

SENATE BILL 572

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2002 Regular Session
(2r0872)

ENROLLED BILL

-- Education, Health, and Environmental Affairs/Environmental Matters --

Introduced by **Senators Hollinger, Astle, Collins, Conway, Frosh, Kelley, and Lawlah**

Read and Examined by Proofreaders:

Proofreader.

Proofreader.

Sealed with the Great Seal and presented to the Governor, for his approval this
____ day of _____ at _____ o'clock, ____ M.

President.

CHAPTER _____

1 AN ACT concerning

2 **Arthritis Prevention and Control Act**

3 FOR the purpose of establishing the Arthritis Prevention and Control Program in the
4 Department of Health and Mental Hygiene; defining certain terms; providing
5 for certain findings of the General Assembly related to arthritis; providing for
6 the purposes of the Program; altering the powers and duties of the State
7 Advisory Council on Arthritis and Related Diseases; providing for the duties of
8 the Secretary of Health and Mental Hygiene in administering the Program;
9 providing for the funding of the Program; and generally relating to the Arthritis
10 Prevention and Control Program.

11 BY adding to
12 Article - Health - General
13 Section 13-501, 13-503, 13-504, 13-510, 13-511, and 13-512
14 Annotated Code of Maryland
15 (2000 Replacement Volume and 2001 Supplement)

1 BY repealing and reenacting, with amendments,
2 Article - Health - General
3 Section 13-501, 13-502, 13-503, 13-504, 13-505, and 13-506 to be under the
4 amended subtitle "Subtitle 5. Arthritis Prevention and Control Act"
5 Annotated Code of Maryland
6 (2000 Replacement Volume and 2001 Supplement)

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

9 **Article - Health - General**

10 Subtitle 5. [Advisory Counsel on] Arthritis [and Related Diseases] PREVENTION
11 AND CONTROL ACT.

12 13-501.

13 THE ARTHRITIS PREVENTION AND CONTROL PROGRAM IS A PROGRAM IN THE
14 DEPARTMENT FOR THE PURPOSE OF RAISING PUBLIC AWARENESS, EDUCATING
15 CONSUMERS, AND EDUCATING AND TRAINING HEALTH PROFESSIONALS, TEACHERS,
16 AND PROVIDERS ABOUT ARTHRITIS.

17 [13-501.] 13-502.

18 (A) In this subtitle[,] THE FOLLOWING WORDS HAVE THE MEANINGS
19 INDICATED.

20 (B) "Advisory Council" means the State Advisory Council on Arthritis and
21 Related Diseases.

22 (C) "PROGRAM" MEANS THE ARTHRITIS PREVENTION AND CONTROL
23 PROGRAM.

24 13-503.

25 THE GENERAL ASSEMBLY FINDS THAT:

26 (1) ARTHRITIS ENCOMPASSES MORE THAN 100 DISEASES AND
27 CONDITIONS THAT AFFECT JOINTS, THE SURROUNDING TISSUES, AND OTHER
28 CONNECTIVE TISSUES;

29 (2) AS ONE OF THE MOST COMMON FAMILY OF DISEASES IN THE UNITED
30 STATES, ARTHRITIS AFFECTS NEARLY ONE OF EVERY SIX AMERICANS AND WILL
31 IMPACT AN ESTIMATED 60,000,000 PEOPLE BY THE YEAR 2020;

32 (3) ARTHRITIS IS THE LEADING CAUSE OF DISABILITY IN THE UNITED
33 STATES, LIMITING DAILY ACTIVITIES FOR MORE THAN 7,000,000 PEOPLE;

1 (4) ALTHOUGH PREVAILING MYTHS INACCURATELY PORTRAY
 2 ARTHRITIS AS AN OLD PERSON'S DISEASE, ARTHRITIS IS A MULTIGENERATIONAL
 3 DISEASE THAT HAS BECOME ONE OF THE COUNTRY'S MOST PRESSING HEALTH
 4 PROBLEMS;

5 (5) ARTHRITIS HAS A SIGNIFICANT IMPACT ON QUALITY OF LIFE FOR
 6 THE INDIVIDUAL EXPERIENCING THE PAINFUL SYMPTOMS AND FOR THE FAMILY
 7 MEMBERS AND CAREGIVERS PROVIDING FOR THAT INDIVIDUAL;

