
By: **Senators Exum, Britt, Conway, Currie, Giannetti, Gladden, Grosfeld,
Hughes, Jones, Kelley, Lawlah, McFadden, Pinsky, and Teitelbaum**
Introduced and read first time: January 23, 2004
Assigned to: Education, Health, and Environmental Affairs and Budget and Taxation

A BILL ENTITLED

1 AN ACT concerning

2 **Maryland Office of Minority Health**

3 FOR the purpose of establishing the Maryland Office of Minority Health in the
4 Executive Department; establishing the Director of Minority Affairs as head of
5 the Office; requiring the Director to report to the Secretary of Health and
6 Mental Hygiene; establishing the duties and responsibilities of the Office;
7 establishing a Minority Health Advisory Commission; providing for the
8 membership, chairperson, expenses, and staff of the Commission; establishing
9 the duties of the Commission; requiring the Director to promote health and
10 prevention of disease among members of certain groups; authorizing the
11 Director to distribute grants for the improvement of minority health under
12 certain circumstances; authorizing the Director to fund certain projects;
13 requiring that the Office provide a certain report; defining certain terms; and
14 generally relating to the establishment of the Maryland Office of Minority
15 Health and the Minority Health Advisory Commission.

16 BY adding to
17 Article - State Government
18 Section 9-3A-01 through 9-3A-08, inclusive, to be under the new subtitle
19 "Subtitle 3A. Office of Minority Health"
20 Annotated Code of Maryland
21 (1999 Replacement Volume and 2003 Supplement)

22 Preamble

23 WHEREAS, The cost of racial and ethnic disparities in health care has a
24 substantial negative economic impact on the State; and

25 WHEREAS, There is a social and economic benefit to ensuring that minorities
26 have access to preventive health care; now, therefore,

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

1

Article - State Government

2

SUBTITLE 3A. OFFICE OF MINORITY HEALTH.

3 9-3A-01.

4 (A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS
5 INDICATED.

6 (B) "COMMISSION" MEANS THE MINORITY HEALTH ADVISORY COMMISSION.

7 (C) "DEPARTMENT" MEANS THE DEPARTMENT OF HEALTH AND MENTAL
8 HYGIENE.

9 (D) "DIRECTOR" MEANS THE DIRECTOR OF THE OFFICE OF MINORITY
10 AFFAIRS.

11 (E) "MINORITY PERSON" INCLUDES AFRICAN AMERICANS, HISPANICS, ASIAN
12 AND PACIFIC ISLANDERS, AND AMERICAN INDIANS STATEWIDE.

13 (F) "OFFICE" MEANS THE MARYLAND OFFICE OF MINORITY HEALTH
14 ESTABLISHED UNDER § 9-3A-02 OF THIS SUBTITLE.

15 (G) "SECRETARY" MEANS THE SECRETARY OF HEALTH AND MENTAL
16 HYGIENE.

17 9-3A-02.

18 THERE IS AN OFFICE OF MINORITY HEALTH IN THE EXECUTIVE DEPARTMENT.

19 9-3A-03.

20 (A) THE HEAD OF THE OFFICE OF MINORITY HEALTH IS THE DIRECTOR OF
21 MINORITY AFFAIRS.

22 (B) THE DIRECTOR SHALL REPORT TO THE SECRETARY.

23 9-3A-04.

24 THE OFFICE SHALL:

25 (1) BE AN ADVOCATE FOR THE IMPROVEMENT OF MINORITY HEALTH
26 CARE BY WORKING WITH THE DEPARTMENT ON ITS OWN, OR IN PARTNERSHIP WITH
27 OTHER PUBLIC AND PRIVATE ENTITIES TO ESTABLISH APPROPRIATE FORUMS,
28 PROGRAMS, OR INITIATIVES DESIGNED TO EDUCATE THE PUBLIC REGARDING
29 MINORITY HEALTH ISSUES, WITH AN EMPHASIS ON PREVENTIVE HEALTH AND
30 HEALTHY LIFESTYLES;

31 (2) ASSIST THE SECRETARY IN IDENTIFYING, COORDINATING AND
32 ESTABLISHING PRIORITIES FOR PROGRAMS, SERVICES, AND RESOURCES THAT THE
33 STATE SHOULD PROVIDE FOR MINORITY HEALTH ISSUES;

