACING FOR THE STATE.

2 (3) (I) FOR FISCAL YEARS 2021 AND 2022, THE DEPARTMENT  
3 SHALL PROVIDE \$15,000,000 EACH YEAR IN GRANTS TO LOCAL JURISDICTIONS TO  
4 VACCINATE RESIDENTS OF THE LOCAL JURISDICTION AGAINST COVID-19.

5 (II) GRANT FUNDING PROVIDED FOR COVID-19 VACCINATION  
6 UNDER THIS SUBSECTION SHALL BE DIVIDED BETWEEN LOCAL JURISDICTIONS IN  
7 PROPORTION TO THEIR RESPECTIVE POPULATIONS.

8 (III) THE DEPARTMENT SHALL PROVIDE ADDITIONAL GRANT  
9 FUNDING TO A LOCAL JURISDICTION TO SUPPLEMENT THE GRANT FUNDING  
10 ALLOCATED TO THE LOCAL JURISDICTION UNDER SUBPARAGRAPHS (I) AND (II) OF  
11 THIS PARAGRAPH IF THE DEPARTMENT DETERMINES THAT THE INITIAL  
12 ALLOCATION OF GRANT FUNDING IS NOT SUFFICIENT TO MEET THE COVID-19  
13 VACCINATION NEEDS OF THE LOCAL JURISDICTION.

14 (4) (I) THE DEPARTMENT SHALL FIRST USE FEDERAL FUNDING  
15 ALLOCATED TO THE STATE UNDER THE CORONAVIRUS RESPONSE AND RELIEF  
16 SUPPLEMENTAL APPROPRIATIONS ACT AND ANY OTHER FEDERAL LEGISLATION  
17 ENACTED IN CALENDAR YEARS 2020 THROUGH 2022 TO PROVIDE FUNDING  
18 REQUIRED UNDER THIS SECTION.

19 (II) IF THE FEDERAL FUNDING SPECIFIED UNDER  
20 SUBPARAGRAPH (I) OF THIS PARAGRAPH DOES NOT SUFFICIENTLY PROVIDE THE  
21 FUNDS REQUIRED UNDER THIS SECTION, GENERAL FUNDS SHALL BE USED TO  
22 SUPPLEMENT THE FEDERAL FUNDING.

23 (F) (1) TO THE EXTENT PRACTICABLE, THE DEPARTMENT SHALL  
24 PROVIDE UP TO \$9,000,000 IN FISCAL YEAR 2021 AND \$36,000,000 IN FISCAL YEAR  
25 2022 IN GRANT FUNDING TO ASSISTED LIVING PROGRAMS AND HOME HEALTH  
26 AGENCIES IN CALENDAR YEAR 2021 TO COVER THE COST OF COVID-19 TESTING  
27 FOR RESIDENTS, PATIENTS, AND STAFF.

28 (2) IT IS THE INTENT OF THE GENERAL ASSEMBLY THAT THE  
29 DEPARTMENT:

30 (I) FIRST USE FEDERAL FUNDING ALLOCATED TO THE STATE  
31 UNDER THE CORONAVIRUS RESPONSE AND RELIEF SUPPLEMENTAL  
32 APPROPRIATIONS ACT AND ANY OTHER FEDERAL LEGISLATION ENACTED IN  
33 CALENDAR YEARS 2020 THROUGH 2022 TO PROVIDE FUNDING REQUIRED UNDER  
34 THIS SUBSECTION; AND

1 (II) IF THE FEDERAL FUNDING SPECIFIED UNDER ITEM (I) OF  
2 THIS PARAGRAPH DOES NOT SUFFICIENTLY PROVIDE THE FUNDS NEEDED UNDER  
3 THIS SUBSECTION, USE GENERAL FUNDS TO SUPPLEMENT THE FEDERAL FUNDING.

4 18-9A-03.

5 (A) (1) ON OR BEFORE APRIL 1, 2021, THE DEPARTMENT, WITH INPUT  
6 FROM SUBJECT MATTER EXPERTS AND OTHER RELEVANT STAKEHOLDERS, SHALL  
7 DEVELOP AND SUBMIT TO THE GENERAL ASSEMBLY A COMPREHENSIVE PLAN FOR  
8 VACCINATING RESIDENTS OF THE STATE AGAINST COVID-19.