8 (6) THE ECONOMIC AND SOCIAL COSTS ASSOCIATED WITH TREATING
 9 ARTHRITIS AND THE COMPLICATIONS OF ARTHRITIS ARE ESTIMATED AT ALMOST
 10 \$80,000,000,000 ANNUALLY;

11 (7) CURRENTLY, THE CHALLENGE EXISTS TO ENSURE DELIVERY OF
 12 EFFECTIVE, BUT OFTEN UNDERUTILIZED, INTERVENTIONS THAT ARE NECESSARY IN
 13 THE PREVENTION OR REDUCTION OF ARTHRITIS-RELATED PAIN AND DISABILITY;

14 (8) THE LARGE QUANTITY OF PUBLIC INFORMATION AND PROGRAMS
 15 ABOUT ARTHRITIS REMAIN INADEQUATELY DISSEMINATED AND ARE INSUFFICIENT
 16 IN ADDRESSING THE NEEDS OF SPECIFIC DIVERSE POPULATIONS AND OTHER
 17 UNDERSERVED GROUPS;

18 (9) THE ARTHRITIS FOUNDATION, THE CENTERS FOR DISEASE CONTROL
 19 AND PREVENTION, AND THE ASSOCIATION OF STATE AND TERRITORIAL HEALTH
 20 OFFICIALS HAVE LED THE DEVELOPMENT OF A PUBLIC HEALTH STRATEGY, THE
 21 NATIONAL ARTHRITIS ACTION PLAN, TO ENSURE THE DELIVERY OF EFFECTIVE, BUT
 22 OFTEN UNDERUTILIZED INTERVENTIONS THAT ARE NECESSARY IN THE
 23 PREVENTION OR REDUCTION OF ARTHRITIS-RELATED PAIN AND DISABILITY; AND

24 (10) EDUCATING THE PUBLIC AND HEALTH CARE COMMUNITY
 25 THROUGHOUT THE STATE ABOUT ARTHRITIS IS OF PARAMOUNT IMPORTANCE AND IS
 26 IN EVERY RESPECT IN THE PUBLIC INTEREST AND TO THE BENEFIT OF ALL
 27 RESIDENTS OF THE STATE.

28 13-504.

29 THE PURPOSES OF THIS SUBTITLE ARE TO:

30 ~~(1) CREATE AND FOSTER A STATEWIDE PROGRAM THAT PROMOTES~~
 31 ~~PUBLIC AWARENESS AND INCREASES KNOWLEDGE ABOUT THE CAUSES OF~~
 32 ~~ARTHRITIS, THE IMPORTANCE OF EARLY DIAGNOSIS AND APPROPRIATE~~
 33 ~~MANAGEMENT, EFFECTIVE PREVENTION STRATEGIES, AND PAIN PREVENTION AND~~
 34 ~~MANAGEMENT;~~

35 (1) CREATE AND FOSTER A STATEWIDE PROGRAM THAT PROMOTES
 36 PUBLIC AWARENESS AND INCREASES KNOWLEDGE ABOUT THE CAUSES OF
 37 ARTHRITIS, THE IMPORTANCE OF EARLY DIAGNOSIS AND APPROPRIATE
 38 MANAGEMENT, EFFECTIVE PREVENTION STRATEGIES, AND PAIN PREVENTION AND
 39 MANAGEMENT;

1 ~~(2)~~ ~~(1)~~ (2) ENHANCE UNDERSTANDING OF ARTHRITIS BY
2 DISSEMINATING TO PATIENTS, HEALTH PROFESSIONALS, AND THE PUBLIC:

3 (I) EDUCATIONAL MATERIALS;

4 (II) INFORMATION ON RESEARCH RESULTS;

5 (III) INFORMATION ON SERVICES PROVIDED; AND

6 (IV) STRATEGIES FOR PREVENTION AND CONTROL; TO PATIENTS,
7 HEALTH PROFESSIONALS, AND THE PUBLIC; EDUCATIONAL MATERIALS TO HIGH
8 RISK GROUPS, AS DETERMINED BY THE SECRETARY;

9 ~~(I)~~ ~~EDUCATIONAL MATERIALS;~~

10 ~~(II)~~ ~~INFORMATION ON RESEARCH RESULTS;~~

11 ~~(III)~~ ~~INFORMATION ON SERVICES PROVIDED; AND~~

12 ~~(IV)~~ ~~STRATEGIES FOR PREVENTION AND CONTROL;~~

13 ~~(3)~~ ~~(2)~~ (3) ESTABLISH A SOLID SCIENTIFIC BASE OF KNOWLEDGE ON
14 THE PREVENTION OF ARTHRITIS AND RELATED DISABILITY THROUGH
15 SURVEILLANCE, EPIDEMIOLOGY, AND PREVENTION RESEARCH;