1 (3) COLLECT, CLASSIFY, AND ANALYZE RELEVANT RESEARCH
2 INFORMATION AND DATA COLLECTED OR COMPILED BY:

3 (I) THE DEPARTMENT;

4 (II) THE DEPARTMENT IN COLLABORATION WITH OTHERS;

5 (III) THE MINORITY HEALTH ADVISORY COMMISSION; AND

6 (IV) OTHER PUBLIC AND PRIVATE ENTITIES;

7 (4) IMPROVE EXISTING DATA SYSTEMS TO ENSURE THAT THE HEALTH
8 INFORMATION THAT IS COLLECTED INCLUDES SPECIFIC RACE AND ETHNICITY
9 IDENTIFIERS;

10 (5) SERVE AS A CLEARINGHOUSE AND RESOURCE LIBRARY FOR
11 INFORMATION ABOUT MINORITY HEALTH DATA, STRATEGIES, SERVICES, AND
12 PROGRAMS THAT ADDRESS MINORITY HEALTH ISSUES;

13 (6) DEVELOP A STRATEGIC PLAN TO IMPROVE PUBLIC SERVICES AND
14 PROGRAMS TARGETING MINORITIES;

15 (7) PROVIDE GRANTS TO COMMUNITY-BASED ORGANIZATIONS TO
16 CONDUCT SPECIAL RESEARCH, DEMONSTRATION, AND EVALUATION PROJECTS FOR
17 TARGETED AT-RISK RACIAL AND ETHNIC MINORITY POPULATIONS AND TO SUPPORT
18 ONGOING COMMUNITY-BASED PROGRAMS THAT ARE DESIGNED TO REDUCE OR
19 ELIMINATE RACIAL AND ETHNIC HEALTH DISPARITIES IN THE STATE;

20 (8) DEVELOP CRITERIA FOR THE AWARDING OF GRANTS FOR PROGRAMS
21 THAT ARE DESIGNED TO IMPROVE MINORITY HEALTH CARE;

22 (9) REVIEW EXISTING LAWS AND REGULATIONS TO ENSURE THAT THEY
23 FACILITATE THE PROVISION OF ADEQUATE HEALTH CARE TO THE MINORITIES OF
24 THIS STATE;

25 (10) RECOMMEND TO THE SECRETARY ANY ADDITIONS OR CHANGES TO
26 EXISTING LAWS AND REGULATIONS DESIGNED TO FACILITATE THE ADEQUATE
27 PROVISION OF HEALTH CARE TO MINORITIES IN THIS STATE;

28 (11) EXAMINE THE FINANCING AND ACCESS TO HEALTH SERVICES FOR
29 MARYLAND'S MINORITY POPULATIONS;

30 (12) IDENTIFY AND REVIEW HEALTH PROMOTION AND DISEASE
31 PREVENTION STRATEGIES RELATING TO THE LEADING HEALTH CAUSES OF DEATH
32 AND DISABILITY AMONG MINORITY POPULATIONS;

33 (13) DEVELOP AND IMPLEMENT MODEL PUBLIC AND PRIVATE
34 PARTNERSHIPS IN RACIAL AND ETHNIC MINORITY COMMUNITIES FOR HEALTH
35 AWARENESS CAMPAIGNS AND TO IMPROVE THE ACCESS, ACCEPTABILITY, AND USE
36 OF PUBLIC HEALTH SERVICES;

1 (14) DEVELOP RECOMMENDATIONS FOR THE MOST EFFECTIVE MEANS
2 OF PROVIDING OUTREACH TO RACIAL AND ETHNIC MINORITY COMMUNITIES
3 THROUGHOUT THE STATE TO ENSURE THEIR MAXIMUM PARTICIPATION IN
4 PUBLICLY FUNDED HEALTH BENEFITS PROGRAMS;

5 (15) DEVELOP A STATEWIDE PLAN FOR INCREASING THE NUMBER OF
6 RACIAL AND ETHNIC MINORITY HEALTH CARE PROFESSIONALS WHICH INCLUDES
7 RECOMMENDATIONS FOR THE FINANCING MECHANISMS AND RECRUITMENT
8 STRATEGIES NECESSARY TO CARRY OUT THE PLAN;

