
By: **Delegate Pitkin**
Introduced and read first time: February 19, 1998
Assigned to: Rules and Executive Nominations

A BILL ENTITLED

1 AN ACT concerning

2 **State Advisory Council on Osteoporosis**

3 FOR the purpose of establishing a State Advisory Council on Osteoporosis; requiring
4 the Advisory Council to advise the Department of Health and Mental Hygiene
5 on certain matters and to make a report; establishing the membership, duties,
6 and terms of the Council; and generally relating to a State Advisory Council on
7 Osteoporosis.

8 BY adding to
9 Article - Health - General
10 Section 13-901 through 13-906, inclusive, to be under the new subtitle "Subtitle
11 9. Advisory Council on Osteoporosis"
12 Annotated Code of Maryland
13 (1994 Replacement Volume and 1997 Supplement)

14 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
15 MARYLAND, That the Laws of Maryland read as follows:

16 **Article - Health - General**

17 **SUBTITLE 9. ADVISORY COUNCIL ON OSTEOPOROSIS.**

18 13-901.

19 (A) THE GENERAL ASSEMBLY FINDS THAT:

20 (1) ONE OF THE MOST SERIOUS AND TRAGIC PROBLEMS FACING THE
21 PUBLIC HEALTH AND WELFARE OF THIS STATE IS OSTEOPOROSIS;

22 (2) OSTEOPOROSIS IS A BONE-THINNING DISEASE WHICH TYPICALLY
23 MAY RESULT IN A FRACTURE OF THE HIP, SPINE, OR WRIST;

24 (3) OSTEOPOROSIS CAUSES PAIN, DISABILITY, IMMOBILITY, AND SOCIAL
25 ISOLATION AND AFFECTS THE QUALITY OF LIFE AND A PERSON'S ABILITY TO LIVE
26 INDEPENDENTLY;

1 (4) OSTEOPOROSIS IS A SILENT, PROGRESSIVE DISEASE THAT MAY GO
2 UNDIAGNOSED UNTIL A PERSON SUFFERS AN INJURY;

3 (5) THE MEDICAL COSTS ASSOCIATED WITH THE TREATMENT OF
4 OSTEOPOROSIS ARE VERY HIGH AND ARE EXPECTED TO RISE; AND

5 (6) EARLY DIAGNOSIS AND TREATMENT ARE ESSENTIAL IN REDUCING
6 THE PREVALENCE OF AND DEVASTATION FROM OSTEOPOROSIS.

7 (B) THIS STATE RECOGNIZES ITS RESPONSIBILITIES TO:

8 (1) EDUCATE ITS CITIZENS, PHYSICIANS, HEALTH CARE PROVIDERS,
9 AND GOVERNMENT AGENCIES IN THE PREVENTION, DETECTION, AND TREATMENT
10 OF OSTEOPOROSIS;

11 (2) USE ITS RESOURCES AND ORGANIZATION TO AID IN GATHERING AND
12 GIVING OUT INFORMATION ON THE PREVENTION, DETECTION, AND TREATMENT OF
13 OSTEOPOROSIS;

14 (3) CREATE AND FOSTER A MULTIGENERATIONAL, STATEWIDE
15 PROGRAM TO PROMOTE PUBLIC AWARENESS AND KNOWLEDGE ABOUT THE CAUSES
16 OF OSTEOPOROSIS, PERSONAL RISK FACTORS, THE VALUE OF PREVENTION AND
17 EARLY DETECTION, AND THE OPTIONS AVAILABLE FOR TREATMENT; AND

18 (4) EVALUATE EXISTING OSTEOPOROSIS SERVICES IN THE COMMUNITY
19 AND ASSESS THE NEED FOR IMPROVING THE QUALITY AND ACCESSIBILITY OF
20 COMMUNITY-BASED SERVICES, INCLUDING SUPPORT GROUPS AND REFERRAL
21 SERVICES.

22 13-902.

23 THERE IS A STATE ADVISORY COUNCIL ON OSTEOPOROSIS.

24 13-903.

25 (A) (1) THE ADVISORY COUNCIL CONSISTS OF 11 MEMBERS APPOINTED BY
26 THE GOVERNOR.

27 (2) OF THE 11 MEMBERS:

28 (I) ONE SHALL BE A PHYSICIAN;

29 (II) ONE SHALL BE FROM THE MARYLAND DEPARTMENT OF
30 HEALTH AND MENTAL HYGIENE;

31 (III) ONE SHALL BE FROM THE OFFICE OF AGING;

32 (IV) TWO SHALL BE FROM THE MARYLAND NURSES ASSOCIATION;

33 (V) ONE SHALL BE FROM THE WOMEN'S HEALTH COMMISSION;

1 (VI) TWO SHALL BE REPRESENTATIVES FROM THE HEALTH CARE
2 INDUSTRY, INCLUDING THE HOME HEALTH CARE INDUSTRY;

3 (VII) TWO SHALL BE OSTEOPOROSIS PATIENTS OR FAMILY MEMBERS
4 OF OSTEOPOROSIS PATIENTS; AND

5 (VIII) ONE SHALL BE FROM THE NATIONAL OSTEOPOROSIS
6 FOUNDATION.

