
By: **Senators Lawlah, Kasemeyer, Kelley, Kramer, and ~~Ruben~~ Ruben, and Jones**

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Assigned to: Finance and Budget and Taxation

Committee Report: Favorable with amendments
Senate action: Adopted
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CHAPTER _____

1 AN ACT concerning

2 **Public Health - Child Abuse and Neglect Centers of Excellence Initiative**

3 FOR the purpose of establishing a Child Abuse and Neglect Centers of Excellence
4 Initiative in the Department of Health and Mental Hygiene; providing for the
5 purposes of the Initiative; ~~requiring the Maryland Chapter of the American~~
6 ~~Academy of Pediatrics to operate, manage, and administer the Initiative;~~
7 ~~requiring the Department to cooperate and assist the Maryland Chapter of the~~
8 ~~American Academy of Pediatrics in overseeing the Initiative;~~ providing for the
9 duties of the Centers of Excellence faculty; authorizing a Center of Excellence to
10 receive certain information from the Department on and consult on certain
11 cases from certain programs or entities; requiring the Secretary of the Health
12 and Mental Hygiene to appoint and convene a certain panel each year; requiring
13 certain panel to assist the Secretary in reviewing and determining certain codes
14 and bill protocols relating to child abuse and neglect cases; requiring the panel
15 to meet with certain representatives to provide certain training in certain codes
16 and billing protocols; requiring the panel to submit a certain report on or before
17 a certain date each year to the General Assembly on certain data collected on
18 data collected and activities of the Initiative; ~~requiring the Governor to include~~
19 ~~a certain appropriation in the State budget in a certain year; requiring the~~
20 ~~Governor to include a certain appropriation in the State budget each year of a~~
21 ~~certain amount; requiring the Office of Legislative Audits to audit certain~~
22 ~~accounts and transaction of the Initiative;~~ authorizing certain providers to
23 examine and treat certain children if the child is brought by certain individuals
24 required to report suspected child abuse or neglect; authorizing certain
25 providers to provide expert child abuse or neglect care under certain
26 circumstances; requiring the State Attorney General, in conjunction with the
27 Secretary and the Secretary of Human Resources to convene a certain

1 workgroup composed of certain representatives; requiring the workgroup to
2 investigate the use of, reimbursement for, availability of, and implementation of
3 videoconferencing as a resource in certain investigations; requiring the
4 workgroup to submit a certain report on or before a certain date to the General
5 Assembly regarding certain recommendations.

6 BY adding to
7 Article - Health - General
8 Section 13-2101 through ~~13-2107~~ 13-2105, inclusive, to be under the new
9 subtitle "Subtitle 21. Child Abuse and Neglect Centers of Excellence
10 Initiative"
11 Annotated Code of Maryland
12 (2000 Replacement Volume and 2004 Supplement)

13 BY repealing and reenacting, with amendments,
14 Article - Family Law
15 Section 5-712
16 Annotated Code of Maryland
17 (2004 Replacement Volume)

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

20 **Article - Health - General**

21 **SUBTITLE 21. CHILD ABUSE AND NEGLECT CENTERS OF EXCELLENCE INITIATIVE.**

22 13-2101.

23 (A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS
24 INDICATED.

25 (B) "CENTER OF EXCELLENCE" MEANS A LOCAL OR REGIONAL
26 MULTIDISCIPLINARY TEAM OF HEALTH CARE PROFESSIONALS AND HEALTH CARE
27 FACILITIES WITH THE EXPERTISE TO DIAGNOSE AND TREAT CHILD ABUSE AND
28 NEGLECT.

