J1, J2 1lr1620 (PRE-FILED) By: Senators Griffith, Benson, Ellis, Kelley, Washington, and West West, Guzzone, Feldman, Augustine, Beidle, Corderman, Eckardt, Edwards, Elfreth, King, Hayes, Klausmeier, Kramer, McCray, Peters, Rosapepe, Salling, Young, and Zucker Requested: November 1, 2020 Introduced and read first time: January 13, 2021 Assigned to: Finance and Budget and Taxation Committee Report: Favorable with amendments Senate action: Adopted Read second time: February 20, 2021

CHAPTER _____

1 AN ACT concerning

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

4 FOR the purpose of <u>altering the information required to be included in a certain report card</u> to include certain disparities in morbidity and mortality rates for dementia; $\mathbf{5}$ requiring the Office of Minority Health and Health Disparities to publish, to a 6 7 certain extent, certain data on its website and to update certain data at a certain 8 frequency; requiring the Governor, beginning in a certain fiscal year, to include a 9 certain appropriation in the annual budget bill for the Office; altering a provision of 10 law related to the intent of the General Assembly regarding the funding of the Office; 11 requiring the Office to report certain information to certain committees of the 12General Assembly on or before a certain date each year; altering the purpose of the 13Cultural and Linguistic Health Care Professional Competency Program; requiring 14 the Program, in coordination with the Office, to identify and approve certain implicit 15bias training programs; authorizing the Office to approve only implicit bias training 16 programs that are recognized by a certain board or accredited by a certain council; 17requiring the Program to provide a certain list on request; requiring an applicant for 18the renewal of a license or certificate issued by a certain health occupations board to 19attest in a certain application that the applicant completed a certain implicit bias 20training program under certain circumstances; making technical changes; and

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.



$\frac{1}{2}$	generally relating to implicit bias training and the Office of Minority Health and Health Disparities.
3	BY repealing and reenacting, with amendments,
4	Article – Health – General
5	Section 20-1004(21) and (22), 20-1007, 20-1301, 20-1302, and 20-1305
6	Annotated Code of Maryland
7	(2019 Replacement Volume and 2020 Supplement)
8	BY adding to
9	Article – Health – General
10	Section 20–1004(23) and 20–1306
11	Annotated Code of Maryland
12	(2019 Replacement Volume and 2020 Supplement)
13	BY adding to
14	Article – Health Occupations
15	Section 1–225
16	Annotated Code of Maryland
17	(2014 Replacement Volume and 2020 Supplement)
$\frac{18}{19}$	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:
20	Article – Health – General
21	20–1004.
22	The Office shall:
23	(21) Work collaboratively with the Governor's Office of Small, Minority, and
24	Women Business Affairs as the Office determines necessary; [and]
25	(22) In collaboration with the Maryland Health Care Commission, publish
26	annually on the Department's website and provide in writing on request a "Health Care
27	Disparities Policy Report Card" that includes:
28	(i) An analysis of racial and ethnic variations in insurance coverage
29	for low–income, nonelderly individuals;
$30 \\ 31$	(ii) The racial and ethnic composition of the physician population
91	compared to the racial and ethnic composition of the State's population; and
32	(iii) The racial and ethnic disparities in morbidity and mortality rates
33	for cardiovascular disease, cancer, diabetes, HIV/AIDS, infant mortality, asthma,

34 **DEMENTIA**, and other diseases identified by the Maryland Health Care Commission; AND

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1 (23) TO THE EXTENT AUTHORIZED UNDER FEDERAL AND STATE 2 PRIVACY LAWS, PUBLISH ON ITS WEBSITE HEALTH DATA THAT INCLUDES RACE AND 3 ETHNICITY INFORMATION COLLECTED BY THE OFFICE AND UPDATE THE DATA AT 4 LEAST ONCE EVERY 6 MONTHS.

5 20-1007.

6 (A) FOR FISCAL YEAR 2023 AND EACH FISCAL YEAR THEREAFTER, THE 7 GOVERNOR SHALL INCLUDE IN THE ANNUAL BUDGET BILL AN APPROPRIATION FOR 8 THE OFFICE IN AN AMOUNT THAT IS AT LEAST \$1,788,314 OR 1.2% 0.012% OF THE 9 TOTAL FUNDS APPROPRIATED TO THE DEPARTMENT IN THAT FISCAL YEAR, 10 WHICHEVER IS GREATER.

(B) It is the intent of the General Assembly that the Office [be funded]
 SUPPLEMENT THE FUNDING FOR THE OFFICE PROVIDED UNDER SUBSECTION (A) OF
 THIS SECTION WITH FUNDING from federal and special funding sources.

14 (C) ON OR BEFORE OCTOBER 1 EACH YEAR, THE OFFICE SHALL REPORT TO 15 THE HOUSE HEALTH AND GOVERNMENT OPERATIONS COMMITTEE AND THE 16 SENATE FINANCE COMMITTEE, IN ACCORDANCE WITH § 2–1257 OF THE STATE 17 GOVERNMENT ARTICLE, THE FOLLOWING INFORMATION FROM THE IMMEDIATELY 18 PRECEDING FISCAL YEAR:

19(1) THE OFFICE'S EFFORTS TO OBTAIN FUNDING DESCRIBED UNDER20SUBSECTION (B) OF THIS SECTION; AND

21 (2) THE AMOUNT OF FUNDING FROM FEDERAL AND SPECIAL 22 FUNDING SOURCES THE OFFICE RECEIVED.