9 (16) WORK COLLABORATIVELY WITH UNIVERSITIES AND COLLEGES OF
10 MEDICINE, NURSING, PHARMACY, AND DENTISTRY IN THIS STATE AND OTHER
11 HEALTH CARE PROFESSIONAL TRAINING PROGRAMS TO DEVELOP COURSES WITH
12 CULTURAL COMPETENCY, SENSITIVITY, AND HEALTH LITERACY, THAT ARE
13 DESIGNED TO ADDRESS THE PROBLEM OF RACIAL AND ETHNIC DISPARITIES IN
14 HEALTH CARE ACCESS, UTILIZATION, TREATMENT DECISIONS, QUALITY, AND
15 OUTCOMES;

16 (17) WORK COLLABORATIVELY WITH THE MARYLAND HEALTH CARE
17 DISPARITIES INITIATIVE, THE MORGAN-HOPKINS CENTER FOR HEALTH DISPARITIES
18 SOLUTIONS, AND THE UNIVERSITY OF MARYLAND DISPARITY PROJECT AS WELL AS
19 OTHER EXISTING ALLIANCES OR PLANS, TO REDUCE OR ELIMINATE RACIAL AND
20 ETHNIC DISPARITIES IN THE STATE;

21 (18) SEEK TO ESTABLISH A STATEWIDE ALLIANCE WITH
22 COMMUNITY-BASED AGENCIES AND ORGANIZATIONS, HEALTH CARE FACILITIES,
23 HEALTH CARE PROVIDER ORGANIZATIONS, MANAGED CARE ORGANIZATIONS, AND
24 PHARMACEUTICAL MANUFACTURERS TO PROMOTE THE OBJECTIVES OF THE
25 OFFICE;

26 (19) EVALUATE MULTICULTURAL OR RACIAL AND ETHNIC MINORITY
27 HEALTH PROGRAMS IN OTHER STATES TO ASSESS THEIR EFFICACY AND POTENTIAL
28 FOR REPLICATION IN THIS STATE AND MAKE RECOMMENDATIONS REGARDING THE
29 ADOPTION OF SUCH PROGRAMS, AS APPROPRIATE;

30 (20) APPLY FOR AND ACCEPT ANY GRANT OF MONEY FROM THE FEDERAL
31 GOVERNMENT, PRIVATE FOUNDATIONS, OR OTHER SOURCES WHICH MAY BE
32 AVAILABLE FOR PROGRAMS RELATED TO MINORITY HEALTH; AND

33 (21) SERVE AS THE DESIGNATED STATE AGENCY FOR RECEIPT OF
34 FEDERAL FUNDS SPECIFICALLY DESIGNATED FOR MINORITY HEALTH PROGRAMS.

35 9-3A-05.

36 (A) THERE IS A MINORITY HEALTH ADVISORY COMMISSION.

37 (B) THE COMMISSION CONSISTS OF 15 MEMBERS APPOINTED AS FOLLOWS:

38 (1) FIVE MEMBERS SHALL BE APPOINTED BY THE GOVERNOR FROM
39 AMONG HEALTH RESEARCHERS, HEALTH PLANNERS, AND HEALTH PROFESSIONALS;

1 (2) FIVE MEMBERS SHALL BE APPOINTED BY THE SPEAKER OF THE
2 HOUSE OF DELEGATES, TWO OF WHOM SHALL BE MEMBERS OF THE HOUSE OF
3 DELEGATES, AND THE REMAINDER OF WHOM SHALL BE REPRESENTATIVE OF ANY
4 OF THE OCCUPATIONS OR PROFESSIONS LISTED IN ITEM (1) OF THIS SUBSECTION;
5 AND

6 (3) FIVE MEMBERS SHALL BE APPOINTED BY THE PRESIDENT OF THE
7 SENATE, TWO OF WHOM SHALL BE MEMBERS OF THE SENATE, AND THE REMAINDER
8 OF WHOM SHALL BE REPRESENTATIVE OF ANY OF THE OCCUPATIONS OR
9 PROFESSIONS LISTED IN ITEM (1) OF THIS SUBSECTION.