9 (2) THE PLAN REQUIRED UNDER PARAGRAPH (1) OF THIS  
10 SUBSECTION SHALL INCLUDE:

11 (I) DETAILED INFORMATION ON:

12 1. THE CATEGORIES OF RESIDENTS OF THE STATE WHO  
13 WILL RECEIVE PRIORITY ACCESS TO VACCINES FOR COVID-19;

14 2. THE TIMELINE FOR PROVIDING VACCINES FOR  
15 COVID-19 TO RESIDENTS IN EACH OF THE PRIORITY CATEGORIES AND TO  
16 MEMBERS OF THE GENERAL PUBLIC WHO ARE NOT INCLUDED IN PRIORITY  
17 CATEGORIES; AND

18 3. TARGET METRICS FOR VACCINATING RESIDENTS IN  
19 EACH OF THE PRIORITY CATEGORIES AND FOR MEMBERS OF THE GENERAL PUBLIC  
20 WHO ARE NOT INCLUDED IN PRIORITY CATEGORIES; AND

21 (II) A DEDICATION OF TIME AND RESOURCES TO TARGET  
22 VACCINE DISTRIBUTION AND VACCINE SAFETY OUTREACH EFFORTS TO  
23 COMMUNITIES THAT HAVE BEEN DISPROPORTIONATELY IMPACTED BY COVID-19  
24 INFECTION, MORBIDITY, AND MORTALITY.

25 (B) AFTER SUBMITTING THE COVID-19 VACCINE PLAN TO THE GENERAL  
26 ASSEMBLY AS REQUIRED UNDER SUBSECTION (A) OF THIS SECTION, THE  
27 DEPARTMENT SHALL PROVIDE WEEKLY PROGRESS REPORTS ON IMPLEMENTATION  
28 OF THE COVID-19 VACCINE PLAN TO THE GENERAL ASSEMBLY FOR THE DURATION  
29 OF CALENDAR YEAR 2021.

30 (C) THE COVID-19 VACCINE PLAN AND PROGRESS REPORTS REQUIRED  
31 UNDER THIS SECTION SHALL BE SUBMITTED TO THE GENERAL ASSEMBLY IN  
32 ACCORDANCE WITH § 2-1257 OF THE STATE GOVERNMENT ARTICLE.



1 18-9A-04.

2 (A) THE DEPARTMENT SHALL CONVENE A MARYLAND PUBLIC HEALTH  
3 INFRASTRUCTURE MODERNIZATION WORKGROUP.

4 (B) THE WORKGROUP SHALL INCLUDE:

5 (1) TWO MEMBERS OF THE SENATE OF MARYLAND, APPOINTED BY  
6 THE PRESIDENT OF THE SENATE;

7 (2) TWO MEMBERS OF THE HOUSE OF DELEGATES, APPOINTED BY  
8 THE SPEAKER OF THE HOUSE; AND

9 (3) REPRESENTATIVES OF THE DEPARTMENT, LOCAL HEALTH  
10 DEPARTMENTS, SUBJECT MATTER EXPERTS, AND ANY OTHER RELEVANT  
11 STAKEHOLDERS.

12 (C) THE WORKGROUP SHALL:

13 (1) ASSESS THE CURRENT PUBLIC HEALTH INFRASTRUCTURE AND  
14 RESOURCES IN THE STATE; AND

15 (2) MAKE RECOMMENDATIONS FOR HOW TO ESTABLISH A MODERN  
16 AND EFFECTIVE PUBLIC HEALTH SYSTEM WITH A CAPACITY TO MONITOR, PREVENT,  
17 CONTROL, AND MITIGATE THE SPREAD OF INFECTIOUS DISEASE.

18 (D) ON OR BEFORE DECEMBER 1, 2021, THE DEPARTMENT SHALL SUBMIT  
19 A REPORT TO THE GENERAL ASSEMBLY, IN ACCORDANCE WITH § 2-1257 OF THE  
20 STATE GOVERNMENT ARTICLE, THAT INCLUDES THE FINDINGS AND  
21 RECOMMENDATIONS OF THE WORKGROUP ESTABLISHED UNDER THIS SECTION.

22 SECTION 2. AND BE IT FURTHER ENACTED, That the Laws of Maryland read  
23 as follows:

24 **Article – Education**

25 **SUBTITLE 17. COVID-19 TESTING PLAN.**

26 11-1701.