16 ~~(4)~~ ~~(3)~~ (4) UTILIZE EDUCATIONAL AND TRAINING RESOURCES AND
17 SERVICES DEVELOPED BY ORGANIZATIONS WITH APPROPRIATE EXPERTISE AND
18 KNOWLEDGE OF ARTHRITIS AND USE AVAILABLE TECHNICAL ASSISTANCE;

19 ~~(5)~~ ~~(4)~~ (5) EVALUATE THE NEED FOR IMPROVING THE QUALITY AND
20 ACCESSIBILITY OF EXISTING COMMUNITY-BASED ARTHRITIS SERVICES;

21 ~~(6)~~ ~~(5)~~ (6) INCREASE AWARENESS ABOUT THE PREVENTION,
22 DETECTION, AND TREATMENT OF ARTHRITIS AMONG STATE AND LOCAL HEALTH
23 OFFICIALS, PROVIDERS, PROFESSIONALS, AND POLICY MAKERS;

24 ~~(7)~~ ~~(6)~~ (7) IMPLEMENT AND COORDINATE STATE AND LOCAL
25 PROGRAMS AND SERVICES TO REDUCE THE PUBLIC HEALTH BURDEN OF ARTHRITIS;
26 AND

27 ~~(8)~~ ~~(7)~~ (8) IMPROVE THE QUALITY OF LIFE AND CONTAIN HEALTH
28 CARE COSTS FOR INDIVIDUALS WITH ARTHRITIS AND THEIR FAMILIES.

29 [13-502.] 13-505.

30 There is a State Advisory Council on Arthritis and Related Diseases FOR THE
31 PROGRAM.

1 [13-503.] 13-506.

2 (a) (1) The Advisory Council consists of 15 members appointed by the
3 Governor.

4 (2) Of the 15 members:

5 (i) 2 shall be representatives of the physicians and arthritis health
6 professionals at the State's 2 medical schools;

7 (ii) 1 shall be a representative of the Department;

8 (iii) 1 shall be a representative of the Division of Vocational
9 Rehabilitation;

10 (iv) 1 shall be a representative of the Department of Aging;

11 (v) 1 shall be a representative of the Governor's Committee on
12 Employment of the Handicapped;

13 (vi) 3 shall be members of voluntary agencies, including the
14 Maryland Chapter of the Arthritis Foundation, the Maryland Lupus Foundation, and
15 Home Health Care Inc.;

16 (vii) 2 shall be representatives from hospitals or health professionals
17 or both outside of the major metropolitan areas;

18 (viii) 2 shall be representatives from the health care industry,
19 including the pharmaceutical industry and third-party payors; and

20 (ix) 2 shall be arthritic patients or family members of arthritic
21 patients.

22 (b) (1) The term of a member is 4 years.

23 (2) The terms of members are staggered as required by the terms
24 provided for members of the Advisory Council on July 1, 1989.

25 (3) At the end of a term, a member continues to serve until a successor is
26 appointed and qualifies.

27 (4) A member who is appointed after a term has begun serves only for
28 the rest of the term and until a successor is appointed and qualifies.

29 (c) The Governor may remove a member for incompetence or misconduct.

30 [13-504.] 13-507.

31 From among the members of the State Advisory Council, the Governor shall
32 appoint a chairman for a 2-year term.

1 [13-505.] 13-508.

2 (a) A majority of the members then serving on the Advisory Council is a
3 quorum.

4 (b) The Advisory Council shall determine the times and places of its meetings.

5 (c) A member of the Advisory Council:

6 (1) May not receive compensation; but

7 (2) Is entitled to reimbursement for expenses under the Standard State
8 Travel Regulations, as provided in the State budget.

9 (d) The Secretary shall designate the staff necessary to carry out this subtitle.

10 [13-506.] 13-509.

