
By: **Delegates Donoghue, Bromwell, Kullen, Barve, Bobo, Conroy, D. Davis, Doory, Feldman, Goldwater, Haddaway, Hurson, Impallaria, Jameson, Kelly, Kirk, Krebs, Krysiak, Love, McHale, Minnick, Moe, Montgomery, Nathan-Pulliam, Parrott, Pendergrass, Taylor, Vaughn, Walkup, and ~~Wood~~ Wood, Benson, Boteler, Boutin, Costa, Elliott, Frank, Hammen, Hubbard, Kach, Mandel, Morhaim, Oaks, Rudolph, V. Turner, and Weldon**

Introduced and read first time: February 4, 2005
Assigned to: Health and Government Operations

Committee Report: Favorable with amendments
House action: Adopted
Read second time: March 15, 2005

CHAPTER _____

1 AN ACT concerning

2 **Pilot Program to Study and Improve Screening Practices for Autism**
3 **Spectrum Disorders**

4 FOR the purpose of establishing a Pilot Program to Study and Improve Screening
5 Practices for Autism Spectrum Disorders in the Department of Education;
6 providing for the purpose of the Pilot Program; requiring the Department of
7 Education, in collaboration with the Department of Health and Mental Hygiene,
8 to select and establish relationships with certain providers to participate in the
9 Pilot Program, assess and identify certain autism spectrum disorders screening
10 instruments, develop certain training materials and distribute certain written
11 information, and facilitate communication between certain providers and the
12 Maryland Infants and Toddlers Program; requiring the Department of
13 Education, beginning on a certain date and in collaboration with the
14 Department of Health and Mental Hygiene, to collect certain baseline data,
15 conduct certain tests for participating providers, provide certain training to
16 participating providers, collect and analyze the results of certain tests, and
17 collect certain information on certain screening instruments; requiring the
18 Department of Education, beginning on a certain date and in collaboration with
19 the Department of Health and Mental Hygiene, to develop and monitor a certain
20 referral system between certain pediatricians and the Maryland Infants and
21 Toddlers Program, and to develop certain support for health care providers;
22 authorizing the Department of Education to contract with a certain organization

1 to administer the Pilot Program; requiring the Department of Education to
 2 make a certain report to certain committees of the General Assembly on or
 3 before a certain date; providing for the termination of this Act; defining a certain
 4 term; and generally relating to the Pilot Program to Study and Improve
 5 Screening Practices for Autism Spectrum Disorders.

6 BY adding to
 7 Article - Education
 8 Section 8-501 through 8-508, inclusive, to be under the new subtitle "Subtitle 5.
 9 Pilot Program to Study and Improve Screening Practices for Autism
 10 Spectrum Disorders"
 11 Annotated Code of Maryland
 12 (2004 Replacement Volume and 2004 Supplement)

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

15 **Article - Education**

16 **SUBTITLE 5. PILOT PROGRAM TO STUDY AND IMPROVE SCREENING PRACTICES FOR**
 17 **AUTISM SPECTRUM DISORDERS.**

18 8-501.

19 IN THIS SUBTITLE, "PILOT PROGRAM" MEANS THE PILOT PROGRAM TO STUDY
 20 AND IMPROVE SCREENING PRACTICES FOR AUTISM SPECTRUM DISORDERS.

21 8-502.

22 THERE IS A PILOT PROGRAM, ADMINISTERED BY THE DEPARTMENT, TO STUDY
 23 AND IMPROVE SCREENING PRACTICES FOR AUTISM SPECTRUM DISORDERS ~~IN THE~~
 24 ~~DEPARTMENT.~~

25 8-503.

26 THE PURPOSE OF THE PILOT PROGRAM IS TO:

27 (1) ASSESS AUTISM SPECTRUM DISORDERS SCREENING PRACTICES
 28 USED IN PEDIATRIC HEALTH CARE SETTINGS;

29 (2) IMPLEMENT AUTISM SPECTRUM DISORDERS SCREENING PRACTICES
 30 AT WELL VISITS FOR 12- TO 36-MONTH OLD CHILDREN IN AT LEAST TWO
 31 JURISDICTIONS IN THE STATE;

32 (3) TRAIN HEALTH CARE PROVIDERS IN THE EARLY DETECTION OF
 33 AUTISM SPECTRUM DISORDERS;

1 (4) IDENTIFY, REFER, AND ~~PROVIDE SERVICES~~ FACILITATE ASSESSMENT
2 FOR 12- TO 36-MONTH OLD CHILDREN WHO ARE AT RISK FOR AUTISM SPECTRUM
3 DISORDERS;

