

HB1395/766883/1

BY: Health and Government Operations Committee

AMENDMENTS TO HOUSE BILL 1395

(First Reading File Bill)

AMENDMENT NO. 1

On page 1, in the sponsor line, strike “and Riley” and substitute “Riley, and Nathan-Pulliam”; strike line 2 in its entirety and substitute “Department of Health and Mental Hygiene and Maryland Health Quality and Cost Council – Chronic Care Management Plan”; in line 3, after “of” insert “requiring the Department of Health and Mental Hygiene and the Maryland Health Quality and Cost Council to study chronic care management and develop a certain chronic care management plan; requiring the chronic care management plan to include certain plans; requiring the Department and the Council to consult with certain persons in developing the chronic care management plan; authorizing the Council to accept certain funds; requiring the Department and the Council to submit the chronic care management plan to the Governor and the General Assembly on or before a certain date; providing for the termination of this Act; and generally relating to a chronic care management plan.”; strike beginning with “establishing” in line 3 down through “State.” in line 14; and strike in their entirety lines 15 through 20, inclusive.

AMENDMENT NO. 2

On page 1, in line 22, strike “the Laws of Maryland read as follows”; and after line 22, insert:

“(a) The Department of Health and Mental Hygiene and the Maryland Health Quality and Cost Council shall study chronic care management and develop a chronic care management plan to improve the quality and cost-effectiveness of care for individuals who have or are at risk for a chronic disease.

(b) The chronic care management plan shall include plans for:

(Over)

- (1) patient self-management, in collaboration with a health care team;
- (2) incentives for provision of care consistent with evidence-based standards;
- (3) ways to engage communities to fight physical inactivity and obesity;
- (4) identification of information technology that supports care management;
- (5) linkages between financing mechanisms and performance measures;
- (6) disseminating scientifically sound, evidence-based information to health care providers regarding prevention and treatment of targeted chronic conditions;
- (7) coordinating with appropriate chronic care resources to collect data and evaluate the clinical, social, and economic impact of chronic care and prevention activities in different regions of the State; and
- (8) considering best practices across the public and private sectors, including existing initiatives in Maryland, such as the P3 Program, and the experiences of other states.

(c) In developing the chronic care management plan, the Department of Health and Mental Hygiene and the Maryland Health Quality and Cost Council shall consult with:

- (1) physicians;
- (2) pharmacists;

- (3) hospitals;
- (4) health insurance carriers, including managed care organizations;
- (5) patient advocates;
- (6) community mental health providers; and
- (7) registered nurses.

(d) The Maryland Health Quality and Cost Council may accept funds from any source, including grants and donations, to cover costs associated with the study of chronic care management and development of the chronic care management plan.

(e) On or before December 1, 2009, the Department of Health and Mental Hygiene and the Maryland Health Quality and Cost Council shall submit the chronic care management plan to the Governor and, in accordance with § 2-1246 of the State Government Article, the General Assembly.”.

On pages 1 through 11, strike in their entirety the lines beginning with line 23 on page 1 through line 31 on page 11, inclusive.

AMENDMENT NO. 3

On page 11, in line 33, after “2008.” insert “It shall remain effective for a period of 2 years and, at the end of May 31, 2010, with no further action required by the General Assembly, this Act shall be abrogated and of no further force and effect.”.