29 (C) "CENTERS OF EXCELLENCE FACULTY" MEANS A CORE GROUP OF
30 CLINICAL EXPERTS, ~~WHO ARE FACULTY MEMBERS FROM THE MARYLAND CHAPTER~~
31 ~~OF THE AMERICAN ACADEMY OF PEDIATRICS, UNIVERSITY OF MARYLAND MEDICAL~~
32 ~~SYSTEM, AND JOHNS HOPKINS MEDICAL INSTITUTES AS DESIGNATED BY THE~~
33 DEPARTMENT, WHO PROVIDE TRAINING, CONSULTATION, AND SUPPORT FOR THE
34 DIAGNOSIS AND TREATMENT OF CHILD ABUSE AND NEGLECT TO HEALTH CARE
35 PROFESSIONALS.

36 (D) "CHILD ADVOCACY CENTER" MEANS AN ENTITY WITHIN OR OUTSIDE A
37 HEALTH CARE FACILITY THAT DIAGNOSES AND TREATS CHILD ABUSE AND NEGLECT.

1 (E) "INITIATIVE" MEANS THE CHILD ABUSE AND NEGLECT CENTERS OF
2 EXCELLENCE INITIATIVE.

3 (F) "MULTIDISCIPLINARY TEAM" MEANS A GROUP OF PROFESSIONALS WITH
4 EXPERTISE IN VARIOUS HEALTH CARE AND SOCIAL SERVICE PROFESSIONAL
5 DISCIPLINES WHO PROVIDE CONSULTATION, TREATMENT, AND PLANNING IN CASES
6 OF CHILD ABUSE AND NEGLECT.

7 13-2102.

8 (A) THERE IS A CHILD ABUSE AND NEGLECT CENTERS OF EXCELLENCE
9 INITIATIVE IN THE DEPARTMENT.

10 (B) THE PURPOSE OF THE INITIATIVE IS:

11 (1) TO IMPROVE THE PROTECTION OF CHILDREN IN THE STATE;

12 (2) TO RECRUIT LOCAL PHYSICIANS TO GAIN CLINICAL EXPERTISE IN
13 THE DIAGNOSIS AND TREATMENT OF CHILD ABUSE AND NEGLECT;

14 (3) TO DEVELOP AND GUIDE THE PRACTICE OF LOCAL OR REGIONAL
15 MULTIDISCIPLINARY TEAMS TO IMPROVE THE ASSESSMENT AND TREATMENT OF
16 CHILDREN WHO ARE THE SUBJECT OF A CHILD ABUSE OR NEGLECT INVESTIGATION
17 OR A CHILD IN NEED OF ASSISTANCE;

18 (4) TO FACILITATE THE APPROPRIATE PROSECUTION OF CRIMINAL
19 CHILD ABUSE AND NEGLECT; AND

20 (5) TO PROVIDE EXPERT CONSULTATION AND TRAINING TO LOCAL OR
21 REGIONAL MULTIDISCIPLINARY TEAMS IN THE DIAGNOSIS AND TREATMENT OF
22 PHYSICAL CHILD ABUSE AND NEGLECT AND SEXUAL ABUSE THROUGH
23 TELECONFERENCING AND ON-SITE SERVICES.

24 13-2103.

25 ~~(A) THE INITIATIVE SHALL BE OPERATED, MANAGED, AND ADMINISTERED BY~~
26 ~~THE MARYLAND CHAPTER OF THE AMERICAN ACADEMY OF PEDIATRICS.~~

27 ~~(B) THE DEPARTMENT SHALL COOPERATE AND ASSIST THE MARYLAND~~
28 ~~CHAPTER OF THE AMERICAN ACADEMY OF PEDIATRICS IN OVERSEEING THE~~
29 ~~INITIATIVE.~~

30 ~~13-2104.~~

31 THE CENTERS OF EXCELLENCE FACULTY SHALL, SUBJECT TO THE
32 LIMITATIONS OF THE STATE BUDGET:

33 (1) ASSIST LOCAL AND REGIONAL JURISDICTIONS TO DEVELOP
34 STANDARDS AND PROTOCOLS FOR THE COMPOSITION AND OPERATION OF LOCAL OR
35 REGIONAL CENTERS OF EXCELLENCE;

