## **SENATE BILL 899**

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8lr3351 CF HB 1176

## By: **Senator Rosapepe** Introduced and read first time: February 18, 2008 Assigned to: Rules

## A BILL ENTITLED

1 AN ACT concerning

Public Health – Task Force on Childhood Obesity
FOR the purpose of establishing a Task Force on Childhood Obesity to provide certain advice and recommendations to the Governor and the General Assembly on certain issues; specifying the membership, terms, chairman, and staff of the Task Force; requiring the Task Force to issue a certain report on or before a certain date; providing for the termination of this Act; and generally relating to the Task Force on Childhood Obesity.
BY adding to Article – Health – General Section 19–710.4 Annotated Code of Maryland (2005 Replacement Volume and 2007 Supplement) SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:
Article – Health – General
19-710.4.
(A) THERE IS A TASK FORCE ON CHILDHOOD OBESITY.
(B) (1) THE TASK FORCE CONSISTS OF 17 MEMBERS.
(2) <b>OF THE 17 MEMBERS:</b>
(I) ONE SHALL DE A MEMDED OF THE SENATE OF

## 21(I) ONE SHALL BE A MEMBER OF THE SENATE OF22MARYLAND, APPOINTED BY THE PRESIDENT OF THE SENATE;

EXPLANATION: **CAPITALS INDICATE MATTER ADDED TO EXISTING LAW**. [Brackets] indicate matter deleted from existing law.



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1 ONE SHALL BE A MEMBER OF THE HOUSE OF **(II)**  $\mathbf{2}$ **DELEGATES, APPOINTED BY THE SPEAKER OF THE HOUSE;** 3 (III) ONE SHALL BE THE SECRETARY OF HEALTH AND 4 **MENTAL HYGIENE, OR THE SECRETARY'S DESIGNEE;**  $\mathbf{5}$ (IV) ONE SHALL BE THE STATE SUPERINTENDENT OF 6 SCHOOLS, OR THE SUPERINTENDENT'S DESIGNEE; 7 **(V)** ONE SHALL BE THE INSURANCE COMMISSIONER, OR 8 THE INSURANCE COMMISSIONER'S DESIGNEE; 9 (VI) ONE SHALL BE A REPRESENTATIVE OF THE MARYLAND 10 **HEALTH CARE COMMISSION; AND** 11 (VII) 11 SHALL BE APPOINTED BY THE GOVERNOR. 12 (3) OF THE 11 MEMBERS APPOINTED BY THE GOVERNOR: 13**(I) ONE SHALL BE A REPRESENTATIVE OF THE MARYLAND** 14 **CHAPTER OF THE AMERICAN ACADEMY OF PEDIATRICS:** 15**(II) ONE SHALL BE A REPRESENTATIVE OF THE CHILDREN'S** NATIONAL MEDICAL CENTER; 16 17(III) ONE SHALL BE A REPRESENTATIVE OF THE JOHNS 18 HOPKINS CHILDREN'S CENTER; 19 (IV) ONE SHALL BE A REPRESENTATIVE OF THE MARYLAND 20 **Association of Boards of Education;** 21**(V) ONE SHALL BE A NUTRITIONIST:** 22(VI) ONE SHALL BE A CHILD PSYCHIATRIST OR CHILD 23**PSYCHOLOGIST;** 24(VII) ONE SHALL BE A PROCESSOR OR MANUFACTURER OF 25THE FOOD INDUSTRY; 26(VIII) ONE SHALL BE AN EXPERT ON DIABETES: 27**ONE SHALL BE AN EXPERT ON PHYSICAL EDUCATION OR (IX)** 28**SPORTS MEDICINE;** 