23 20-1301.

24 (a) In this subtitle the following words have the meanings indicated.

25 (b) "Cultural and linguistic competency" means cultural and linguistic abilities 26 that can be incorporated into therapeutic and medical evaluation and treatment, including:

27

(1) Direct communication in the patient's primary language;

28 (2) Understanding and applying the roles that culture, ethnicity, and race 29 play in diagnosis, treatment, and clinical care; and

30 (3) Awareness of how the attitudes, values, and beliefs of health care 31 providers and patients influence and impact professional and patient relations.

1 (c) "Health care professional" includes a physician, nurse, dentist, social worker, 2 psychologist, pharmacist, health educator, or other allied health professional.

3 (D) "IMPLICIT BIAS" MEANS A BIAS IN JUDGMENT THAT RESULTS FROM 4 SUBTLE COGNITIVE PROCESSES, INCLUDING THE FOLLOWING PREJUDICES AND 5 STEREOTYPES THAT OFTEN OPERATE AT A LEVEL BELOW CONSCIOUS AWARENESS 6 AND WITHOUT INTENTIONAL CONTROL:

7 (1) PREJUDICIAL NEGATIVE FEELINGS OR BELIEFS ABOUT A GROUP
 8 THAT AN INDIVIDUAL HOLDS WITHOUT BEING AWARE OF THE FEELINGS OR BELIEFS;
 9 AND

10 (2) UNCONSCIOUS ATTRIBUTIONS OF PARTICULAR QUALITIES TO A 11 MEMBER OF A SPECIFIC SOCIAL GROUP THAT ARE INFLUENCED BY EXPERIENCE AND 12 BASED ON LEARNED ASSOCIATIONS BETWEEN VARIOUS QUALITIES AND SOCIAL 13 CATEGORIES, INCLUDING RACE AND GENDER.

14 [(d)] (E) "Program" means the Cultural and Linguistic Health Care Professional 15 Competency Program.

16 20–1302.

17 (a) There is a Cultural and Linguistic Health Care Professional Competency18 Program.

19 (b) The purpose of the Program is to:

20 (1) Provide for a voluntary program in which educational classes are 21 offered to health care professionals to teach health care professionals:

(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

(iii) Methods to enable health care professionals to increase the
 health literacy of their patients to improve the patient's ability to obtain, process, and
 understand basic health information and services to make appropriate health care
 decisions; and

32 (2) Establish and provide an evidence-based implicit bias training 33 program for health care professionals involved in the perinatal care of patients under § 34 20-1305 of this subtitle; AND

4

FOR HEALTH OCCUPATION LICENSURE AND CERTIFICATION UNDER § 1-225 OF THE

IDENTIFY AND APPROVE IMPLICIT BIAS TRAINING PROGRAMS

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 $\mathbf{2}$

(3)

HEALTH OCCUPATIONS ARTICLE. 3 4 20 - 1305. $\mathbf{5}$ In this section the following words have the meanings indicated. (a) (1)6 "Implicit bias" means a bias in judgment that results from subtle (2)7cognitive processes, including the following prejudices and stereotypes that often operate at a level below conscious awareness and without intentional control: 8 9 Prejudicial negative feelings or beliefs about a group that an (i) individual holds without being aware of the feelings or beliefs; and 10 11 Unconscious attributions of particular qualities to a member of a (ii) 12specific social group that are influenced by experience and based on learned associations 13between various qualities and social categories, including race and gender. 14"Perinatal care" means the provision of care during pregnancy, labor, (3)delivery, and postpartum and neonatal periods. 1516**[**(4)**]**(3) "Perinatal care facility" includes: 17A hospital, as defined in § 19–301 of this article, that provides (i) 18perinatal care; and 19 (ii) A freestanding birthing center, as defined in § 19–3B–01 of this 20article. 21On or before January 1, 2021, the Program shall establish an (b) (1)22evidence-based implicit bias training program for all health care professionals involved in the perinatal care of patients in a perinatal care facility. 2324The Program shall establish the implicit bias program required (2)(i) 25under paragraph (1) of this subsection using best practices in implicit bias training. 26(ii) The implicit bias program required under paragraph (1) of this 27subsection may include best practices used in other states.

(c) On or before January 1, 2022, and once every 2 years thereafter or more
frequently, as determined by the perinatal care facility, a health care professional who is
an employee of, and involved in the perinatal care of patients at, a perinatal care facility
shall complete the training established under subsection (b) of this section.

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 3 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.

17

Article – Health Occupations

18 **1–225.**

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 IF THE APPLICATION FOR RENEWAL IS THE FIRST APPLICATION 25 FOR RENEWAL SUBMITTED BY THE APPLICANT AFTER OCTOBER 1, 2021.

26 (B) <u>THE REQUIREMENTS OF SUBSECTION (A) OF THIS SECTION SHALL</u> 27 <u>APPLY ONLY TO AN APPLICANT'S FIRST LICENSE OR CERTIFICATE RENEWAL AFTER</u> 28 <u>APRIL 1, 2022.</u>

29 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect 30 October 1, 2021.