4 (5) FACILITATE ACCESS TO HEALTH CARE AND EARLY INTERVENTION
5 SERVICES FOR PARENTS SEEKING AN EARLY DIAGNOSIS OF AUTISM SPECTRUM
6 DISORDERS; AND

7 (6) ~~REQUIRE THE DEPARTMENT TO IMPROVE AND EXPEDITE THE~~
8 ~~PROVISION OF MARYLAND~~ FACILITATE IMPROVED AND EXPEDITED INFANTS AND
9 TODDLERS PROGRAM SERVICES TO ~~CHILDREN WITH SIGNS OF AUTISM SPECTRUM~~
10 ~~DISORDERS~~ ELIGIBLE CHILDREN AS DEFINED BY COMAR 13A.13.01.01(16) WHO ARE
11 REFERRED BY A PARENT OR PEDIATRICIAN.

12 8-504.

13 THE DEPARTMENT, IN COLLABORATION WITH THE DEPARTMENT OF HEALTH
14 AND MENTAL HYGIENE, SHALL:

15 (1) SELECT AT LEAST 30 PEDIATRIC HEALTH CARE PROVIDERS TO
16 PARTICIPATE IN THE PILOT PROGRAM;

17 (2) ESTABLISH RELATIONSHIPS WITH PEDIATRICIANS AND STAFF OF
18 PARTICIPATING HEALTH CARE PROVIDERS;

19 (3) ASSESS AVAILABLE AUTISM SPECTRUM DISORDERS SCREENING
20 INSTRUMENTS;

21 (4) IDENTIFY AUTISM SPECTRUM DISORDERS SCREENING PRACTICES
22 USED BY HEALTH CARE PROVIDERS IN THE STATE;

23 (5) DEVELOP TRAINING MATERIALS FOR HEALTH CARE PROVIDERS ON
24 THE EARLY DETECTION OF AUTISM SPECTRUM DISORDERS;

25 (6) DISTRIBUTE WRITTEN INFORMATION ON THE EARLY DETECTION OF
26 AUTISM SPECTRUM DISORDERS FROM THE CENTERS FOR DISEASE CONTROL AND
27 PREVENTION AND THE AMERICAN ACADEMY OF PEDIATRICS TO PARENTS WITH
28 CHILDREN IN PEDIATRIC HEALTH CARE PRACTICES; AND

29 (7) FACILITATE COMMUNICATION BETWEEN PEDIATRIC HEALTH CARE
30 PROVIDERS AND THE ~~MARYLAND~~ INFANTS AND TODDLERS PROGRAM IN ORDER TO:

31 (I) CONDUCT FURTHER ASSESSMENTS OF CHILDREN WITH SIGNS
32 OF AN AUTISM SPECTRUM DISORDER; AND

33 (II) PROVIDE SERVICES FOR CHILDREN WHO ARE ELIGIBLE FOR
34 SERVICES AS DEFINED BY COMAR 13A.13.01.01(16) AND ARE REFERRED TO THE
35 ~~MARYLAND~~ INFANTS AND TODDLERS PROGRAM.

1 8-505.

2 BEGINNING JULY 1, 2006, THE DEPARTMENT, IN COLLABORATION WITH THE
3 DEPARTMENT OF HEALTH AND MENTAL HYGIENE, SHALL:

4 (1) COLLECT BASELINE DATA ON PARTICIPATING PROVIDERS':

5 (I) SCREENING PRACTICES AND PROCEDURES FOR IDENTIFYING
6 AUTISM SPECTRUM DISORDERS; AND

7 (II) REFERRAL PRACTICES WHEN AN AUTISM SPECTRUM DISORDER
8 IS IDENTIFIED;

9 (2) PRIOR TO CONDUCTING THE TRAINING REQUIRED UNDER ITEM (3)
10 OF THIS SECTION, TEST PARTICIPATING PROVIDERS' KNOWLEDGE OF:

11 (I) SCREENING PRACTICES AND PROCEDURES FOR IDENTIFYING
12 AUTISM SPECTRUM DISORDERS; AND

13 (II) EARLY INDICATORS OF AUTISM SPECTRUM DISORDERS;

14 (3) (I) 1. COORDINATE WITH THE KENNEDY KRIEGER INSTITUTE'S
15 CENTER FOR AUTISM AND RELATED DISORDERS TO TRAIN PARTICIPATING
16 PROVIDERS ON SCREENING PRACTICES FOR AUTISM SPECTRUM DISORDERS,
17 INCLUDING THE USE OF SCREENING INSTRUMENTS; AND

