

BY: Appropriations and Environmental Matters Committees

AMENDMENTS TO HOUSE BILL NO. 1425

(First Reading File Bill)

AMENDMENT NO. 1

On page 1, in the sponsor line, strike "and Rosenberg" and substitute "Rosenberg, Cane, Frush, Nathan-Pulliam, Guns, Conway, R. Baker, W. Baker, Branch, Cadden, Hubers, A. Jones, V. Jones, Kagan, Palumbo, Pitkin, Proctor, Stocksdale, and Turner".

AMENDMENT NO. 2

On page 1, in lines 11 and 12, strike "Cancer Prevention, Identification, and Treatment" and substitute "Major Community Hospital"; and in line 13, after the second "Component," insert "a Local Public Health Component, a Targeted Hospital Capacity Component,".

On page 2, in line 1, after "Act;" insert "requiring certain annual reports to the Governor and the General Assembly; prohibiting the State Department of Education from discontinuing the administration of the Maryland Adolescent Survey except under certain circumstances; providing that a certain component of this Act may not be implemented until after a certain baseline study has been completed;"; and in line 10, strike "13-1114 " and substitute "13-1121".

AMENDMENT NO. 3

On page 3, in line 1, after "year" insert "the use of"; in the same line, strike "kill" and substitute "kills"; in line 27, after "groups;" insert "and"; after line 27, insert "WHEREAS, There are areas and neighborhoods of cancer clusters; and"; and in line 35, strike "Medical System" and substitute ", Baltimore".

On page 4, in line 1, strike "Center" and substitute "System"; and in the same line, after "State's" insert "only two".

AMENDMENT NO. 4

On page 6, in line 25, strike the first "COMMITTEE" and substitute "AND FINANCE".

(Over)

COMMITTEES"; in the same line, strike the second "COMMITTEE" and substitute "AND ENVIRONMENTAL MATTERS COMMITTEES"; in line 32, strike "COMMITTEE" and substitute "AND FINANCE COMMITTEES"; and in line 33, strike "COMMITTEE" and substitute "AND ENVIRONMENTAL MATTERS COMMITTEES".

On page 9 in line 22, strike "JANUARY 15" and substitute "SEPTEMBER 1".

On page 18, in line 1, after "REPORT" insert ", ON OR BEFORE SEPTEMBER 1,".

On page 22, in line 2, strike the first "COMMITTEE" and substitute "AND FINANCE COMMITTEES"; in the same line, strike the second "COMMITTEE" and substitute "AND ENVIRONMENTAL MATTERS COMMITTEES"; in line 8, strike "COMMITTEE" and substitute "AND FINANCE COMMITTEES"; in line 9, strike "COMMITTEE" and substitute "AND ENVIRONMENTAL MATTERS COMMITTEES".

On page 24, in line 19, strike "JANUARY 15, 2001" and substitute "SEPTEMBER 1, 2000".

On page 25, in line 4, strike "JANUARY 15" and substitute "SEPTEMBER 1".

AMENDMENT NO. 5

On page 5 in line 14, and on page 19 in line 29, in each instance, after "MEANS" insert "WOMEN, AND INDIVIDUALS OF".

On page 5, after line 13, insert:

"(K) "MARYLAND ADOLESCENT SURVEY" MEANS THE MARYLAND ADOLESCENT SURVEY THAT IS ADMINISTERED BY THE MARYLAND STATE DEPARTMENT OF EDUCATION.";

in line 26 after "PRODUCTS" insert "AND INCLUDES WOMEN AND INDIVIDUALS OF AFRICAN AMERICAN, HISPANIC, NATIVE AMERICAN, AND ASIAN DESCENT"; after line 26, insert:

"(R) "YOUTH TOBACCO SURVEY" MEANS THE YOUTH TOBACCO SURVEY

DEVELOPED BY THE CENTERS FOR DISEASE CONTROL AND PREVENTION AND ADMINISTERED BY THE DEPARTMENT WITH THE ASSISTANCE OF THE MARYLAND STATE DEPARTMENT OF EDUCATION.”;

and in lines 14, 16, 18, 20, 22, and 25, strike “(K)”, “(L)”, “(M)”, “(N)”, “(O)”, and “(P)”, respectively, and substitute “(L)”, “(M)”, “(N)”, “(O)”, “(P)”, and “(Q)”, respectively.

On page 6, strike beginning with “AFRICAN” in line 29 down through “OTHER” in line 30.

On page 7, in line 14, strike “AFRICAN AMERICANS AND OTHER”.

On page 12, strike beginning with “WHO” in line 1 down through “OR” in line 2; and strike beginning with “WHO” in line 3 down through “OR” in line 4.

AMENDMENT NO. 6

On page 5 , after line 34, insert:

“(C) THE GOAL OF THE PROGRAM IS TO REDUCE DISEASE, DISABILITY, AND DEATH RELATED TO TOBACCO USE BY:

(1) PREVENTING THE INITIATION OF TOBACCO USE AMONG YOUNG PEOPLE;

(2) PROMOTING TOBACCO USE CESSATION AMONG YOUNG PEOPLE AND ADULTS;

(3) REDUCING NONSMOKERS’ EXPOSURE TO ENVIRONMENTAL TOBACCO SMOKE; AND

(4) IDENTIFYING AND ELIMINATING THE DISPARITIES RELATED TO TOBACCO USE AND ITS EFFECTS AMONG DIFFERENT POPULATION GROUPS.”;

and in line 35, strike “(C)” and substitute “(D)”.

On page 6, in lines 6, 8, 27, and 31 strike “(D)”, “(E)”, “(F)”, and “(G)”, respectively, and substitute “(F)”, “(G)”, “(H)”, and “(I)”, respectively; and after line 5, insert:

“(E) THE TOBACCO USE PREVENTION AND CESSATION PROGRAM COMPONENTS SHOULD BE COMPREHENSIVE, SUSTAINABLE, AND ACCOUNTABLE, AND BASED ON THE CENTERS FOR DISEASE CONTROL “BEST PRACTICES FOR COMPREHENSIVE TOBACCO CONTROL PROGRAMS” AS DETERMINED BY EVIDENCE-BASED ANALYSES.”.

AMENDMENT NO. 7

On page 6, in line 14, after “(II)” insert “EXCEPT AS OTHERWISE PROVIDED IN THIS SUBTITLE OR IN THE ANNUAL BUDGET BILL AS ENACTED,”; and in line 16, strike “, UNLESS AUTHORIZED IN THE STATE BUDGET AS ENACTED”.

On page 6 in line 21, and on page 21 in line 33, in each instance, after the second “THE” insert “PROGRAM’S”.

On page 10, strike beginning with “OR” in line 16 down through “INSTITUTIONS” in line 17.

On page 17, strike beginning with “OR” in line 21 down through “INSTITUTIONS” in line 22.

AMENDMENT NO. 8

On page 7, in line 26, strike “CANCER” and substitute “TOBACCO”; in line 27, strike “13-1104” and substitute “13-1004”; in the same line, strike “TITLE” and substitute “SUBTITLE”; and after line 34, insert:

“(II) THE NUMBER AND PERCENTAGE OF INDIVIDUALS WHO, WITHIN AN ESTABLISHED AMOUNT OF TIME BEFORE THE START OF THE BASELINE STUDY, STARTED TO SMOKE OR OTHERWISE BEGAN TO USE TOBACCO PRODUCTS, AND THE AGE AT WHICH THEY STARTED;”.