27 (A) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS  
28 INDICATED.

29 (B) “COVID-19” MEANS, INTERCHANGEABLY AND COLLECTIVELY, THE

1 CORONAVIRUS KNOWN AS COVID-19 OR 2019-nCoV AND THE SARS-CoV-2  
2 VIRUS.

3 (C) "COVID-19 TEST" MEANS A FEDERAL FOOD AND DRUG  
4 ADMINISTRATION-APPROVED MOLECULAR POLYMERASE CHAIN REACTION (PCR)  
5 TEST OR AN ANTIGEN TEST FOR THE DETECTION OR DIAGNOSIS OF COVID-19.

6 11-1702.

7 (A) FOR CALENDAR YEAR 2021, AN INSTITUTION OF HIGHER EDUCATION  
8 SHALL ADOPT AND IMPLEMENT A COVID-19 TESTING PLAN TO MONITOR,  
9 PREVENT, AND MITIGATE THE SPREAD OF COVID-19 AMONG STUDENTS AND STAFF  
10 AT THE INSTITUTION OF HIGHER EDUCATION.

11 (B) THE COVID-19 TESTING PLAN REQUIRED UNDER SUBSECTION (A) OF  
12 THIS SECTION SHALL INCLUDE A REQUIREMENT THAT ANY STUDENT OF THE  
13 INSTITUTION OF HIGHER EDUCATION BE TESTED FOR COVID-19 AND PROVIDE TO  
14 THE INSTITUTION OF HIGHER EDUCATION CONFIRMATION OF A NEGATIVE  
15 COVID-19 TEST RESULT BEFORE:

16 (1) COMMENCING IN-PERSON CLASS ATTENDANCE AT THE  
17 INSTITUTION OF HIGHER EDUCATION; OR

18 (2) RETURNING TO THE CAMPUS OF THE INSTITUTION OF HIGHER  
19 EDUCATION TO RESIDE IN HOUSING OWNED BY THE INSTITUTION OF HIGHER  
20 EDUCATION.

21 Article - Health - General

22 16-201.5.

23 (A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS  
24 INDICATED.

25 (2) "PROVIDER" MEANS A PROVIDER OF NURSING HOME SERVICES.

26 (3) "RATE" MEANS THE REIMBURSEMENT RATE PAID BY THE  
27 DEPARTMENT TO PROVIDERS OF NURSING HOME SERVICES FROM THE GENERAL  
28 FUND OF THE STATE, MARYLAND MEDICAL ASSISTANCE PROGRAM FUNDS, OTHER  
29 STATE OR FEDERAL FUNDS, OR A COMBINATION OF THESE FUNDS.

30 (B) IT IS THE INTENT OF THE GENERAL ASSEMBLY THAT:

31 (1) THE GOVERNOR INCLUDE ADDITIONAL FUNDING OF UP TO

1 **\$5,500,000 IN FISCAL YEAR 2021 AND \$22,000,000 IN FISCAL YEAR 2022 IN THE**  
2 **BUDGET TO COVER THE COST OF COVID-19 TESTING OF NURSING HOME STAFF AND**  
3 **RESIDENTS DURING CALENDAR YEAR 2021; AND**

4 **(2) THE ADDITIONAL FUNDING PROVIDED UNDER ITEM (1) OF THIS**  
5 **SUBSECTION BE IN ADDITION TO ANY OTHER PROVIDER RATE INCREASES INCLUDED**  
6 **IN THE BUDGET FOR FISCAL YEARS 2021 AND 2022.**

7 **19-411.**

8 **(A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS**  
9 **INDICATED.**

10 **(2) "COVID-19" MEANS, INTERCHANGEABLY AND COLLECTIVELY,**  
11 **THE CORONAVIRUS KNOWN AS COVID-19 OR 2019-nCoV AND THE SARS-CoV-2**  
12 **VIRUS.**

13 **(3) "COVID-19 TEST" MEANS A FEDERAL FOOD AND DRUG**  
14 **ADMINISTRATION-APPROVED MOLECULAR POLYMERASE CHAIN REACTION (PCR)**  
15 **TEST OR AN ANTIGEN TEST FOR THE DETECTION OR DIAGNOSIS OF COVID-19.**

