
By: **Senators Exum, Astle, Currie, Dorman, Kasemeyer, Lawlah, McFadden,
and Teitelbaum**

Introduced and read first time: January 31, 2002

Assigned to: Finance

Committee Report: Favorable with amendments

Senate action: Adopted

Read second time: March 26, 2002

CHAPTER _____

1 AN ACT concerning

2 **Maryland Health Care Foundation - Health Disparities**

3 FOR the purpose of authorizing the Maryland Health Care Foundation to provide
4 financial support to programs that ~~eliminate~~ reduce health disparities for
5 Marylanders; ~~requiring that the Foundation promote public awareness of the~~
6 ~~need to provide certain care for Marylanders without health insurance and the~~
7 ~~need to eliminate health disparities associated with poverty, gender, and race;~~
8 requiring the Foundation to develop certain criteria for awarding grants to
9 programs addressing health care disparities; requiring that the Foundation
10 consider a certain geographical balance and that the geographical balance
11 consider certain provisions; and generally relating to the Maryland Health Care
12 Foundation.

13 BY repealing and reenacting, with amendments,
14 Article - Health - General
15 Section 20-502, ~~20-506(a)~~, 20-507(a), and 20-508
16 Annotated Code of Maryland
17 (2000 Replacement Volume and 2001 Supplement)

18 BY repealing and reenacting, with amendments,
19 Article - Health - General
20 Section 20-506(a)
21 Annotated Code of Maryland
22 (2000 Replacement Volume and 2001 Supplement)
23 (As enacted by Chapters 134 and 135 of the Acts of the General Assembly of

1 **Article - Health - General**

2 20-502.

3 (A) There is a nonprofit Maryland Health Care Foundation established to:
 4 ~~[promote public awareness of the need to provide more timely and cost effective care~~
 5 ~~for Marylanders without health insurance and to] receive moneys that can be used to~~
 6 ~~provide financial support to programs that expand access to health care services for~~
 7 ~~uninsured AND ELIMINATE HEALTH DISPARITIES FOR Marylanders.~~

8 (B) ~~THE MARYLAND HEALTH CARE FOUNDATION SHALL PROMOTE PUBLIC~~
 9 ~~AWARENESS OF THE NEED TO:~~

10 ~~(1) PROVIDE MORE TIMELY AND COST EFFECTIVE CARE FOR~~
 11 ~~MARYLANDERS WITHOUT HEALTH INSURANCE; AND~~

12 ~~(2) ELIMINATE HEALTH DISPARITIES ASSOCIATED WITH POVERTY,~~
 13 ~~GENDER, AND RACE.~~

14 (1) PROMOTE PUBLIC AWARENESS OF THE NEED TO PROVIDE MORE
 15 TIMELY AND COST EFFECTIVE CARE FOR MARYLANDERS WITHOUT HEALTH
 16 INSURANCE; AND

17 (2) RECEIVE MONEYS THAT CAN BE USED TO PROVIDE FINANCIAL
 18 SUPPORT TO PROGRAMS THAT:

19 (I) EXPAND ACCESS TO HEALTH CARE SERVICES FOR UNINSURED
 20 AND UNDERINSURED MARYLANDERS; AND

21 (II) REDUCE HEALTH DISPARITIES FOR MARYLANDERS.

22 20-506.

23 (a) The Foundation shall:

24 (1) Solicit and accept any gift, grant, legacy, or endowment of money,
 25 including in-kind services, from the federal government, State government, local
 26 government, or any private source in furtherance of the Foundation;

27 (2) Provide grants to programs that:

28 (i) Promote public awareness of the need to provide more timely
 29 and cost-effective care for uninsured Marylanders ~~AND TO ELIMINATE REDUCE~~
 30 HEALTH CARE DISPARITIES ASSOCIATED WITH POVERTY, GENDER, AND RACE;

31 (ii) Expand access to health care services for uninsured individuals;
 32 or

33 (iii) Provide or subsidize health insurance coverage for uninsured
 34 individuals;

- 1 (3) Study the feasibility and cost-effectiveness of providing health
2 insurance coverage through the private market to uninsured children and their
3 families as part of the program established under § 15-301 of this article;
- 4 (4) Develop programs for sponsorship by corporate and business
5 organizations or private individuals;
- 6 (5) Develop criteria for awarding grants to health care delivery
7 programs; ~~THAT MAY INCLUDE PROGRAMS ADDRESSING HEALTH CARE DISPARITIES;~~
8 ~~IN~~ insurance coverage programs; or corporate sponsorship programs;
- 9 (6) Develop criteria for prioritizing programs to be supported;
- 10 (7) Develop criteria for evaluating the effectiveness of programs
11 receiving grants;
- 12 (8) Make, execute, and enter into any contract or other legal instrument;
- 13 (9) Receive appropriations as provided in the State budget;
- 14 (10) Lease and maintain an office at a place within the State that the
15 Foundation designates;
- 16 (11) Adopt bylaws for the regulation of its affairs and the conduct of its
17 business;
- 18 (12) Take any other action necessary to carry out the purposes of the
19 Foundation; and
- 20 (13) Report annually to the Governor and, subject to § 2-1246 of the State
21 Government Article, to the General Assembly, on its activities during the preceding
22 year, including an evaluation of the effectiveness of funded programs, together with
23 any recommendations or requests deemed appropriate to further the purposes of the
24 Foundation.
- 25 20-507.
- 26 (a) In developing the criteria for awarding grants to health care delivery
27 programs, ~~PROGRAMS ADDRESSING HEALTH CARE DISPARITIES;~~ insurance coverage
28 programs, or corporate sponsorship programs, the Foundation may consider activities
29 that:
- 30 (1) Provide primary, preventive, and specialty health care services to
31 uninsured Marylanders in a more timely and cost-effective manner;
- 32 (2) Provide assistance to community programming for improving health
33 status by enhancing access to health care services for uninsured individuals AND FOR
34 ~~ELIMINATING REDUCING~~ REDUCING HEALTH CARE DISPARITIES;
- 35 (3) Publish or produce educational materials on the [problem]
36 PROBLEMS of uninsured individuals AND HEALTH CARE DISPARITIES;

1 (4) Provide educational scholarships or training; or

2 (5) Foster the creation of additional health care delivery programs to
3 meet the health care needs of uninsured individuals AND ADDRESS HEALTH CARE
4 DISPARITIES.

5 20-508.

6 (A) [To the extent feasible, the] THE Foundation shall consider geographical
7 balance BY COUNTY AND REGION in providing grants and developing programs.

8 (B) THE GEOGRAPHICAL BALANCE SHALL INCLUDE CONSIDERATION OF THE
9 FOLLOWING FACTORS:

10 (1) THE PERCENTAGE OF UNINSURED INDIVIDUALS;

11 (2) THE EXTENT OF HEALTH DISPARITIES; AND

12 (3) ~~THE EXISTENCE OF COALITIONS ADDRESSING THE NEEDS OF THE~~
13 ~~UNINSURED AND HEALTH DISPARITIES PROGRAMS AND SERVICES THAT ADDRESS~~
14 THE NEEDS OF THE UNINSURED AND UNDERINSURED IN THE GEOGRAPHIC AREA.

15 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
16 October 1, 2002.