On page 8, in lines 1, 4, 6, 9, 12, 16, and 22, strike “(II)”, “(III)”, “(IV)”, “(V)”, “(VI)”, “(VII)”, and “(VIII)”, respectively, and substitute “(III)”, “(IV)”, “(V)”, “(VI)”, “(VII)”, “(VIII)”, and “(IX)”, respectively; in line 16, strike “PERSONS” and substitute “INDIVIDUALS”; in line 20, strike “FOR A SIGNIFICANT AMOUNT OF TIME”; and after line 24 insert:

“(3) IN CONDUCTING THE BASELINE TOBACCO STUDY, THE DEPARTMENT SHALL CONSIDER THE FINDINGS CONTAINED IN THE MARYLAND ADOLESCENT SURVEY AND THE YOUTH TOBACCO SURVEY, WHEN APPROPRIATE.

“(4) (I) THE MARYLAND STATE DEPARTMENT OF EDUCATION, LOCAL EDUCATION AGENCIES, AND EACH SCHOOL SELECTED TO PARTICIPATE, SHALL WORK COOPERATIVELY WITH THE DEPARTMENT IN DEVELOPING AND ADMINISTERING SURVEYS.

“(II) THE MARYLAND STATE DEPARTMENT OF EDUCATION MAY NOT DISCONTINUE THE ADMINISTRATION OF THE MARYLAND ADOLESCENT SURVEY:

1. UNLESS THE MARYLAND STATE DEPARTMENT OF EDUCATION PROVIDES A REPORT TO THE GENERAL ASSEMBLY ON THE REASONS FOR DISCONTINUING THE SURVEY; AND

2. UNTIL THE FIRST SCHOOL YEAR FOLLOWING THE SUBMISSION OF THE REPORT TO THE GENERAL ASSEMBLY.”.

On page 9 in line 6, and on page 24 in line 21, in each instance, strike “EACH YEAR”.

On page 9, strike beginning with “THE” in line 12 down through “CONDUCT” in line 13 and substitute “A METHODOLOGY OR MODEL THAT ENABLES COMPARISONS AND TREND ANALYSES TO BE MADE WITH”.

AMENDMENT NO. 9

On page 11, in line 2, strike “AND”; in line 4, after “ARTICLE” insert “; AND”

(Over)

(3) A LIST OF ENTITIES ASSISTED WITH THE GRANTS PROVIDED UNDER THIS SECTION;

and in line 8, after “(1)” insert “IN CONSULTATION WITH LOCAL HEALTH DEPARTMENTS,”.

On page 12, in line 17, after “(I)” insert “TO THE EXTENT PRACTICABLE,”; in the same line, strike “ALL”; in lines 20 and 28, in each instance, strike “PARAGRAPH” and substitute “ITEM”; in lines 21 and 27, in each instance, strike “COUNTY”; in line 26, strike “FOR THE COUNTY”; in the same line, after “DEPARTMENT” insert “IN CONSULTATION WITH THE LOCAL HEALTH DEPARTMENT”; and in line 19, strike “EVALUATE” and substitute “ASSESS”.

On page 13, after line 10, insert:

“(6) DEMONSTRATE THAT PRIORITY WAS GIVEN TO EXISTING ENTITIES, INCLUDING FEDERALLY QUALIFIED HEALTH CENTERS, THAT HAVE A DEMONSTRATED COMMITMENT AND PROVEN ABILITY TO PROVIDE TOBACCO USE PREVENTION AND CESSATION SERVICES TO UNINSURED AND UNDERINSURED RESIDENTS OF THE COUNTY;

“(7) AFTER THE FIRST YEAR OF FUNDING, IDENTIFY THE FINAL FUNDING ALLOCATIONS FOR EACH PURPOSE IDENTIFIED IN §13-1011(E) OF THIS SUBTITLE AND EACH PROGRAM IN THE PLAN;

“(8) DESCRIBE HOW THE PLAN WILL HELP REDUCE TOBACCO USE AMONG MINORITIES AND INDIVIDUALS UNDER THE AGE OF 18 YEARS, WITH PARTICULAR EMPHASIS ON HOW THE PLAN SEEKS TO ADDRESS THE RELEVANT FINDINGS AND RECOMMENDATIONS OF THE GOVERNOR’S TASK FORCE TO END SMOKING IN MARYLAND;”;

in lines 11, 15, and 19, strike “(6)”, “(7)”, and “(8)”, respectively, and substitute “(9)”, “(10)”, and “(11)”, respectively; in line 11, strike “PERSONS WHO” and substitute “ENTITIES THAT”; in line 13, strike “PERSON” and substitute “ENTITY”; in line 19, after “ANY” insert “DATA OR”; in line 24, after “CESSATION” insert “FOR APPROVAL”; and in line 31, after “UNWILLING” insert “OR”

UNABLE".

On page 14, in line 1, strike "(I)"; and in line 3, after "SHALL" insert ":

(I) ESTABLISH PROCEDURES FOR MAKING A DESIGNATION UNDER THIS SUBSECTION; AND

(II) 1.";

in line 5, strike "(II)" and substitute "2.".

On page 15, in line 3, after "COUNTY" insert ", INCLUDING MINORITY, RURAL, AND MEDICALLY UNDERSERVED GROUPS"; in line 12, strike "AND"; in line 13, after "HOSPITALS;" insert "AND

(XI) OTHER HOSPITALS AND ORGANIZATIONS IN THE STATE THAT MAY PARTICIPATE IN TOBACCO USE PREVENTION AND CESSATION ACTIVITIES IN THE COUNTY;".

AMENDMENT NO. 10

On page 16, in line 3, after "(E)" insert "EXCEPT AS PROVIDED IN SUBSECTION (F) OF THIS SECTION,"; in line 13, after "STATE" insert "AND LOCAL"; in the same line, after "SALE" insert "AND USE"; and after line 13, insert:

"(F) (1) AFTER NOTIFYING THE DEPARTMENT, A LOCAL HEALTH OFFICER MAY SHIFT A MAXIMUM OF 10 PERCENT OF A LOCAL PUBLIC HEALTH TOBACCO GRANT EACH YEAR AMONG THE PURPOSES DESCRIBED IN SUBSECTION (E) OF THIS SECTION.

(2) A LOCAL HEALTH OFFICER MAY REQUEST, AND THE SECRETARY MAY GRANT, A WAIVER FROM THE SECRETARY TO SHIFT MORE THAN 10 PERCENT OF A GRANT IN ANY YEAR.".

(Over)

AMENDMENT NO. 11

On page 17, in lines 5 and 6, strike “AND HOW THE DEPARTMENT INTENDS TO REACH EACH AUDIENCE”.

On page 17, in line 29, strike the second “AND”; and in line 33, after “ENTITY” insert “; AND”

(3) COORDINATING THE PURCHASES OF BROADCAST TIME WITH OTHER STATES AND THE DISTRICT OF COLUMBIA”.

