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By: **Senators Hollinger, Blount, Bromwell, Forehand, Hoffman, Kelley,  
Lawlah, Roesser, Ruben, and Sfikas**

Introduced and read first time: January 26, 2001  
Assigned to: Economic and Environmental Affairs

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A BILL ENTITLED

1 AN ACT concerning

2 **Health Care - Programs and Facilities - Pain Management**

3 FOR the purpose of establishing a State Advisory Council on Pain Management;  
4 specifying the membership, terms, and purpose of the Advisory Council;  
5 requiring the Advisory Council to issue certain reports on or before certain  
6 dates; requiring certain health care facilities to establish certain procedures for  
7 the routine monitoring of patient pain; requiring the Department of Health and  
8 Mental Hygiene to adopt certain regulations; providing for the termination of a  
9 portion of this Act; generally relating to a State Advisory Council on Pain  
10 Management; and generally relating to the monitoring of patient pain by certain  
11 health care facilities.

12 BY adding to  
13 Article - Health - General  
14 Section 13-1601 through 13-1605, inclusive, to be under the new subtitle  
15 "Subtitle 16. Advisory Council on Pain Management"; and 19-348.1  
16 Annotated Code of Maryland  
17 (2000 Replacement Volume)

18 Preamble

19 WHEREAS, Estimates indicate that as many as 34 million people nationwide  
20 suffer from chronic intractable pain; and

21 WHEREAS, Experts acknowledge that patients may be victims of inadequate  
22 pain management as their needs are not met with proper treatment; and

23 WHEREAS, Not only is chronic intractable pain a life debilitating condition, it is  
24 a costly epidemic facing our nation; and

25 WHEREAS, The field of medicine is constantly evolving, and continuing  
26 education in pain management is essential to ensure a patient is receiving the best  
27 care possible; and

1 WHEREAS, State law and policy could play a role in facilitating effective pain  
2 management, thus serving the needs of the citizens of the State; now, therefore,

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

5 **Article - Health - General**

6 SUBTITLE 16. ADVISORY COUNCIL ON PAIN MANAGEMENT.

7 13-1601.

8 THERE IS A STATE ADVISORY COUNCIL ON PAIN MANAGEMENT.

9 13-1602.

10 (A) (1) THE ADVISORY COUNCIL CONSISTS OF 24 MEMBERS.

11 (2) OF THE 24 MEMBERS:

12 (I) ONE SHALL BE A MEMBER OF THE SENATE OF MARYLAND  
13 APPOINTED BY THE PRESIDENT OF THE SENATE;

14 (II) ONE SHALL BE A MEMBER OF THE HOUSE OF DELEGATES  
15 APPOINTED BY THE SPEAKER OF THE HOUSE; AND

16 (III) 22 SHALL BE APPOINTED BY THE GOVERNOR. OF THE 22  
17 MEMBERS APPOINTED BY THE GOVERNOR:

18 1. ONE SHALL BE A REPRESENTATIVE OF THE AARP;

19 2. ONE SHALL BE A REPRESENTATIVE OF THE ATTORNEY  
20 GENERAL;

21 3. ONE SHALL BE AN INDIVIDUAL WITH KNOWLEDGE AND  
22 EXPERTISE IN THE FIELD OF BIOETHICS;

23 4. ONE SHALL BE A REPRESENTATIVE OF THE BOARD OF  
24 PHYSICIAN QUALITY ASSURANCE;

25 5. ONE SHALL BE A REPRESENTATIVE OF THE DEPARTMENT  
26 OF AGING;

27 6. ONE SHALL BE A REPRESENTATIVE OF THE DEPARTMENT  
28 OF HEALTH AND MENTAL HYGIENE;

29 7. ONE SHALL BE A REPRESENTATIVE OF THE HEALTH CARE  
30 FACILITIES ASSOCIATION OF MARYLAND;

31 8. ONE SHALL BE A REPRESENTATIVE OF THE HOSPICE  
32 NETWORK OF MARYLAND;

- 1   9.       ONE SHALL BE A REPRESENTATIVE OF THE JOHNS  
2 HOPKINS SCHOOL OF MEDICINE;
- 3   10.       ONE SHALL BE A REPRESENTATIVE OF A MANAGED CARE  
4 ORGANIZATION IN MARYLAND;
- 5   11.       ONE SHALL BE A REPRESENTATIVE OF THE ASSOCIATION  
6 OF MARYLAND HOSPITALS AND HEALTH SYSTEMS;
- 7   12.       ONE SHALL BE A REPRESENTATIVE OF THE MARYLAND  
8 NURSES ASSOCIATION;
- 9   13.       ONE SHALL BE A REPRESENTATIVE OF THE MARYLAND  
10 ASSOCIATION OF NURSE ANESTHETISTS;
- 11    14.       ONE SHALL BE A REPRESENTATIVE OF THE MARYLAND  
12 PATIENT ADVOCACY GROUP;
- 13    15.       THREE SHALL BE REPRESENTATIVES OF THE MEDICAL  
14 AND CHIRURGICAL FACULTY OF MARYLAND, SPECIFICALLY:
- 15    A.       A PEDIATRICIAN;
- 16    B.       A GERIATRICIAN; AND
- 17    C.       AN ANESTHESIOLOGIST;
- 18    16.       ONE SHALL BE A REPRESENTATIVE OF THE MID ATLANTIC  
19 NONPROFIT HEALTH AND HOUSING ASSOCIATION;
- 20    17.       ONE SHALL BE A REPRESENTATIVE OF THE MARYLAND  
21 PHARMACISTS ASSOCIATION;
- 22    18.       ONE SHALL BE A REPRESENTATIVE OF THE UNIVERSITY  
23 OF MARYLAND SCHOOL OF LAW;
- 24    19.       ONE SHALL BE A REPRESENTATIVE OF THE UNIVERSITY  
25 OF MARYLAND SCHOOL OF MEDICINE; AND
- 26    20.       ONE SHALL BE A REPRESENTATIVE OF THE UNITED  
27 SENIORS OF MARYLAND.
- 28       (B)       (1)       THE TERM OF A MEMBER IS 2 YEARS.
- 29    (2)       IF A VACANCY OCCURS DURING THE TERM OF A MEMBER, THE  
30 GOVERNOR SHALL APPOINT A SUCCESSOR WHO WILL SERVE ONLY FOR THE REST OF  
31 THE TERM AND UNTIL ANOTHER SUCCESSOR IS APPOINTED AND QUALIFIES.
- 32       (C)       THE GOVERNOR MAY REMOVE A MEMBER FOR INCOMPETENCE OR  
33 MISCONDUCT.