18 2. TRAIN PARTICIPATING PROVIDERS ON REFERRAL
19 PRACTICES WHEN AN AUTISM SPECTRUM DISORDER IS IDENTIFIED; AND

20 (II) ENSURE THAT PARTICIPATING PROVIDERS RECEIVE
21 MONETARY COMPENSATION OR CONTINUING MEDICAL EDUCATION CREDIT FOR THE
22 TRAINING;

23 (4) AFTER CONDUCTING THE TRAINING REQUIRED UNDER ITEM (3) OF
24 THIS SECTION, RETEST PARTICIPATING PROVIDERS' KNOWLEDGE OF:

25 (⊕) (I) SCREENING PRACTICES AND PROCEDURES FOR
26 IDENTIFYING AUTISM SPECTRUM DISORDERS; AND

27 (⊕) (II) EARLY INDICATORS OF AUTISM SPECTRUM DISORDERS;

28 (5) COMPARE AND ANALYZE THE RESULTS OF THE TESTS CONDUCTED
29 UNDER ITEMS (1) AND (4) OF THIS SECTION;

30 (6) ESTABLISH THE USE OF AUTISM SPECTRUM DISORDERS SCREENING
31 INSTRUMENTS IN PARTICIPATING PROVIDERS' HEALTH CARE PRACTICES; ~~AND~~

32 (7) AFTER TRAINING PARTICIPATING PROVIDERS AND ESTABLISHING
33 THE USE OF SCREENING INSTRUMENTS:

1 (I) COLLECT DATA AT REGULAR INTERVALS ON PARTICIPATING
2 PROVIDERS' SCREENING PRACTICES; AND

3 (II) USE THE DATA TO ANALYZE PARTICIPATING PROVIDERS' USE
4 OF SCREENING INSTRUMENTS BEFORE AND AFTER RECEIVING TRAINING; AND

5 (8) COLLECT INFORMATION ON THE EFFICACY OF AUTISM SPECTRUM
6 DISORDERS SCREENING INSTRUMENTS.

7 8-506.

8 BEGINNING JULY 1, 2007, THE DEPARTMENT, IN COLLABORATION WITH THE
9 DEPARTMENT OF HEALTH AND MENTAL HYGIENE, SHALL:

10 (1) DEVELOP A AN IMPROVED REFERRAL SYSTEM BETWEEN
11 PEDIATRICIANS AND THE ~~MARYLAND~~ INFANTS AND TODDLERS PROGRAM;

12 (2) MONITOR THE REFERRAL SYSTEM BY MEETING WITH
13 PARTICIPATING PEDIATRICIANS TO SOLICIT FEEDBACK AND IDENTIFY ISSUES WITH
14 THE REFERRAL SYSTEM; AND

15 (3) DEVELOP SUPPORT FOR HEALTH CARE PROVIDERS BY:

16 (I) ESTABLISHING A HOTLINE ON AUTISM SPECTRUM DISORDERS;
17 AND

18 (II) PROVIDING INFORMATION ON RESOURCES, INCLUDING THE
19 KENNEDY KRIEGER INSTITUTE'S CENTER FOR AUTISM AND RELATED DISORDERS,
20 THE PATHFINDERS FOR AUTISM RESOURCE CENTER, AND LOCAL CHAPTERS OF THE
21 AUTISM SOCIETY OF AMERICA.

22 8-507.

23 TO ADMINISTER THE PILOT PROGRAM ESTABLISHED BY THIS SUBTITLE, THE
24 DEPARTMENT MAY CONTRACT WITH A QUALIFIED RESEARCH ORGANIZATION WITH:

25 (1) KNOWLEDGE OF AUTISM SPECTRUM DISORDERS; AND

26 (2) RESEARCH AND CLINICAL EXPERIENCE IN THE EARLY DETECTION
27 OF AND INTERVENTION FOR AUTISM SPECTRUM DISORDERS.

28 8-508.

29 ON OR BEFORE JUNE 1 OF EACH YEAR, THE DEPARTMENT SHALL REPORT TO
30 THE SENATE EDUCATION, HEALTH, AND ENVIRONMENTAL AFFAIRS COMMITTEE AND
31 THE HOUSE HEALTH AND GOVERNMENT OPERATIONS COMMITTEE, IN ACCORDANCE
32 WITH § 2-1246 OF THE STATE GOVERNMENT ARTICLE, ON THE IMPLEMENTATION OF
33 THE PILOT PROGRAM ESTABLISHED BY THIS SUBTITLE.

34 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
35 July 1, 2005. It shall remain in effect for a period of 3 years and, at the end of June 30,

1 2008, with no further action required by the General Assembly, this Act shall be
2 abrogated and of no further force and effect.