AMENDMENT NO. 12

On page 18, strike beginning with “INCLUDING” in line 12 down through “SECTION” in line 16 and substitute “WHICH”; and after line 17, insert:

“(D) THE ADMINISTRATIVE COSTS INCURRED BY ANY ENTITY THAT RECEIVES FUNDS UNDER ANY OTHER COMPONENT OF THE PROGRAM, WHICH MAY NOT EXCEED 7 PERCENT OF THE FUNDS GRANTED ANNUALLY TO EACH ENTITY, ARE NOT INCLUDED IN THE ADMINISTRATIVE COMPONENT.”.

AMENDMENT NO. 13

On page 18, in line 27, strike “13-1113” and substitute “13-1120”; in line 30, strike “CANCER PREVENTION, IDENTIFICATION, AND TREATMENT” and substitute “MAJOR COMMUNITY HOSPITAL”; in line 31, strike “13-1107” and substitute “13-1106”; and strike lines 33 and 34 in their entirety.

On page 19, in line 3, strike “RESEARCH THAT INVOLVES FORMAL”; in line 4, strike “OF HUMANS FOR”; and in line 5, strike “TREATMENT PROTOCOLS” and substitute “TREATMENTS AND PROTOCOLS INVOLVING HUMAN SUBJECTS AND OTHER APPLICABLE MODELS FOR TESTING”; strike in their entirety lines 6 through 8, inclusive; in lines 1, 3, 9, 10, 14, 19, 24, 26, 29, 31, and 34, strike “(F)”, “(G)”, “(I)”, “(J)”, “(K)”, “(M)”, “(N)”, “(O)”, “(P)”, “(Q)”, and “(R)”, respectively, and substitute “(E)”, “(F)”, “(G)”, “(H)”, “(I)”, “(N)”, “(O)”, “(P)”, “(R)”, “(T)”, and “(U)”, respectively; strike in their entirety lines 17 and 18 and substitute:

“(J) “JOHNS HOPKINS INSTITUTIONS” MEANS THE JOHNS HOPKINS UNIVERSITY AND THE JOHNS HOPKINS HEALTH SYSTEM.

(K) “LOCAL HEALTH OFFICER” MEANS:

(1) THE HEAD OF A COUNTY HEALTH DEPARTMENT; OR

(2) A PERSON DESIGNATED BY THE DEPARTMENT UNDER §13-1111(F)
OF THIS SUBTITLE.

(L) “LOCAL PUBLIC HEALTH CANCER GRANT” MEANS A GRANT
DISTRIBUTED BY THE DEPARTMENT TO A COUNTY UNDER §§ 13-1109 THROUGH
13-1115 OF THIS SUBTITLE.

(M) “LOCAL PUBLIC HEALTH COMPONENT” MEANS THE COMPONENT OF
THE PROGRAM THAT IS ESTABLISHED UNDER §13-1109 OF THIS SUBTITLE.”;

after line 28, insert:

“(Q) “MARYLAND TELEMEDICINE NETWORK” MEANS A STATEWIDE
NETWORK AND INFRASTRUCTURE THAT WILL SUPPORT A WIDE RANGE OF
EDUCATION, PREVENTION, OUTREACH, SCREENING, TREATMENT, AND RESEARCH
PROGRAMS RELATING TO CERTAIN PUBLIC HEALTH PURPOSES THAT CAN BE
ACCESSED BY INDIVIDUALS THROUGHOUT THE STATE, INCLUDING:

(1) REGIONAL COORDINATION OF AND SUPPORT FOR INCREASING
PARTICIPATION OF DIVERSE POPULATIONS IN CLINICAL TRIALS;

(2) DEVELOPMENT OF BEST PRACTICES MODELS; AND

(3) COORDINATION OF PREVENTION AND CONTROL ACTIVITIES
AMONG PHYSICIANS AND OTHER STAKEHOLDERS IN DIFFERENT GEOGRAPHIC
AREAS OF THE STATE.”;

in line 35, strike “13-1106” and substitute “13-1108”; and after line 30, insert:

(Over)

“(S) “PREVENTION” MEANS ACTIVITIES RELATING TO EARLY DETECTION, SCREENING, AND RISK FACTOR REDUCTION.”.

On page 20, strike in their entirety lines 1 through 3, inclusive; in line 5, strike “13-1114” and substitute “13-1117”; in line 8, strike “13-1110” and substitute “13-1117”; in line 13, strike “SUBSECTION (D) OF THIS SECTION” and substitute “§ 13-1102 OF THIS SUBTITLE”; in lines 4, 6, 9, and 12, strike “(T)”, “(U)”, “(V)”, and “(W)”, respectively, and substitute “(V)”, “(W)”, “(X)”, and “(Y)”, respectively; after line 13, insert:

“(Z) “TARGETED HOSPITAL CAPACITY COMPONENT” MEANS THE COMPONENT OF THE PROGRAM THAT IS ESTABLISHED UNDER §13-1116 OF THIS SUBTITLE.

(AA) “TARGETED HOSPITAL CAPACITY GRANT” MEANS A GRANT THAT IS DISTRIBUTED BY THE DEPARTMENT TO THE UNIVERSITY OF MARYLAND MEDICAL GROUP AND THE JOHNS HOPKINS INSTITUTIONS UNDER §13-1116 OF THIS SUBTITLE.”;

after line 30, insert:

“(EE) “TREATMENT” INCLUDES CLINICAL TRIALS, TRANSPORTATION, CASE MANAGEMENT, HOSPICE CARE, AND CANCER SUPPORT GROUPS.”;

strike in their entirety lines 14 through 22, inclusive; and in lines 23, 26, 29, and 31, strike “(Y)”, “(Z)”, “(AA)”, and “(BB)”, respectively, and substitute “(BB)”, “(CC)”, “(DD)”, and “(FF)”, respectively.

On page 20 in line 8, on page 32 in lines 25, 28, and 33, and on page 35 in lines 9, 27, 31, and 34, in each instance, strike “GROUP” and substitute “INSTITUTIONS”.

On page 20 in lines 8, 27, and 31, on page 27 in line 29, on page 28 in line 13, on page 32 in lines 24, 27, and 32, and on page 33 in lines 3 and 19, in each instance, strike “SYSTEM”.

On page 20, in line 32, after “SYSTEM” insert “CORPORATION”.

On page 25, in line 26, strike “CENTER” and substitute “SYSTEM”.

On page 27 in line 31, and on page 33 in lines 5 and 8, in each instance, strike “TELEMEDICINE” and substitute “MARYLAND TELEMEDICINE”.

On page 28, in line 11, strike “(C)(2)” and substitute “(D)(2)”.

AMENDMENT NO. 14

On page 21, in line 15, strike “CANCER PREVENTION, IDENTIFICATION, AND TREATMENT” and substitute “MAJOR COMMUNITY HOSPITAL”; in line 19, after “COMPONENT;” insert:

“(6) A LOCAL PUBLIC HEALTH COMPONENT;

“(7) A TARGETED HOSPITAL CAPACITY COMPONENT;”;

in line 20, strike “(6)” and substitute “(8)”; in lines 22 and 23, strike “CANCER PREVENTION, IDENTIFICATION, AND TREATMENT” and substitute “MAJOR COMMUNITY HOSPITAL COMPONENT, THE LOCAL PUBLIC HEALTH COMPONENT, THE TARGETED HOSPITAL CAPACITY”; in line 23, after “COMPONENT” insert a comma; and in line 29, strike “PROVIDED IN PARAGRAPH (3) OF THIS SUBSECTION,” and substitute “OTHERWISE PROVIDED IN THIS SUBTITLE OR IN THE ANNUAL BUDGET BILL AS ENACTED,”.