1 13-1603.

2 THE ADVISORY COUNCIL SHALL ELECT A CHAIRMAN FROM AMONG THE  
3 MEMBERS OF THE ADVISORY COUNCIL.

4 13-1604.

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

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

9 (C) A MEMBER OF THE ADVISORY COUNCIL:

10 (1) MAY NOT RECEIVE COMPENSATION; BUT

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

13 (D) THE SECRETARY SHALL DESIGNATE THE STAFF NECESSARY TO CARRY  
14 OUT THIS SUBTITLE.

15 13-1605.

16 (A) THE PURPOSE OF THE ADVISORY COUNCIL SHALL BE TO PROVIDE ADVICE  
17 AND RECOMMENDATIONS WITH RESPECT TO PAIN MANAGEMENT POLICY,  
18 INCLUDING THE FOLLOWING:

19 (1) ACUTE AND CHRONIC PAIN MANAGEMENT TREATMENT PRACTICES  
20 BY HEALTH CARE PROVIDERS IN MARYLAND;

21 (2) STATE STATUTES AND REGULATIONS RELATING TO PAIN  
22 MANAGEMENT THERAPIES;

23 (3) THE SANCTION AND USE OF ALTERNATIVE THERAPIES;

24 (4) ACUTE AND CHRONIC PAIN MANAGEMENT EDUCATION PROVIDED  
25 BY MEDICAL, NURSING, PHARMACY, AND DENTAL SCHOOLS IN THIS STATE;

26 (5) ACUTE AND CHRONIC PAIN MANAGEMENT NEEDS OF BOTH ADULTS  
27 AND CHILDREN;

28 (6) DEVELOPMENT OF A PAIN MANAGEMENT RESOURCE COMPENDIUM  
29 AND A PALLIATIVE CARE HOT LINE; AND

30 (7) OTHER ISSUES RELATING TO PAIN MANAGEMENT THAT THE  
31 ADVISORY COUNCIL DEEMS APPROPRIATE.

32 (B) (1) ON OR BEFORE SEPTEMBER 30, 2002, THE ADVISORY COUNCIL SHALL  
33 ISSUE AN INTERIM REPORT TO THE GENERAL ASSEMBLY, IN ACCORDANCE WITH §

1 2-1246 OF THE STATE GOVERNMENT ARTICLE, THAT INCLUDES RECOMMENDATIONS  
2 ON PAIN MANAGEMENT ISSUES IN MARYLAND.

3 (2) ON OR BEFORE SEPTEMBER 30, 2003, THE ADVISORY COUNCIL SHALL  
4 ISSUE A FINAL REPORT TO THE GENERAL ASSEMBLY, IN ACCORDANCE WITH § 2-1246  
5 OF THE STATE GOVERNMENT ARTICLE, THAT INCLUDES RECOMMENDATIONS ON  
6 PAIN MANAGEMENT ISSUES IN MARYLAND.

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

9 **Article - Health - General**

10 19-348.1.

11 (A) EACH HEALTH CARE FACILITY SHALL PROVIDE FOR THE ROUTINE  
12 MONITORING OF PATIENT PAIN BY ESTABLISHING AND MAINTAINING POLICIES AND  
13 PROCEDURES FOR:

14 (1) INQUIRING WHETHER A PATIENT IS IN PAIN;

15 (2) ASKING A PATIENT TO RATE THE PATIENT'S DEGREE OF PAIN FOR A  
16 SPECIFIED PERIOD OF TIME AND TO RECORD THE PATIENT'S RESPONSES; AND

17 (3) ROUTINELY RECORDING LEVELS OF PAIN INTENSITY ON PATIENT  
18 CHARTS.

19 (B) THE DEPARTMENT SHALL ADOPT REGULATIONS TO IMPLEMENT  
20 SUBSECTION (A) OF THIS SECTION AFTER CONSULTING WITH, AT A MINIMUM:

21 (1) THE BOARD OF PHYSICIAN QUALITY ASSURANCE;

22 (2) THE HEALTH CARE FACILITIES ASSOCIATION OF MARYLAND;

23 (3) THE HOSPICE NETWORK OF MARYLAND;

24 (4) THE ASSOCIATION OF MARYLAND HOSPITALS AND HEALTH  
25 SYSTEMS;

26 (5) THE MEDICAL AND CHIRURGICAL FACULTY OF MARYLAND;

27 (6) THE MARYLAND NURSES ASSOCIATION; AND

28 (7) THE MARYLAND PHARMACISTS ASSOCIATION.

29 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect  
30 October 1, 2001. Section 1 of this Act shall remain effective for a period of 2 years and,  
31 at the end of September 30, 2003, with no further action required by the General  
32 Assembly, Section 1 of this Act shall be abrogated and of no further force and effect.