1 (2) PROVIDE TRAINING AND CONSULTATION TO LOCAL OR REGIONAL
2 CENTERS OF EXCELLENCE IN THE DIAGNOSIS AND TREATMENT OF CHILD ABUSE
3 AND NEGLECT;

4 (3) INVENTORY EXISTING ACADEMIC AND EMERGENCY RESOURCES
5 AVAILABLE FOR TELECONFERENCING AND FACILITATE THE USE OF THESE
6 RESOURCES FOR CHILD ABUSE AND NEGLECT INVESTIGATIONS AND TREATMENT
7 PLANS; AND

8 (4) PROVIDE FINANCIAL SUPPORT TO PART-TIME LOCAL AND REGIONAL
9 EXPERT CLINIC STAFF FOR THE DIAGNOSIS AND TREATMENT OF CHILD ABUSE AND
10 NEGLECT.

11 ~~43-2105~~. 13-2104.

12 A CENTER OF EXCELLENCE MAY RECEIVE INFORMATION FROM THE
13 DEPARTMENT ON AND MAY CONSULT ON ANY CASE FROM:

14 (1) THE CHILDREN IN NEED OF ASSISTANCE PROGRAM;

15 (2) A CHILD COMMITTED TO THE DEPARTMENT OR A LOCAL
16 DEPARTMENT OF SOCIAL SERVICES; OR

17 (3) A CHILD WHO IS THE SUBJECT OF A CHILD ABUSE OR NEGLECT
18 INVESTIGATION.

19 ~~43-2106~~. 13-2105.

20 (A) THE SECRETARY SHALL APPOINT AND CONVENE AN EXPERT PANEL ON
21 CHILD ABUSE AND NEGLECT RELATING TO RESEARCH AND DATA COLLECTION AT
22 LEAST ONE TIME EACH YEAR.

23 (B) THE PANEL SHALL ASSIST THE SECRETARY IN:

24 (1) REVIEWING THE APPROPRIATENESS OF CURRENT PROCEDURAL
25 TERMINOLOGY (CPT) CODES AND BILLING PROTOCOLS FOR SERVICES PROVIDED
26 REGARDING CHILD ABUSE AND NEGLECT; AND

27 (2) DETERMINING HOW DIAGNOSIS AND TREATMENT DATA MAY BE
28 PRESERVED TO PROVIDE STATISTICS ON THE EXTENT OF CHILD ABUSE AND
29 NEGLECT IN THE STATE INCLUDING BY CREATING A SPECIAL BILLING CODE.

30 (C) THE PANEL SHALL MEET AT LEAST ONE TIME EACH YEAR WITH
31 REPRESENTATIVES FROM EVERY EMERGENCY ROOM, CHILD ADVOCACY CENTER,
32 AND OTHER FACILITIES PROVIDING EXPERT CHILD ABUSE AND NEGLECT CARE, AS
33 DEFINED IN § 5-712 OF THE FAMILY LAW ARTICLE, TO PROVIDE TRAINING IN
34 CURRENT PROCEDURAL TERMINOLOGY (CPT) CODES AND BILLING PROTOCOLS.

35 (D) THE PANEL SHALL SUBMIT A REPORT ON OR BEFORE DECEMBER 1 OF
36 EACH YEAR, IN ACCORDANCE WITH § 2-1246 OF THE STATE GOVERNMENT ARTICLE,

1 TO THE GENERAL ASSEMBLY ON THE DATA COLLECTED ON CHILD ABUSE AND
2 NEGLECT DIAGNOSIS TREATMENT AND THE ACTIVITIES OF THE INITIATIVE.