On page 22, in lines 17 and 18, strike “CANCER PREVENTION, IDENTIFICATION, AND TREATMENT” and substitute “MAJOR COMMUNITY HOSPITAL”; and strike beginning with “CANCER” in line 19 down through the second “CARE” in line 20 and substitute “LOCAL PUBLIC HEALTH COMPONENT, THE TARGETED HOSPITAL CAPACITY”.

AMENDMENT NO. 15

On page 23, in line 24, strike “PERSONS” and substitute “INDIVIDUALS”; in line 28, strike “AND” and substitute:

“(7) THE NUMBER OF IDENTIFIABLE CANCERS WITH A HIGH INCIDENCE FOR WHICH THERE ARE:

(I) EFFECTIVE PROCEDURES FOR EARLY DETECTION; AND

(II) EFFECTIVE PROCEDURES FOR PREVENTION OR
TREATMENT AFTER EARLY DETECTION;

(8) ANY ASPECT OF TARGETED AND NONTARGETED CANCERS THAT
THE DEPARTMENT SEEKS TO MEASURE; AND”;

and in line 29, strike “(7)” and substitute “(9)”.

On page 26, in line 33, strike “PARAGRAPH” and substitute “SUBSECTION”; in line 34, strike “DEMONSTRATE” and substitute “DEMONSTRATES”; and in line 36, strike “INCLUDE” and substitute “INCLUDES”.

AMENDMENT NO. 16

On page 25, in line 7 after “DEPARTMENT” insert “, IN CONSULTATION WITH LOCAL HEALTH DEPARTMENTS,”; strike beginning with the first “BALTIMORE” in line 23 down through “COUNTY” in line 24 and substitute “THE STATE”; strike beginning with “EACH” in line 28 down through “COUNTY” in line 29 and substitute “THE STATE”; in line 30, strike “CANCER PREVENTION, IDENTIFICATION, AND TREATMENT” and substitute “MAJOR COMMUNITY HOSPITAL”; and strike beginning with “CANCER” in line 32 down through “TREATMENT” in line 33 and substitute “MAJOR COMMUNITY HOSPITAL”.

On page 26, in line 1, strike “CANCER PREVENTION, IDENTIFICATION, AND TREATMENT” and substitute “MAJOR COMMUNITY HOSPITAL”; in line 2, strike “COMMUNITY CANCER GRANTS” and substitute “A GRANT”; in line 3, after “TO” insert “THE”; in the same line, strike “HOSPITALS” and substitute “HOSPITAL”; strike beginning with “CANCER” in line 4 down through “TREATMENT” in line 5 and substitute “MAJOR COMMUNITY HOSPITAL”; in line 6, after “(F)” insert “THE”; in the same line, strike “HOSPITALS THAT RECEIVE” and substitute “HOSPITAL THAT RECEIVES”; in line 8, after “CANCERS” insert “IN ORDER TO DEVELOP PILOT PROGRAMS WHICH CAN SERVE AS MODELS FOR OTHER COMMUNITY HOSPITALS”; in line 10, strike “HOSPITALS” and substitute “HOSPITAL”; in lines 6, 10, 18, 22, 25, and 37, in each instance, strike “COMMUNITY CANCER”; in line 18, strike the second “A” and substitute “THE”; strike beginning with “IN” in line

19 down through "COUNTIES" in line 20; in line 23, strike "HOSPITALS" and substitute "HOSPITAL"; in line 28, after "(2)" insert "TO THE EXTENT PRACTICABLE,"; and in the same line, strike "ALL".

On page 27, in line 2, strike "CANCER COMMUNITY"; in lines 6 and 14, in each instance, strike "COMMUNITY CANCER"; strike beginning with the second "COMMUNITY" in line 10 down through "CANCER" in line 11; and in line 15, strike "(K)" and substitute "(F)".

On page 28 in line 17, and on page 33 in line 24, in each instance, after "(II)" insert "TO THE EXTENT PRACTICABLE".

On page 28, in line 33, after "MEDICAID" insert ", THE MARYLAND CHILDREN'S HEALTH INSURANCE PROGRAM,".

On page 28 in line 17, and on page 33 in line 24, in each instance, strike "ALL".

AMENDMENT NO. 17

On page 29, strike line 36 in its entirety.

On page 30, strike lines 1 and 2 in their entirety; in line 3, strike "(2)" and substitute "(B)"; in line 4, strike ", AS ESTABLISHED IN SECTION 2 OF THIS ACT" and substitute "IS PART OF THE PRIMARY HEALTH CARE COMPONENT"; and strike in their entirety lines 6 through 36, inclusive.

AMENDMENT NO. 18

On pages 31 and 32, strike in their entirety the lines beginning with line 1 on page 31 through line 16 on page 32 and substitute:

"(A) THERE IS A LOCAL PUBLIC HEALTH COMPONENT IN THE PROGRAM.

"(B) THE PURPOSE OF THE LOCAL PUBLIC HEALTH COMPONENT IS TO MAXIMIZE THE EFFECTIVENESS OF ANTICANCER INITIATIVES IN THE STATE BY EMPOWERING LOCAL HEALTH COALITIONS TO DEVELOP AND IMPLEMENT CANCER

PREVENTION, IDENTIFICATION, AND TREATMENT PROGRAMS FOR TARGETED CANCERS IN COORDINATION WITH THE DEPARTMENT.

(C) SUBJECT TO §§ 13-1110 THROUGH 13-1115 OF THIS SUBTITLE, THE DEPARTMENT MAY DISTRIBUTE GRANTS TO COUNTIES FOR CANCER PREVENTION, IDENTIFICATION, AND TREATMENT PROGRAMS.

(D) THE DEPARTMENT MAY NOT SPEND ANY FUNDS THAT ARE ALLOCATED TO THE LOCAL PUBLIC HEALTH COMPONENT IN THE STATE BUDGET UNTIL AFTER THE BASELINE CANCER STUDY HAS BEEN COMPLETED.

13-1110.

(A) AFTER THE BASELINE CANCER STUDY HAS BEEN COMPLETED, THE DEPARTMENT SHALL:

(1) IN CONSULTATION WITH LOCAL HEALTH DEPARTMENTS, ESTABLISH CANCER PREVENTION, IDENTIFICATION, AND TREATMENT GOALS FOR EACH COUNTY;

(2) ESTABLISH OTHER REQUIREMENTS THAT THE DEPARTMENT DETERMINES TO BE NECESSARY TO MEET THE GOALS ESTABLISHED UNDER ITEM (1) OF THIS SUBSECTION;

(3) PROVIDE FOR THE DISTRIBUTION OF LOCAL PUBLIC HEALTH CANCER GRANTS TO ELIGIBLE COUNTIES BASED ON THE FORMULA ESTABLISHED UNDER SUBSECTION (B) OF THIS SECTION; AND

(4) REPORT TO THE SENATE BUDGET AND TAXATION AND FINANCE COMMITTEES AND THE HOUSE APPROPRIATIONS AND ENVIRONMENTAL MATTERS COMMITTEES BY SEPTEMBER 1, 2000, ON THE BASELINE CANCER STUDY, THE CANCER PREVENTION, IDENTIFICATION, AND TREATMENT GOALS FOR EACH COUNTY, AND EACH COUNTY'S COMPREHENSIVE PLAN FOR CANCER PREVENTION, IDENTIFICATION, AND TREATMENT.