7 (B) EACH PROFESSIONAL INDIVIDUAL APPOINTED TO THE ADVISORY
8 COUNCIL SHALL BE KNOWLEDGEABLE IN THE PREVENTION, DIAGNOSIS, AND
9 TREATMENT OF OSTEOPOROSIS.

10 (C) (1) THE TERM OF A MEMBER IS 3 YEARS.

11 (2) IF A VACANCY OCCURS DURING THE TERM OF A MEMBER, THE
12 GOVERNOR SHALL APPOINT A SUCCESSOR WHO WILL SERVE ONLY FOR THE REST OF
13 THE TERM AND UNTIL A SUCCESSOR IS APPOINTED AND QUALIFIES.

14 (3) THE GOVERNOR MAY REMOVE A MEMBER FOR INCOMPETENCE OR
15 MISCONDUCT.

16 (D) THE ADVISORY COUNCIL SHALL ELECT A CHAIRMAN ANNUALLY FROM
17 AMONG ITS MEMBERS.

18 13-904.

19 (A) A MAJORITY OF THE MEMBERS SERVING ON THE ADVISORY COUNCIL
20 REPRESENTS A QUORUM TO DO BUSINESS.

21 (B) THE ADVISORY COUNCIL SHALL MEET AT LEAST FOUR TIMES A YEAR, AT
22 THE TIMES AND PLACES THAT IT DETERMINES.

23 (C) A MEMBER OF THE ADVISORY COUNCIL:

24 (1) DOES NOT RECEIVE COMPENSATION; BUT

25 (2) IS ENTITLED TO REIMBURSEMENT FOR EXPENSES UNDER THE
26 STANDARD STATE TRAVEL REGULATIONS, AS PROVIDED IN THE STATE BUDGET.

27 (D) THE SECRETARY SHALL DESIGNATE THE STAFF NECESSARY TO CARRY
28 OUT THIS SUBTITLE.

29 13-905.

30 IN ADDITION TO THE POWERS AND DUTIES SET FORTH ELSEWHERE IN THIS
31 SUBTITLE, THE ADVISORY COUNCIL HAS THE FOLLOWING POWERS AND DUTIES:

32 (1) TO STUDY AND TO MAKE RECOMMENDATIONS FOR AN INTEGRATED
33 STATE PROGRAM OF EDUCATION AND APPLIED RESEARCH ON THE PREVENTION,
34 DIAGNOSIS, AND TREATMENT OF OSTEOPOROSIS;

1 (2) TO DEVELOP AND COORDINATE PROGRAMS IN REHABILITATION AND
2 INDUSTRY DESIGNED TO ASSIST INDIVIDUALS SUFFERING FROM OSTEOPOROSIS TO
3 REMAIN PRODUCTIVE MEMBERS OF SOCIETY;

4 (3) TO COORDINATE THE DEVELOPMENT OF A STRATEGIC PLAN OF
5 PATIENT EDUCATION THROUGHOUT THE STATE, INVOLVING STATE AND LOCAL
6 DEPARTMENTS, PRIVATE AGENCIES, PHARMACEUTICAL COMPANIES, MEDICAL
7 SCHOOLS, RELATED PROFESSIONAL ORGANIZATIONS, AND COMMUNITY
8 ORGANIZATIONS;

9 (4) TO ADDRESS GAPS IN THE DELIVERY OF STATE, REGIONAL, AND
10 LOCAL SERVICES AND TO MAKE RECOMMENDATIONS DESIGNED TO CONTAIN COSTS
11 ASSOCIATED WITH THE PREVENTION, DIAGNOSIS, AND TREATMENT OF
12 OSTEOPOROSIS; AND

13 (5) TO COORDINATE THE ACTIVITIES OF PUBLIC AND PRIVATE
14 AGENCIES, MEDICAL SCHOOLS, RELATED PROFESSIONAL GROUPS, AND COMMUNITY
15 ORGANIZATIONS TO IMPROVE THE QUALITY OF LIFE FOR INDIVIDUALS WITH
16 OSTEOPOROSIS AND THEIR FAMILIES.

17 13-906.

18 THE ADVISORY COUNCIL SHALL:

19 (1) EVALUATE ANNUALLY THE PROGRAMS IMPLEMENTED UNDER THIS
20 SUBTITLE; AND

21 (2) SUBMIT AN ANNUAL REPORT OF THE EVALUATION TO THE
22 GOVERNOR.

23 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
24 October 1, 1998.