3 ~~13-2107.~~

4 ~~(A) IN FISCAL YEAR 2007, THE GOVERNOR SHALL INCLUDE IN THE STATE~~
5 ~~BUDGET AN APPROPRIATION IN THE AMOUNT OF \$225,000 FOR THE CHILD ABUSE~~
6 ~~AND NEGLECT CENTERS OF EXCELLENCE INITIATIVE.~~

7 ~~(B) IN EACH FISCAL YEAR BEGINNING WITH FISCAL 2007, THE GOVERNOR~~
8 ~~SHALL INCLUDE IN THE ANNUAL BUDGET BILL SUBMITTED TO THE GENERAL~~
9 ~~ASSEMBLY A GENERAL FUND APPROPRIATION FOR THE CHILD ABUSE AND NEGLECT~~
10 ~~CENTERS OF EXCELLENCE INITIATIVE IN AN AMOUNT NOT LESS THAN THE AMOUNT~~
11 ~~OF THE GENERAL FUND APPROPRIATION FOR THE INITIATIVE AS APPROVED IN THE~~
12 ~~STATE BUDGET AS ENACTED BY THE GENERAL ASSEMBLY FOR THE PRIOR FISCAL~~
13 ~~YEAR, INCREASED BY NOT LESS THAN THE PERCENTAGE BY WHICH THE PROJECTED~~
14 ~~TOTAL GENERAL FUND REVENUES FOR THE UPCOMING FISCAL YEAR EXCEED THE~~
15 ~~REVISED ESTIMATE OF TOTAL GENERAL FUND REVENUES FOR THE CURRENT~~
16 ~~FISCAL YEAR, AS CONTAINED IN THE REPORT OF THE ESTIMATED STATE REVENUES~~
17 ~~SUBMITTED BY THE BOARD OF REVENUE ESTIMATES TO THE GOVERNOR UNDER §~~
18 ~~6-106(B) OF THE STATE FINANCE AND PROCUREMENT ARTICLE.~~

19 ~~(C) THE OFFICE OF LEGISLATIVE AUDITS SHALL AUDIT THE ACCOUNTS AND~~
20 ~~TRANSACTIONS OF THE CHILD ABUSE AND NEGLECT CENTERS OF EXCELLENCE~~
21 ~~INITIATIVE IN ACCORDANCE WITH §§ 2-1220 THROUGH 2-1227 OF THE STATE~~
22 ~~GOVERNMENT ARTICLE.~~

23

Article - Family Law

24 5-712.

25 (a) (1) In this section[, "emergency"] THE FOLLOWING WORDS HAVE THE
26 MEANINGS INDICATED.

27 (2) (I) "EMERGENCY medical treatment" means medical or surgical
28 care rendered by a [physician or health care institution] PROVIDER IN A
29 LABORATORY, HEALTH CARE FACILITY, OR CHILD ADVOCACY CENTER to a child
30 under this section:

31 [(i)] 1. to relieve any urgent illness, INJURY, SEVERE EMOTIONAL
32 DISTRESS, or life-threatening health condition; or

33 [(ii)] 2. to determine the [nature] EXISTENCE, NATURE, or extent
34 of any POSSIBLE abuse or neglect.

35 [(2)] (II) "Emergency medical treatment" [does not include:

36 (i) nonemergency outpatient treatment; or

1 (ii) periodic nonemergency health care] INCLUDES, IF
2 APPROPRIATE, THE USE OF TELEMEDICINE TO ACHIEVE A TIMELY EXPERT
3 DIAGNOSIS OF CHILD ABUSE OR NEGLECT.

4 (3) "EXPERT CHILD ABUSE OR NEGLECT CARE" MEANS THE DIAGNOSIS
5 OR TREATMENT OF CHILD ABUSE OR NEGLECT PROVIDED BY:

6 (I) A PHYSICIAN;

7 (II) A MULTIDISCIPLINARY TEAM OR MULTIDISCIPLINARY TEAM
8 MEMBER;

9 (III) A HEALTH CARE FACILITY; OR

10 (IV) A STAFF MEMBER OF A HEALTH CARE FACILITY WHO IS AN
11 EXPERT IN THE FIELD OF ABUSE AND NEGLECT.