16 **(B) FOR CALENDAR YEARS 2021 AND 2022, A HOME HEALTH AGENCY SHALL**  
17 **ADOPT AND IMPLEMENT A COVID-19 TESTING PLAN FOR PATIENTS AND STAFF**  
18 **WHO PROVIDE HOME HEALTH CARE SERVICES TO PATIENTS OF THE HOME HEALTH**  
19 **AGENCY.**

20 **(C) THE COVID-19 TESTING PLAN SHALL ENSURE THAT PATIENTS AND**  
21 **STAFF WHO PROVIDE HOME HEALTH CARE SERVICES TO PATIENTS OF THE HOME**  
22 **HEALTH AGENCY ARE TESTED FOR COVID-19 ON A REGULAR BASIS AND AT A**  
23 **FREQUENCY THAT IS SUFFICIENT TO PREVENT THE SPREAD OF COVID-19 AMONG**  
24 **STAFF AND PATIENTS OF THE HOME HEALTH AGENCY.**

25 **(D) (1) THE DEPARTMENT SHALL ADOPT REGULATIONS THAT SET**  
26 **STANDARDS FOR A COVID-19 TESTING PLAN REQUIRED UNDER THIS SECTION.**

27 **(2) THE STANDARDS SET BY THE DEPARTMENT UNDER THIS**  
28 **SUBSECTION SHALL:**

29 **(I) BE GUIDED BY APPLICABLE FEDERAL ORDERS AND**  
30 **POLICIES; AND**

31 **(II) INCLUDE REQUIREMENTS FOR TESTING FREQUENCY THAT**  
32 **ARE REASONABLY RELATED TO THE COVID-19 TESTING POSITIVITY RATE IN THE**

1 LOCAL JURISDICTION IN WHICH THE HOME HEALTH CARE SERVICES ARE PROVIDED  
2 TO PATIENTS.

3 SUBTITLE 14C. COVID-19 TESTING PLAN.

4 19-14C-01.

5 (A) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS  
6 INDICATED.

7 (B) "COVID-19" MEANS, INTERCHANGEABLY AND COLLECTIVELY, THE  
8 CORONAVIRUS KNOWN AS COVID-19 OR 2019-nCoV AND THE SARS-CoV-2  
9 VIRUS.

10 (C) "COVID-19 TEST" MEANS A FEDERAL FOOD AND DRUG  
11 ADMINISTRATION-APPROVED MOLECULAR POLYMERASE CHAIN REACTION (PCR)  
12 TEST OR AN ANTIGEN TEST FOR THE DETECTION OR DIAGNOSIS OF COVID-19.

13 19-14C-02.

14 (A) FOR CALENDAR YEARS 2021 AND 2022, A NURSING HOME SHALL ADOPT  
15 AND IMPLEMENT A COVID-19 TESTING PLAN FOR RESIDENTS OF THE NURSING  
16 HOME AND STAFF WHO PROVIDE SERVICES TO RESIDENTS OF THE NURSING HOME.

17 (B) THE COVID-19 TESTING PLAN SHALL ENSURE THAT RESIDENTS AND  
18 STAFF ARE TESTED FOR COVID-19 ON A REGULAR BASIS AND AT A FREQUENCY  
19 THAT IS SUFFICIENT TO PREVENT THE SPREAD OF COVID-19 AMONG RESIDENTS  
20 AND STAFF OF THE NURSING HOME.

21 (C) (1) THE DEPARTMENT SHALL ADOPT REGULATIONS THAT SET  
22 STANDARDS FOR A COVID-19 TESTING PLAN REQUIRED UNDER THIS SECTION.

23 (2) THE STANDARDS SET BY THE DEPARTMENT UNDER THIS  
24 SUBSECTION SHALL:

25 (I) BE GUIDED BY APPLICABLE FEDERAL ORDERS AND  
26 POLICIES; AND

27 (II) INCLUDE REQUIREMENTS FOR TESTING FREQUENCY THAT  
28 ARE REASONABLY RELATED TO THE COVID-19 TESTING POSITIVITY RATE IN THE  
29 LOCAL JURISDICTION IN WHICH A NURSING HOME IS LOCATED.

30 19-1814.



