
By: ~~Delegate Murray~~ Delegates Murray, Benson, Boteler, Boutin, Bromwell,
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CHAPTER _____

1 AN ACT concerning

2 **Task Force on Men's Health**

3 FOR the purpose of establishing a Task Force on Men's Health; providing for the
4 composition and staffing of the Task Force; specifying the duties of the Task
5 Force; providing for certain reimbursement for travel expenses; requiring the
6 Task Force to report its findings and recommendations on or before a certain
7 date; providing for the termination of this Act; and generally relating to a Task
8 Force on Men's Health.

9 **Preamble**

10 WHEREAS, There is a silent health crisis affecting the health and well-being of
11 Maryland men; and

12 WHEREAS, This health crisis is of particular concern to men but is also a
13 concern for women, as the crisis affects fathers, husbands, sons, and brothers; and

14 WHEREAS, Men's health is likewise a concern for employers, who lose
15 productive employees as well as pay the costs of medical care, and for State
16 government and society, which absorb the enormous costs of premature death and
17 disability, including the costs of caring for dependents left without income; and

18 WHEREAS, The life expectancy for a child born in Maryland in 2001 was 73.9
19 years for males, versus 79.1 years for females; and

1 WHEREAS, The 2001 Maryland death rate of 819.9 per 100,000 population for
2 men exceeded the death rate of 802.4 per 100,000 population for women; and

3 WHEREAS, In Maryland, only 22% of the deaths to women in 2001 occurred
4 before age 65, men younger than 65 accounted for 36% of all deaths to men in that
5 year; and

6 WHEREAS, Men comprised 60% of new HIV cases in 2001 in Maryland and 67%
7 of new AIDS cases in the same year; and

8 WHEREAS, Men are reported to be 25% less likely than women to visit a doctor;
9 and

10 WHEREAS, Employment-based health insurance, which has traditionally
11 financed much of the health care received by men, is on the decline, and recent
12 Medicaid and other publicly-financed health care expansions have focused primarily
13 on children and women; and

14 WHEREAS, Regular exercise, good nutrition, healthy behaviors, regular
15 medical checkups, preventive health screenings, and diagnostic tests that detect
16 disease early have been proven to save lives; now, therefore,

17 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
18 MARYLAND, That:

19 (a) There is a Task Force on Men's Health.

20 (b) The Task Force consists of the following 14 members:

21 (1) two members of the Senate of Maryland, appointed by the President
22 of the Senate;

23 (2) two members of the House of Delegates, appointed by the Speaker of
24 the House;

25 (3) the following members, appointed by the Governor:

26 (i) two licensed physicians from the State's academic health
27 centers, who specialize in treating diseases of men;

28 (ii) one representative of the Department of Health and Mental
29 Hygiene;

30 (iii) two licensed mental health professionals;

31 (iv) one licensed nurse practitioner;

32 (v) two representatives of local health departments;

33 (vi) one consumer member; ~~and~~

1 (vii) one licensed ~~pharmacist~~, pharmacist; and

2 (viii) one licensed dentist.

3 (c) The Governor shall designate the chair of the Task Force.

4 (d) The Department of Health and Mental Hygiene shall provide staff support
5 for the Task Force.

6 (e) A member of the Task Force:

7 (1) may not receive compensation; but

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

10 (f) The Task Force shall:

11 (1) review health care morbidity and mortality statistics and utilization
12 patterns, including regional variations, for Maryland men;

13 (2) examine the availability and adequacy of health care services for
14 men;

15 (3) develop strategies and public policy recommendations, including
16 community outreach and public-private partnerships, that are designed to educate
17 Maryland men on the benefits of regular medical and dental checkups, early detection
18 and preventive screening tests, and healthy lifestyle practices;

19 (4) focus on improving health outcomes of men in specific disease areas
20 including, but not limited to, prostate and testicular cancer, oral cancer,
21 cardiovascular disease, depression, and diabetes;

22 (5) develop strategies for preventive health care services that will result
23 in reduced health insurance rates; and

24 (6) recommend assistance, services, and policy changes that will result
25 in improvements to men's health care and health status.

26 (g) The Task Force shall report its findings and recommendations to the
27 Governor and, subject to § 2-1246 of the State Government Article, the General
28 Assembly on or before December 31, 2006.

29 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take
30 effect July 1, 2005. It shall remain effective for a period of 1 year and 6 months and,
31 at the end of December 31, 2006, with no further action required by the General
32 Assembly, this Act shall be abrogated and of no further force and effect.