12 (4) "MULTIDISCIPLINARY TEAM" MEANS A GROUP OF PROFESSIONALS
13 WITH EXPERTISE IN VARIOUS PROFESSIONAL DISCIPLINES WHO PROVIDE
14 CONSULTATION, TREATMENT, AND PLANNING IN CASES OF CHILD ABUSE AND
15 NEGLECT.

16 (5) "PROVIDER" INCLUDES A PHYSICIAN, MULTIDISCIPLINARY TEAM OR
17 MULTIDISCIPLINARY TEAM MEMBER, A CHILD ADVOCACY CENTER, A HEALTH CARE
18 FACILITY, OR HEALTH CARE FACILITY PERSONNEL.

19 (b) Any [physician] PROVIDER who is licensed or authorized to practice
20 [medicine] A PROFESSION in this State shall examine or treat any child, with or
21 without the consent of the child's parent, guardian, or custodian, to determine the
22 nature and extent of any abuse or neglect to the child if the child is brought to the
23 [physician]:

24 (1) in accordance with a court order;

25 (2) by a representative of a local department OF SOCIAL SERVICES who
26 states that the representative believes the child is an abused or neglected child; [or]

27 (3) by a police officer who states that the officer believes that the child is
28 an abused or neglected child; OR

29 (4) BY AN INDIVIDUAL REQUIRED UNDER § 5-704 OF THIS SUBTITLE TO
30 REPORT SUSPECTED CHILD ABUSE OR NEGLECT.

31 (c) If a [physician] PROVIDER examines a child under subsection (b) of this
32 section and determines that emergency medical treatment OR EXPERT CHILD ABUSE
33 OR NEGLECT CARE is indicated, the physician may treat the child, with or without the
34 consent of the child's parent, guardian, or custodian.

1 (d) A [physician] PROVIDER who examines or treats a child under this section
2 shall have the immunity from liability described under § 5-621 of the Courts and
3 Judicial Proceedings Article.

4 (e) (1) In accordance with regulations adopted by the Secretary of Health
5 and Mental Hygiene, the Department of Health and Mental Hygiene shall pay for
6 emergency medical treatment charges that are incurred on behalf of a child who is
7 examined or treated under this section.

8 (2) The child's parent or guardian is liable to the Department of Health
9 and Mental Hygiene for the payments and shall take any steps necessary to secure
10 health benefits available for the child from a public or private benefit program.

11 (3) The local department shall:

12 (i) immediately determine whether a child treated or examined
13 under this section is eligible for medical assistance payments; and

14 (ii) secure medical assistance benefits for any eligible child
15 examined or treated under this section.

16 (f) To the extent possible, the Governor shall include in the annual State
17 budget funds for the payment of emergency medical treatment for children examined
18 or treated under this section.

19 SECTION 2. AND BE IT FURTHER ENACTED, That:

20 (a) The Attorney General, in conjunction with the Secretary of Health and
21 Mental Hygiene and the Secretary of Human Resources, shall convene a workgroup
22 that consists of the following members:

23 (1) a State's Attorney with expertise in the prosecution of child abuse
24 and neglect;

25 (2) local directors of social services;

26 (3) local health officers;

27 (4) representative from the courts with expertise in child abuse and
28 neglect issues; and

29 (5) individuals who have participated in the prosecution of a child abuse
30 or neglect case as a witness, especially pediatricians.

31 (b) The workgroup shall investigate and make recommendations on the use of,
32 reimbursement for, availability of, and implementation of videoconferencing as a
33 resource in a child abuse or neglect investigation in the State.

34 (c) The workgroup shall submit a report on or before December 1, 2005, in
35 accordance with § 2-1246 of the State Government Article, to the General Assembly

1 regarding recommendations on videoconferencing as a resource in a child abuse or
2 neglect investigation.

3 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect
4 October 1, 2005.