10 (C) THE COMMISSION SHALL ELECT A CHAIRPERSON FROM AMONG ITS
11 MEMBERS.

12 (D) MEMBERS OF THE COMMISSION SHALL SERVE WITHOUT COMPENSATION,
13 BUT SHALL BE REIMBURSED FOR EXPENSES UNDER THE STANDARD STATE TRAVEL
14 REGULATIONS, AS PROVIDED IN THE STATE BUDGET.

15 (E) THE OFFICE SHALL:

16 (1) HAVE A STAFF AS PROVIDED IN THE STATE BUDGET; AND

17 (2) PROVIDE STAFF AND ASSISTANCE TO THE COMMISSION AS
18 NECESSARY FOR IT TO CARRY OUT ITS WORK.

19 9-3A-06.

20 THE COMMISSION SHALL:

21 (1) ADVISE THE DIRECTOR ON PROPOSALS TO IMPLEMENT AND
22 ENHANCE THE DUTIES OF THE OFFICE;

23 (2) GATHER INFORMATION THAT THE COMMISSION DEEMS NECESSARY
24 TO PROMOTE THE GOALS OF THE OFFICE;

25 (3) PROVIDE SUCH OTHER ASSISTANCE AS MAY BE REQUIRED TO
26 FURTHER THE PURPOSES OF § 9-3A-04 OF THIS SUBTITLE;

27 (4) MEET AT THE CALL OF THE DIRECTOR;

28 (5) REVIEW AND MAKE RECOMMENDATIONS TO THE OFFICE ON ANY
29 RULES, REGULATIONS, AND POLICIES PROPOSED BY THE OFFICE;

30 (6) ADVISE THE OFFICE ON THE NEEDS, PRIORITIES, PROGRAMS, AND
31 POLICIES RELATING TO MINORITY HEALTH IN THIS STATE; AND

32 (7) PROVIDE ANY OTHER ASSISTANCE TO THE OFFICE THAT THE
33 DIRECTOR REQUESTS.

1 9-3A-07.

2 SUBJECT TO THE LIMITATIONS OF ANY LAW THAT GOVERNS THE ACTIVITIES OF
3 OTHER UNITS OF THE EXECUTIVE BRANCH OF STATE GOVERNMENT, THE DIRECTOR
4 SHALL:

5 (1) PROMOTE HEALTH AND THE PREVENTION OF DISEASE AMONG
6 MEMBERS OF MINORITY GROUPS;

7 (2) DISTRIBUTE GRANTS FROM AVAILABLE FUNDS TO
8 COMMUNITY-BASED HEALTH GROUPS TO BE USED TO PROMOTE HEALTH AND THE
9 PREVENTION OF DISEASE AMONG MEMBERS OF MINORITY GROUPS; AND

10 (3) FUND PROJECTS WHICH ARE INNOVATIVE, CULTURALLY SENSITIVE,
11 AND SPECIFIC IN THEIR APPROACH TOWARD REDUCTION OF THE INCIDENCE AND
12 SEVERITY OF THOSE DISEASES OR CONDITIONS WHICH ARE RESPONSIBLE FOR
13 EXCESS MORBIDITY AND MORTALITY IN MINORITY POPULATIONS.

14 9-3A-08.

15 (A) ON OR BEFORE THE 15TH DAY OF EACH REGULAR SESSION OF THE
16 GENERAL ASSEMBLY, THE DIRECTOR SHALL SUBMIT AN ANNUAL REPORT ON THE
17 OFFICE OF MINORITY HEALTH TO THE GOVERNOR AND, SUBJECT TO § 2-1246 OF THIS
18 ARTICLE, TO THE GENERAL ASSEMBLY.

19 (B) THE REPORT SHALL INCLUDE THE PROJECTS AND SERVICES DEVELOPED
20 AND FUNDED BY THE OFFICE AND THE HEALTH CARE PROBLEMS THAT THE GRANT
21 FUNDS ARE INTENDED TO AMELIORATE.

22 (C) THE REPORT MAY INCLUDE ANY RECOMMENDATIONS FOR
23 ADMINISTRATIVE OR LEGISLATIVE ACTION THAT IT DEEMS APPROPRIATE.

24 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
25 October 1, 2004.