(B) SUBJECT TO §§ 13-1111 THROUGH 13-1115 OF THIS SUBTITLE, THE DEPARTMENT SHALL DISTRIBUTE A LOCAL PUBLIC HEALTH CANCER GRANT TO EACH COUNTY THAT IS EQUAL TO THE SUM OF:

(1) THE PRODUCT OF:

(I) ONE-HALF OF THE AMOUNT OF MONEY THAT IS ALLOCATED TO THE LOCAL PUBLIC HEALTH COMPONENT IN THE STATE BUDGET; AND

(II) THE NUMBER OF INDIVIDUALS IN THE COUNTY WHO HAVE ONE OF THE TARGETED CANCERS DIVIDED BY THE NUMBER OF INDIVIDUALS IN THE STATE WHO HAVE ONE OF THE TARGETED CANCERS; AND

(2) THE PRODUCT OF:

(I) ONE-HALF OF THE AMOUNT OF MONEY THAT IS ALLOCATED TO THE LOCAL PUBLIC HEALTH COMPONENT IN THE STATE BUDGET; AND

(II) THE NUMBER OF INDIVIDUALS IN THE COUNTY WHO DIED FROM ONE OF THE TARGETED CANCERS DURING THE PRIOR YEAR DIVIDED BY THE NUMBER OF INDIVIDUALS IN THE STATE WHO DIED FROM ONE OF THE TARGETED CANCERS DURING THE PRIOR YEAR.

13-1111.

(A) (1) SUBJECT TO THE OTHER PROVISIONS OF THIS SECTION, A LOCAL HEALTH OFFICER MAY APPLY TO THE DEPARTMENT FOR A LOCAL PUBLIC HEALTH CANCER GRANT.

(2) THE AMOUNT OF A LOCAL PUBLIC HEALTH CANCER GRANT

(Over)

SHALL BE DETERMINED BY THE DEPARTMENT USING THE FORMULA THAT IS ESTABLISHED UNDER § 13-1110 OF THIS SUBTITLE.

(B) BEFORE APPLYING FOR A LOCAL PUBLIC HEALTH CANCER GRANT, A LOCAL HEALTH OFFICER SHALL:

(1) ESTABLISH A COMMUNITY HEALTH COALITION, AS PROVIDED UNDER § 13-1113 OF THIS SUBTITLE; AND

(2) WITH THE ASSISTANCE OF THE COMMUNITY HEALTH COALITION:

(I) TO THE EXTENT PRACTICABLE, IDENTIFY EXISTING CANCER PREVENTION, IDENTIFICATION, AND TREATMENT PROGRAMS THAT RELATE TO TARGETED CANCERS IN THE COUNTY AND THAT ARE PUBLICLY FUNDED;

(II) ASSESS THE EFFECTIVENESS OF THE PUBLICLY FUNDED PROGRAMS IDENTIFIED UNDER ITEM (I) OF THIS ITEM; AND

(III) DEVELOP A COMPREHENSIVE PLAN FOR CANCER PREVENTION, IDENTIFICATION, AND TREATMENT THAT OUTLINES A STRATEGY FOR MEETING THE CANCER PREVENTION, IDENTIFICATION, AND TREATMENT GOALS AND REQUIREMENTS ESTABLISHED FOR THE COUNTY BY THE DEPARTMENT.

(C) A COMPREHENSIVE PLAN FOR CANCER PREVENTION, IDENTIFICATION, AND TREATMENT SHALL:

(1) INCLUDE A LIST OF THE MEMBERS OF THE COMMUNITY HEALTH COALITION AND THEIR ORGANIZATIONAL AFFILIATIONS;

(2) INCLUDE THE EVALUATION OF ANY PROGRAM FUNDED WITH A LOCAL PUBLIC HEALTH CANCER GRANT IN THE PRIOR YEAR;

(3) AFTER THE FIRST YEAR OF FUNDING, DEMONSTRATE THAT

PROGRESS HAS BEEN MADE TOWARD MEETING THE CANCER PREVENTION, IDENTIFICATION, AND TREATMENT GOALS ESTABLISHED BY THE DEPARTMENT IN CONSULTATION WITH THE LOCAL HEALTH DEPARTMENT;

(4) INCLUDE A BUDGET PLAN THAT PROVIDES SPECIFIC LEVELS OF FUNDING FOR EACH INITIATIVE DESCRIBED IN THE PLAN AND AN EXPLANATION AS TO HOW EACH INITIATIVE IS EXPECTED TO HELP MEET THE CANCER PREVENTION, IDENTIFICATION, AND TREATMENT GOALS AND REQUIREMENTS ESTABLISHED FOR THE COUNTY BY THE DEPARTMENT;

(5) DEMONSTRATE THAT THE COUNTY HAS MET THE BASE-YEAR FUNDING REQUIREMENT ESTABLISHED UNDER § 13-1114 OF THIS SUBTITLE;

(6) DEMONSTRATE THAT ANY EARLY DETECTION OR SCREENING PROGRAM THAT IS OR WILL BE FUNDED UNDER A LOCAL PUBLIC HEALTH CANCER GRANT PROVIDES LINKAGES TO NECESSARY TREATMENT, INCLUDING LOCAL HOSPITALS, COMMUNITY CLINICS, PHYSICIANS, AND OTHER HEALTH CARE PROVIDERS FOR INDIVIDUALS WHO:

(I) ARE DIAGNOSED WITH A TARGETED OR NONTARGETED CANCER; AND

(II) DO NOT HAVE PRIVATE HEALTH INSURANCE, ARE NOT ELIGIBLE FOR MEDICAID, THE MARYLAND CHILDREN'S HEALTH INSURANCE PROGRAM, OR MEDICARE, AND ARE OTHERWISE UNABLE TO PAY FOR TREATMENT;

(7) DEMONSTRATE THAT PRIORITY WAS GIVEN TO EXISTING ENTITIES, INCLUDING FEDERALLY QUALIFIED HEALTH CENTERS, THAT HAVE A DEMONSTRATED COMMITMENT AND PROVEN ABILITY TO PROVIDE CANCER PREVENTION, IDENTIFICATION, AND TREATMENT SERVICES TO UNINSURED AND UNDERINSURED RESIDENTS OF THE COUNTY;

(8) DESCRIBE HOW THE PLAN WILL HELP ELIMINATE THE INCIDENCE

(Over)

AND MORBIDITY RATES FOR CANCER AMONG MINORITIES AND IN RURAL AREAS, WITH PARTICULAR EMPHASIS ON HOW THE PLAN SEEKS TO ADDRESS THE FINDINGS AND RECOMMENDATIONS OF THE GOVERNOR'S TASK FORCE TO CONQUER CANCER IN MARYLAND;

(9) AFTER THE FIRST YEAR OF FUNDING, IDENTIFY ALL ENTITIES THAT RECEIVED MONEY UNDER A LOCAL PUBLIC HEALTH CANCER GRANT IN THE PRIOR YEAR AND STATE THE AMOUNT OF MONEY THAT WAS RECEIVED BY EACH ENTITY UNDER THE GRANT;

(10) AFTER THE FIRST YEAR OF FUNDING, STATE THE AMOUNT OF MONEY THAT WAS RECEIVED BY A COUNTY UNDER A LOCAL PUBLIC HEALTH CANCER GRANT IN THE PRIOR FISCAL YEAR THAT REMAINED UNSPENT AND UNOBLIGATED AT THE END OF THAT YEAR; AND

(11) CONTAIN ANY OTHER INFORMATION REQUIRED BY THE DEPARTMENT.

