Overview and Legal and Fiscal Impact

The regulations establish criteria for eligibility for cancer treatment services and tobacco treatment products under the Cigarette Restitution Fund (CRF) Program. The regulations also modify responsibilities of the Department of Health and Mental Hygiene, local health departments (LHDs), and statewide academic health centers under the CRF Program and alter definitions used in the regulations.

The regulations present no legal issues of concern.

There is no fiscal impact on State or local agencies.

Regulations of COMAR Affected

Department of Health and Mental Hygiene:
Cancer Control: Cigarette Restitution Fund Program: COMAR 10.14.06.02 through .06

Legal Analysis

Background

The Cancer Prevention, Education, Screening, and Treatment Program (CPESTP) is a program within the department that is funded through CRF. CRF is supported by payments made under the Master Settlement Agreement, through which settling cigarette manufacturers pay the litigating parties – 46 states, 5 territories, and the District of Columbia – substantial annual payments in perpetuity. The purpose of CPESTP is to coordinate the State’s use of CRF to create a lasting legacy of public health initiatives that reduce mortality and morbidity rates for cancer and tobacco-related diseases in the State and otherwise benefit the health and welfare of the State’s residents. Under the Tobacco Use Cessation and Prevention Program, CRF funds tobacco use cessation and prevention initiatives in the State by authorizing local health departments to develop programs in coordination with Community Health Coalitions and the department.

Summary of Regulations

Criteria for Eligibility for Cancer Treatment Services and Tobacco Treatment Products
The regulations establish financial eligibility criteria that a LHD or statewide academic health center must use for cancer treatment services provided under the CRF Program. Among other criteria, the regulations specify that an applicant with a gross annual household income above 250 percent of the federal poverty level is not eligible to receive cancer treatment services. The regulations authorize a LHD or statewide academic health center to establish requirements for eligibility in addition to the requirements established under the regulations. The regulations also require a LHD or statewide academic health center to make tobacco treatment products available free of charge to an individual participating in the CRF program.

**Responsibilities of Department, LHDs, and Statewide Academic Health Centers under CRF Program**

The regulations alter the responsibilities of the department, LHDs, and statewide academic health centers under the CRF program. Instead of requiring each LHD and statewide academic health center to develop and submit to the department written financial eligibility criteria for cancer treatment services and tobacco treatment products, the department must review the written documentation submitted by a LHD or statewide academic health center to assure that the LHD or statewide academic health center follows the criteria in the regulations for eligibility for cancer treatment services and tobacco treatment products. An LHD or academic health center must adhere to the financial guidelines established by the department under the regulations if it decides that grant funds under the CRF program will be used to pay for cancer treatment services or tobacco treatment products.

**Definitions**

The regulations also add and alter definitions used in regulations governing the CRF program. Among other changes, a tobacco treatment product is defined to mean all Food and Drug Administration approved tobacco cessation medications, including both prescription and over-the-counter medications, which assist individuals to stop using tobacco products. The definition of a “statewide academic health center” is altered to mean the University of Maryland Medical Group, the Johns Hopkins Institutions, the organization designated by the department as stipulated by a certain provision of law that governs the Statewide Academic Health Center Public Health Grant, or one or more of these entities.

**Legal Issues**

The regulations present no legal issues of concern.

**Statutory Authority and Legislative Intent**

The department cites §§ 13-1001 through 13-1002, 13-1005 through 13-1012, 13-1014, 13-1101 through 13-1102, 13-1106 through 13-1116, and 13-1119 of the Health-General Article as statutory authority for the regulations. More specifically, § 13-1101 defines terms in provisions of law governing CPESTP, including the definition of uninsured individual, which means an
individual for whom the appropriate treatment is not covered by private insurance or other specified types of public health coverage and who the department determines does not have the financial means to pay for treatment. Section 13-1102 establishes CPESTP in the department, requires that it be funded as provided in the State budget with money from CRF, and requires the department to adopt regulations that establish the criteria that the department will use to determine whether, for the purpose of qualifying as an uninsured individual, an individual has the financial means to pay for appropriate treatment.

Sections 13-1106 and 13-1107 establish a Statewide Public Health Component and a Local Public Health Component in CPESTP. Section 13-1108 requires the department, in consultation with LHDs, to establish cancer prevention, education, screening, and treatment goals for each county and to establish other requirements for each county that the department determines to be necessary to meet those goals. The section also requires the department to provide for the distribution of Local Public Health Cancer Grants to eligible counties based on a formula specified in statute. Section 13-1109 authorizes a local health officer to apply to the department for a Local Public Health Cancer Grant. Section 13-1115 authorizes the University of Maryland Medical Group and the Johns Hopkins Institutions to each apply for a Statewide Academic Health Center Public Health Grant. Before applying for grant, the two entities acting jointly in collaboration with the Baltimore City Health Department must establish a Baltimore City Community Health Coalition. The section also authorizes the department to distribute to the Baltimore City Health Department or another person designated by the department a Local Public Health Center Grant for the purpose of coordinating Baltimore City’s cancer prevention, education, screening, and treatment efforts under specified circumstances. The remaining cited authority is not relevant to these regulations.

The relevant cited authority is correct and complete. The regulations comply with the legislative intent of the law.

**Fiscal Analysis**

There is no fiscal impact on State or local agencies.

**Agency Estimate of Projected Fiscal Impact**

The regulations establish financial guidelines for local health departments and academic health centers to determine eligibility for individuals to receive cancer treatment services under the Cigarette Restitution Fund Program. The department advises that funding allocations to local health departments and academic health centers and financial distribution for services remain unchanged; therefore, there is no fiscal impact. The Department of Legislative Services concurs.

**Impact on Budget**

There is no impact on the State operating or capital budget.
Agency Estimate of Projected Small Business Impact

The department advises that the regulations have minimal or no economic impact on small businesses in the State. The Department of Legislative Services concurs.

Contact Information

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