11 In addition to the powers and duties set forth elsewhere in this subtitle, the
12 Advisory Council has the following powers and duties:

13 (1) TO ADVISE THE DEPARTMENT ON THE IMPLEMENTATION OF THE
14 PROGRAM;

15 (2) TO PROVIDE ASSISTANCE TO THE DEPARTMENT IN THE
16 DEVELOPMENT OF THE PROGRAM BY:

17 [(1)] (I) [To study and to make recommendations for] RECOMMENDING
18 an integrated State program of education and applied research in gerontology and
19 geriatrics;

20 [(2)] (II) [To develop and coordinate] DEVELOPING AND COORDINATING
21 programs in vocational rehabilitation and industry designed to assist individuals with
22 arthritis to remain productive members of the State's workforce;

23 [(3)] (III) [To coordinate] COORDINATING the development of a strategic
24 plan of patient education throughout the State, involving State and local health
25 departments, private agencies, pharmaceutical companies, medical schools, and
26 related professional organizations;

27 [(4)] (IV) [To address] ADDRESSING gaps in the delivery of State service
28 and to make recommendations designed to contain costs associated with arthritis
29 prevention, treatment, and vocational training;

30 [(5)] (V) [To coordinate] COORDINATING the activities of public and
31 private agencies, medical schools, and related professional groups to improve the
32 quality of life for individuals with arthritis and their families; and

33 (VI) MAKING ANY OTHER RECOMMENDATIONS FOR CARRYING OUT
34 THE PURPOSES OF THE PROGRAM AS PROVIDED IN § 13-504 OF THIS SUBTITLE; AND

1 [(6)] (3) To submit a report annually to the Governor on the work of the
2 Advisory Council.

3 13-510.

4 THE SECRETARY SHALL:

5 ~~(1)~~ ~~PROVIDE SUFFICIENT STAFF TO IMPLEMENT THE PROGRAM;~~

6 ~~(2)~~ ~~PROVIDE APPROPRIATE TRAINING FOR STAFF OF THE PROGRAM;~~

7 (1) PROVIDE SUFFICIENT STAFF TO IMPLEMENT THE PROGRAM;

8 (2) PROVIDE APPROPRIATE TRAINING FOR STAFF OF THE PROGRAM;

9 ~~(3)~~ ~~(1)~~ (3) IDENTIFY THE APPROPRIATE ORGANIZATIONS TO CARRY
10 OUT THE PROGRAM;

11 ~~(4)~~ ~~(2)~~ (4) BASE THE PROGRAM ON THE MOST CURRENT SCIENTIFIC
12 INFORMATION AND FINDINGS;

13 ~~(5)~~ ~~(3)~~ (5) WORK TO INCREASE AND IMPROVE COMMUNITY-BASED
14 SERVICES AVAILABLE TO PEOPLE WITH ARTHRITIS AND THEIR FAMILY MEMBERS;

15 ~~(6)~~ ~~(4)~~ (6) WORK WITH GOVERNMENTAL OFFICES, NATIONAL
16 VOLUNTARY HEALTH ORGANIZATIONS AND THEIR LOCAL CHAPTERS, COMMUNITY
17 AND BUSINESS LEADERS, COMMUNITY ORGANIZATIONS, AND HEALTH CARE AND
18 HUMAN SERVICE PROVIDERS TO COORDINATE EFFORTS AND MAXIMIZE STATE
19 RESOURCES IN THE AREAS OF PREVENTION, EDUCATION, DETECTION, PAIN
20 MANAGEMENT, AND TREATMENT OF ARTHRITIS; AND

21 ~~(7)~~ ~~(5)~~ (7) IDENTIFY AND, WHEN APPROPRIATE, USE
22 EVIDENCE-BASED ARTHRITIS PROGRAMS AND OBTAIN RELATED MATERIALS AND
23 SERVICES FROM ORGANIZATIONS WITH APPROPRIATE EXPERTISE AND KNOWLEDGE
24 OF ARTHRITIS.

25 13-511.

26 THE OPERATION, MANAGEMENT, AND ADMINISTRATION OF THE PROGRAM
27 SHALL BE FUNDED AS PROVIDED FOR IN THE STATE BUDGET.

28 13-512.

29 THIS SUBTITLE MAY BE CITED AS THE "MARYLAND ARTHRITIS PREVENTION
30 AND CONTROL ACT".

31 SECTION 2. AND BE IT FURTHER ENACTED, That ~~the Department of~~
32 ~~Health and Mental Hygiene shall implement this Act using existing budgeted~~
33 ~~resources.~~

1 ~~SECTION 3. AND BE IT FURTHER ENACTED, That~~ this Act shall take
2 effect October 1, 2002.