(D) A LOCAL HEALTH OFFICER WHO SEEKS TO OBTAIN A LOCAL PUBLIC HEALTH CANCER GRANT SHALL APPLY TO THE DEPARTMENT BY SUBMITTING A COPY OF THE COUNTY'S COMPREHENSIVE PLAN FOR CANCER PREVENTION, IDENTIFICATION, AND TREATMENT.

(E) EACH YEAR, A LOCAL HEALTH OFFICER, IN CONSULTATION WITH THE COMMUNITY HEALTH COALITION, SHALL UPDATE THE COMPREHENSIVE PLAN FOR CANCER PREVENTION, IDENTIFICATION, AND TREATMENT.

(F) (1) THE DEPARTMENT MAY DESIGNATE A PERSON OTHER THAN THE HEAD OF A COUNTY HEALTH DEPARTMENT TO COORDINATE A COUNTY'S CANCER PREVENTION, IDENTIFICATION, AND TREATMENT EFFORTS IF:

(I) THE COUNTY HEALTH DEPARTMENT IS UNWILLING OR UNABLE TO COORDINATE THESE EFFORTS;

(II) THE COUNTY HEALTH DEPARTMENT HAS BEEN

UNSUCCESSFUL IN IMPLEMENTING CANCER PREVENTION, IDENTIFICATION, AND TREATMENT INITIATIVES THAT SATISFY PERFORMANCE STANDARDS ESTABLISHED BY THE DEPARTMENT; OR

(III) THE COUNTY HEALTH DEPARTMENT LACKS SUFFICIENT STAFF OR RESOURCES TO COORDINATE THESE EFFORTS.

(2) IN CHOOSING A PERSON OTHER THAN THE HEAD OF A COUNTY HEALTH DEPARTMENT TO SERVE AS A LOCAL HEALTH OFFICER AND COORDINATE A COUNTY'S ANTICANCER EFFORTS, THE DEPARTMENT SHALL:

(I) ADOPT PROCEDURES FOR MAKING A DESIGNATION UNDER THIS SUBSECTION; AND

(II) 1. ISSUE A REQUEST FOR PROPOSALS; OR
2. COORDINATE THE COUNTY'S ANTICANCER PROGRAMS FROM WITHIN THE DEPARTMENT.

13-1112.

(A) THE LOCAL HEALTH OFFICERS OF TWO OR MORE COUNTIES MAY JOIN TOGETHER TO APPLY AS A REGION FOR A LOCAL PUBLIC HEALTH CANCER GRANT.

(B) THE DEPARTMENT MAY REQUIRE THAT TWO OR MORE COUNTIES JOIN TOGETHER AS A REGION TO APPLY FOR A LOCAL PUBLIC HEALTH CANCER GRANT IF:

(1) IT WOULD BE COST-EFFECTIVE TO FUND CANCER PREVENTION, IDENTIFICATION, AND TREATMENT PROGRAMS FOR TARGETED CANCERS ON A REGIONAL BASIS; AND

(2) IT WOULD SERVE THE PUBLIC HEALTH INTERESTS OF THE

(Over)

COUNTIES TO FUND CANCER PREVENTION, IDENTIFICATION, AND TREATMENT PROGRAMS FOR TARGETED CANCERS ON A REGIONAL BASIS.

(C) THE AMOUNT OF A LOCAL PUBLIC HEALTH CANCER GRANT THAT IS DISTRIBUTED TO A REGION UNDER THIS SECTION SHALL BE EQUAL TO THE SUM OF THE LOCAL PUBLIC HEALTH CANCER GRANTS THAT OTHERWISE WOULD HAVE BEEN DISTRIBUTED TO EACH COUNTY UNDER THE FORMULA ESTABLISHED UNDER § 13-1110 OF THIS SUBTITLE.

(D) IF THE LOCAL HEALTH OFFICERS OF TWO OR MORE COUNTIES CHOOSE TO JOIN TOGETHER TO APPLY AS A REGION FOR A LOCAL PUBLIC HEALTH CANCER GRANT OR ARE REQUIRED TO DO SO BY THE DEPARTMENT, THE LOCAL HEALTH OFFICERS SHALL ACT JOINTLY TO:

(1) DEVELOP A COMPREHENSIVE PLAN FOR CANCER PREVENTION, IDENTIFICATION, AND TREATMENT AS REQUIRED UNDER § 13-1111(B) OF THIS SUBTITLE;

(2) ESTABLISH A COMMUNITY HEALTH COALITION AS PROVIDED UNDER § 13-1113 OF THIS SUBTITLE;

(3) DEMONSTRATE THAT THE BASE-YEAR FUNDING REQUIREMENT ESTABLISHED UNDER § 13-1114 OF THIS SUBTITLE HAS BEEN MET; AND

(4) OTHERWISE SATISFY THE REQUIREMENTS OF §§ 13-1109 THROUGH 13-1115 OF THIS SUBTITLE.

13-1113.

(A) THE MEMBERSHIP OF A COMMUNITY HEALTH COALITION ESTABLISHED UNDER § 13-1111(B) OF THIS SUBTITLE SHALL REFLECT THE DEMOGRAPHICS OF THE COUNTY AND MAY CONSIST OF:

(1) REPRESENTATIVES OF:

(I) COMMUNITY-BASED GROUPS THAT, TAKEN TOGETHER, ARE FAMILIAR WITH ALL OF THE DIFFERENT COMMUNITIES AND CULTURES IN THE COUNTY INCLUDING MINORITY, RURAL, AND MEDICALLY UNDERSERVED GROUPS;

(II) A LOCAL MANAGEMENT BOARD ESTABLISHED UNDER ARTICLE 49D, § 11 OF THE CODE;

(III) LOCAL HOSPITALS, CLINICS, PHYSICIANS, AND OTHER HEALTH CARE PROVIDERS;

(IV) LOCAL RELIGIOUS ORGANIZATIONS;

(V) INSTITUTIONS OF HIGHER EDUCATION; AND

(VI) OTHER HOSPITALS OR ORGANIZATIONS IN THE STATE THAT MAY PARTICIPATE IN CANCER PREVENTION, IDENTIFICATION, AND TREATMENT ACTIVITIES IN THE COUNTY;

(2) ANY OTHER PERSON THAT THE LOCAL HEALTH OFFICER BELIEVES WOULD HELP THE COUNTY MEET THE CANCER PREVENTION, IDENTIFICATION, AND TREATMENT GOALS AND REQUIREMENTS ESTABLISHED FOR THE COUNTY BY THE DEPARTMENT; AND

(3) ANY OTHER PERSON NECESSARY TO ENSURE THAT THE COALITION IS REPRESENTATIVE OF THE COMMUNITY IT SERVES.