1 VIRUS.

2 (3) (I) "COVID-19 TEST" MEANS A FEDERAL FOOD AND DRUG  
3 ADMINISTRATION-APPROVED MOLECULAR POLYMERASE CHAIN REACTION (PCR)  
4 TEST OR AN ANTIGEN TEST FOR THE DETECTION OR DIAGNOSIS OF COVID-19.

5 (II) "COVID-19 TEST" INCLUDES A FEDERAL FOOD AND DRUG  
6 ADMINISTRATION-APPROVED RAPID POINT-OF-CARE TEST AND AN AT-HOME  
7 COLLECTION TEST FOR THE DETECTION OR DIAGNOSIS OF COVID-19.

8 (4) (I) "MEMBER" MEANS AN INDIVIDUAL ENTITLED TO HEALTH  
9 CARE BENEFITS UNDER A POLICY ISSUED OR DELIVERED IN THE STATE BY AN  
10 ENTITY SUBJECT TO THIS SECTION.

11 (II) "MEMBER" INCLUDES A SUBSCRIBER.

12 (B) THIS SECTION APPLIES TO:

13 (1) INSURERS AND NONPROFIT HEALTH SERVICE PLANS THAT  
14 PROVIDE HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS  
15 ON AN EXPENSE-INCURRED BASIS UNDER HEALTH INSURANCE POLICIES OR  
16 CONTRACTS THAT ARE ISSUED OR DELIVERED IN THE STATE; AND

17 (2) HEALTH MAINTENANCE ORGANIZATIONS THAT PROVIDE  
18 HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS UNDER  
19 CONTRACTS THAT ARE ISSUED OR DELIVERED IN THE STATE.

20 (C) (1) AN ENTITY SUBJECT TO THIS SECTION SHALL PROVIDE  
21 COVERAGE FOR COVID-19 TESTS AND ASSOCIATED COSTS FOR THE  
22 ADMINISTRATION OF COVID-19 TESTS.

23 (2) THE COVERAGE REQUIRED UNDER THIS SECTION SHALL BE  
24 PROVIDED FOR A COVID-19 TEST:

25 (I) 1. PRIMARILY INTENDED FOR INDIVIDUALIZED  
26 DIAGNOSIS OR TREATMENT OF COVID-19 FOR THE MEMBER; OR

27 2. TO KEEP THE MEMBER OR OTHERS WITH WHOM THE  
28 MEMBER IS OR MAY BE IN FUTURE CONTACT FROM POTENTIAL EXPOSURE TO  
29 COVID-19; AND

30 (II) REGARDLESS OF WHETHER THE MEMBER HAS SIGNS OR  
31 SYMPTOMS COMPATIBLE WITH COVID-19 OR A SUSPECTED RECENT EXPOSURE TO

1 **COVID-19 IF THE TESTING IS PERFORMED FOR A PURPOSE SPECIFIED UNDER ITEM**  
2 **(I) OF THIS PARAGRAPH.**

3 **(3) AN ENTITY SUBJECT TO THIS SECTION MAY NOT REQUIRE A**  
4 **MEMBER TO OBTAIN A DETERMINATION FROM A HEALTH CARE PROVIDER THAT A**  
5 **COVID-19 TEST IS MEDICALLY APPROPRIATE FOR THE MEMBER AS A CONDITION**  
6 **FOR THE COVERAGE REQUIRED UNDER THIS SECTION.**

7 **(4) AN ENTITY SUBJECT TO THIS SECTION MAY NOT APPLY A**  
8 **COPAYMENT, COINSURANCE REQUIREMENT, OR DEDUCTIBLE TO THE COVERAGE**  
9 **REQUIRED UNDER THIS SECTION.**

10 SECTION 3. AND BE IT FURTHER ENACTED, That Section 2 of this Act shall  
11 apply to all policies, contracts, and health benefit plans issued, delivered, or renewed in the  
12 State on or after the effective date of this Act.

13 SECTION 4. AND BE IT FURTHER ENACTED, That this Act is an emergency  
14 measure, is necessary for the immediate preservation of the public health or safety, has  
15 been passed by a yea and nay vote supported by three-fifths of all the members elected to  
16 each of the two Houses of the General Assembly, and shall take effect from the date it is  
17 enacted. Section 2 of this Act shall remain effective through December 31, 2022, and, at the  
18 end of December 31, 2022, Section 2 of this Act, with no further action required by the  
19 General Assembly, shall be abrogated and of no further force and effect.