13-1114.

(A) (1) BEFORE RECEIVING A LOCAL PUBLIC HEALTH CANCER GRANT, A LOCAL HEALTH OFFICER SHALL SUBMIT TO THE DEPARTMENT AN INVENTORY OF ALL EXISTING PUBLICLY FUNDED CANCER PREVENTION, IDENTIFICATION, AND TREATMENT PROGRAMS THAT RELATE TO TARGETED CANCERS IN THE COUNTY

(Over)

THAT WERE IDENTIFIED UNDER § 13-1111(B) OF THIS SUBTITLE.

(2) THE INVENTORY SHALL SPECIFY THE AMOUNT OF COUNTY FUNDS THAT ARE BEING SPENT ON EACH OF THE PROGRAMS INCLUDED IN THE INVENTORY.

(B) THE LEVEL OF FUNDING SPECIFIED UNDER SUBSECTION (A)(2) OF THIS SECTION SHALL BE THE COUNTY'S BASE-YEAR FUNDING FOR CANCER PREVENTION, IDENTIFICATION, AND TREATMENT PROGRAMS THAT RELATE TO TARGETED CANCERS.

(C) A LOCAL PUBLIC HEALTH CANCER GRANT MAY NOT BE USED TO SUPPLANT A COUNTY'S BASE-YEAR FUNDING FOR CANCER PREVENTION, IDENTIFICATION, AND TREATMENT PROGRAMS THAT RELATE TO TARGETED CANCERS.

(D) THE DEPARTMENT MAY NOT DISTRIBUTE A LOCAL PUBLIC HEALTH CANCER GRANT TO A COUNTY UNLESS THE DEPARTMENT DETERMINES THAT THE COUNTY WILL SPEND, IN THE APPLICABLE FISCAL YEAR, AT LEAST ITS BASE-YEAR FUNDING FOR CANCER PREVENTION, IDENTIFICATION, AND TREATMENT PROGRAMS THAT RELATE TO TARGETED CANCERS.

13-1115.

(A) THE DEPARTMENT SHALL REVIEW A COMPREHENSIVE PLAN FOR CANCER PREVENTION, IDENTIFICATION, AND TREATMENT SUBMITTED UNDER § 13-1111(C) OF THIS SUBTITLE AND DETERMINE WHETHER:

(1) THE PLAN ADDRESSES THE GOALS AND REQUIREMENTS ESTABLISHED BY THE DEPARTMENT UNDER § 13-1110 OF THIS SUBTITLE; AND

(2) ALL OTHER REQUIREMENTS OF §§ 13-1109 THROUGH 13-1115 OF THIS SUBTITLE HAVE BEEN MET.

(B) THE DEPARTMENT MAY NOT DISTRIBUTE A COUNTY'S SHARE OF

MONEY FOR A LOCAL PUBLIC HEALTH CANCER GRANT, AS PROVIDED UNDER § 13-1110 OF THIS SUBTITLE, IF THE DEPARTMENT DETERMINES THAT THE REQUIREMENTS OF SUBSECTION (A) OF THIS SECTION HAVE NOT BEEN MET.”.

AMENDMENT NO. 19

On page 32, in line 17, strike “13-1110.” and substitute “13-1116.”; and after line 17, insert:

“(A) THERE IS A TARGETED HOSPITAL CAPACITY COMPONENT.

“(B) THE PURPOSE OF THE TARGETED HOSPITAL CAPACITY COMPONENT IS TO ENHANCE THE CAPACITY FOR CANCER CARE AT HOSPITALS WHICH SERVE THE RESIDENTS OF PRINCE GEORGE’S AND MONTGOMERY COUNTIES THROUGH COOPERATIVE AGREEMENTS WITH THE UNIVERSITY OF MARYLAND MEDICAL GROUP OR THE JOHNS HOPKINS INSTITUTIONS.

“(C) THE DEPARTMENT MAY DISTRIBUTE A TARGETED HOSPITAL CAPACITY GRANT TO THE UNIVERSITY OF MARYLAND MEDICAL GROUP AND THE JOHNS HOPKINS INSTITUTIONS TO FUND INITIATIVES TO ENHANCE THE CAPACITY FOR CANCER PREVENTION, IDENTIFICATION, AND TREATMENT IN AT LEAST ONE HOSPITAL IN EACH OF PRINCE GEORGE’S AND MONTGOMERY COUNTIES AND AT ANY OTHER HOSPITAL THAT SERVES RESIDENTS OF THE COUNTIES IN ORDER TO REDUCE CANCER MORBIDITY AND MORTALITY AND MAXIMIZE THE EFFECTIVENESS OF STATEWIDE ANTICANCER INITIATIVES.

“(D) THE TOTAL AMOUNT OF FUNDS AVAILABLE FOR GRANTS SHALL BE AS PROVIDED IN THE STATE BUDGET.

“(E) BEFORE APPLYING FOR A TARGETED HOSPITAL CAPACITY GRANT, THE UNIVERSITY OF MARYLAND MEDICAL GROUP AND THE JOHNS HOPKINS INSTITUTIONS SHALL COORDINATE INITIATIVES TO MAXIMIZE THE USE OF THE FUNDS, TO ELIMINATE UNNECESSARY DUPLICATION OF EFFORTS, AND TO ENSURE THAT RESIDENTS OF BOTH COUNTIES ARE SERVED.

(Over)

(F) BEFORE APPLYING FOR A TARGETED HOSPITAL CAPACITY GRANT, AN INSTITUTION SHALL SUBMIT AS PART OF THE PLAN FOR THE INSTITUTION, AS REQUIRED UNDER §13-1118 OF THIS SUBTITLE FOR THE UNIVERSITY OF MARYLAND MEDICAL GROUP AND UNDER §13-1119 OF THIS SUBTITLE FOR THE JOHNS HOPKINS INSTITUTIONS, THE FOLLOWING:

(1) DETAILS AS TO HOW THE GRANT WILL BE SPENT AND HOW IT WILL BE USED TO ACHIEVE THE CANCER GOALS ESTABLISHED BY THE DEPARTMENT;

(2) TO THE EXTENT PRACTICABLE, AN INVENTORY OF CANCER ACTIVITIES RELATING TO THE TARGETED CANCERS THAT ARE CURRENTLY BEING CONDUCTED AT ANY HOSPITAL WITH WHICH THE INSTITUTION HAS FORMED AN AGREEMENT IN ORDER TO ENHANCE CANCER CARE AT THAT FACILITY;

(3) SPECIFICATIONS OF THE TYPES AND NATURE OF THE ACTIVITIES, EQUIPMENT, OR SERVICES TO BE FUNDED TO ENHANCE PREVENTION, EDUCATION, OUTREACH, SCREENING, DIAGNOSIS, OR TREATMENT OF THE TARGETED CANCERS; AND

(4) ANY OTHER INFORMATION THAT IS REQUIRED BY THE DEPARTMENT.

(G) THE DEPARTMENT MAY NOT DISTRIBUTE A TARGETED HOSPITAL CAPACITY GRANT, UNLESS THE DEPARTMENT FIRST DETERMINES THAT:

(1) THE INFORMATION SUBMITTED IN ACCORDANCE WITH SUBSECTION (F) OF THIS SECTION IS CONSISTENT WITH THE INSTITUTION'S PLAN AS REQUIRED FOR THE UNIVERSITY OF MARYLAND MEDICAL GROUP UNDER § 13-1118 OF THIS SUBTITLE AND FOR THE JOHNS HOPKINS INSTITUTIONS UNDER § 13-1119 OF THIS SUBTITLE;

(2) THE INSTITUTION AND THE HOSPITAL WITH WHICH THE INSTITUTION HAS FORMED AN AGREEMENT WILL NOT USE ANY PART OF THE

GRANT TO SUPPLANT EXISTING FUNDING FOR CANCER ACTIVITIES OR ANY OTHER TYPE OF CURRENT EXPENDITURES BY THE ENTITIES;

(3) THE GRANT WILL BE USED TO FUND CANCER ACTIVITIES, EQUIPMENT, OR SERVICES THAT RELATE TO TARGETED CANCERS;

(4) THE INSTITUTION HAS EXECUTED AN AGREEMENT WITH ALL THE APPLICABLE HOSPITALS; AND

(5) THE INSTITUTION SATISFIES ANY OTHER REQUIREMENT ESTABLISHED BY THE DEPARTMENT AS A CONDITION OF RECEIVING THE GRANT.

(H) THE DEPARTMENT SHALL ANNUALLY EVALUATE THE EFFICIENCY AND EFFECTIVENESS OF INITIATIVES FUNDED BY A TARGETED HOSPITAL CAPACITY GRANT.

(I) IN ORDER TO EXPEDITE IMPLEMENTATION ON A STATEWIDE BASIS OF THE MARYLAND TELEMEDICINE NETWORK, AS ESTABLISHED IN ACCORDANCE WITH § 13-1118(A) OF THIS SUBTITLE, THE UNIVERSITY OF MARYLAND MEDICAL GROUP AND THE OFFICE OF THE GOVERNOR SHALL DETERMINE FUNDING SOURCES, SUCH AS THE NET.WORK.MARYLAND PROGRAM, TO SUPPORT EXPANSION OF THE MARYLAND TELEMEDICINE NETWORK, INCLUDING TELEMEDICINE LINKAGES, TO PRINCE GEORGE'S AND MONTGOMERY COUNTIES AND OTHER AREAS OF THE STATE THAT ARE NOT INCLUDED IN THE INITIAL PHASE OF THE MARYLAND TELEMEDICINE NETWORK.

13-1117."

AMENDMENT NO. 20

On page 29, in line 7, after "(2)" insert "CONSISTENT WITH FEDERAL LAW,".

On page 29 in line 11, on page 34 in line 24, and on page 37 in line 1, in each instance, strike "OWNERSHIP OR OTHER".

(Over)

On page 29 in line 8, on page 34 in line 21, and on page 36 in line 36, in each instance, after “HYGIENE,” insert “WHICH SHALL CONSULT WITH”.

On page 29 in line 9, on page 34 in line 22, and on page 36 in line 37, in each instance, strike the first comma.

On page 29 in line 10, on page 34 in line 23, and on page 36 in line 38, in each instance, after “CORPORATION” insert a comma.

On page 29 in line 14, on page 34 in line 27, and on page 37 in line 4, in each instance, strike “AND”.

On page 29 after line 14, on page 34 after line 27, and on page 37 after line 4, in each instance, insert:

“(II) TO THE EXTENT CONSISTENT WITH STATE LAW, THE APPLICATION OF THE EXISTING INTELLECTUAL PROPERTY POLICIES OF THE INSTITUTION; AND”;

On page 29 in line 15, on page 34 in line 28, and on page 37 in line 5, in each instance, strike “(II)” and substitute “(III)”; and in the same lines, in each instance, strike “PROTOCOL” and substitute “PLAN”.

On page 29, in line 15, after “OF” insert “SUCCESSFUL”; in line 26, strike “(A)” and substitute “(D)”; and in line 29, strike “(D)(2)” and substitute “(F)(2)”.

On page 32, in line 29, strike “13-1111” and substitute “13-1118”; in the same line, strike “13-1112” and substitute “13-1119”; and after line 37, insert:

“(G) THE UNIVERSITY OF MARYLAND MEDICAL GROUP AND THE JOHNS HOPKINS INSTITUTIONS SHALL COORDINATE INITIATIVES TO MAXIMIZE THE USE OF THE FUNDS AND TO ELIMINATE UNNECESSARY DUPLICATION OF EFFORTS.”.

On page 33, in line 13, strike “AND”; in line 15, after “FACILITIES” insert “; AND”

(6) THE COORDINATION OF CARE AMONG EXISTING PRACTITIONERS AND HOSPITALS”.

On page 33 in line 35, and on page 36 in line 15, in each instance, after “TARGETED” insert “OR NONTARGETED”.

On page 35, in line 5, strike “(D)” and substitute “(C)”.

On page 36, in line 3, after “(II)” insert “TO THE EXTENT PRACTICABLE,”; and in line 35, after “(2)” insert “CONSISTENT WITH FEDERAL LAW,”.

AMENDMENT NO. 21

On page 33 in line 1, strike “13-1111.” and substitute “13-1118.”.

On page 35 in line 8, strike “13-1112.” and substitute “13-1119.”.

On page 37 in line 21, strike “13-1113.” and substitute “13-1120.”.

On page 38 in line 1, strike “13-1114.” and substitute “13-1121.”.

On page 39, in line 25, strike “IN THIS SUBSECTION” and substitute “IN SUBSECTION (D) OF THIS SECTION”.

On page 40, in line 15, strike “PRIMARY HEALTH CARE” and substitute “LOCAL PUBLIC HEALTH CANCER”; and in line 16, strike “COMMUNITY CANCER” and substitute “TARGETED HOSPITAL CAPACITY”.

On page 43, in lines 22 and 29, in each instance, strike “AREA” and substitute “PORZION OF A COUNTY”.

AMENDMENT NO. 22

On page 37, strike beginning with "INCLUDING" in line 28 down through "SECTION" in line 33 and substitute "WHICH"; and after line 34 insert:

"(D) THE ADMINISTRATIVE COSTS INCURRED BY ANY ENTITY THAT RECEIVES FUNDS UNDER ANY OTHER COMPONENT OF THE PROGRAM, WHICH MAY NOT EXCEED 7 PERCENT OF THE FUNDS GRANTED ANNUALLY TO EACH ENTITY, ARE NOT INCLUDED IN THE ADMINISTRATIVE COMPONENT."

AMENDMENT NO. 23

On page 46, in line 2, strike "3" and substitute "4"; in the same line, strike "2003" and substitute "2004".