**ONE SHALL BE A REPRESENTATIVE OF A PARENT** 

**(X)** 

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 $\mathbf{2}$ **TEACHER ASSOCIATION: AND** 3 (XI) ONE SHALL BE A REPRESENTATIVE OF THE MARYLAND 4 **RESTAURANT ASSOCIATION.**  $\mathbf{5}$ **(C)** IN PERFORMING ITS DUTIES, THE TASK FORCE MAY CONSULT WITH INDIVIDUALS AND ENTITIES THAT THE SECRETARY OF HEALTH AND MENTAL 6 7 HYGIENE DEEMS APPROPRIATE. 8 THE SECRETARY OF HEALTH AND MENTAL HYGIENE SHALL: **(D)** (1) 9 **(I) CHAIR THE TASK FORCE;** 10 **(II)** ESTABLISH **SUBCOMMITTEES** AND APPOINT 11 SUBCOMMITTEE CHAIRS AS NECESSARY TO FACILITATE THE WORK OF THE TASK 12**FORCE; AND** 13 (III) PROVIDE STAFF SUPPORT FOR THE TASK FORCE FROM 14 THE DEPARTMENT. 15**(2)** TO THE EXTENT PRACTICABLE, THE MEMBERS APPOINTED TO 16 THE TASK FORCE SHALL REASONABLY REFLECT THE GEOGRAPHIC, RACIAL, 17 ETHNIC, CULTURAL, AND GENDER DIVERSITY OF THE STATE. 18 (3) IN PERFORMING ITS DUTIES, THE TASK FORCE SHALL INVITE 19 ALL INTERESTED GROUPS TO PRESENT TESTIMONY OR OTHER INFORMATION TO 20THE TASK FORCE ON THE ISSUES TO BE STUDIED BY THE TASK FORCE. 21A MEMBER OF THE TASK FORCE MAY NOT RECEIVE COMPENSATION **(E)** 22AS A MEMBER OF THE TASK FORCE BUT IS ENTITLED TO REIMBURSEMENT FOR 23EXPENSES UNDER THE STANDARD STATE TRAVEL REGULATIONS, AS PROVIDED 24IN THE STATE BUDGET. 25**(F)** THE TASK FORCE SHALL PROVIDE **ADVICE** AND 26 **RECOMMENDATIONS TO THE GOVERNOR AND THE GENERAL ASSEMBLY WITH** 27**RESPECT TO CHILDHOOD OBESITY BY:** 28(1) STUDYING DATA ON THE REIMBURSEMENTS PAID TO 29 PHYSICIANS AND OTHER HEALTH CARE PROVIDERS BY HEALTH INSURANCE 30 **CARRIERS TO TREAT CHILDHOOD OBESITY:** 

1 (2) STUDYING LINKS BETWEEN REIMBURSEMENT POLICIES FOR 2 TREATMENT OF CHILDHOOD OBESITY AS A PRIMARY DIAGNOSIS AND HOW IT 3 AFFECTS THE ACCESS OF CHILDREN TO PUBLICLY AND PRIVATELY FUNDED 4 HEALTH CARE;

5 (3) STUDYING REQUIREMENTS FOR PHYSICAL EDUCATION IN THE
6 PUBLIC SCHOOLS OF THE STATE AND HOW THEY AFFECT RATES OF CHILDHOOD
7 OBESITY;

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(4) INVESTIGATING PRACTICES IN OTHER STATES;

9 (5) EXPLORING WAYS TO INCREASE PUBLIC AWARENESS OF THE 10 PROBLEMS SURROUNDING CHILDHOOD OBESITY AND THE INCREASED NUMBER 11 OF CHILDREN DEVELOPING DIABETES;

12 (6) EXPLORING THE FEASIBILITY OF THE STATE BOARD OF 13 EDUCATION CREATING AND PROMOTING A HEALTHY SCHOOLS INITIATIVE 14 PROGRAM WITH AWARDS FOR PERFORMANCE AND RESULTS;

15(7) DEVELOPING A SYSTEM FOR COLLECTING, ANALYZING, AND16MAINTAINING STATEWIDE DATA;

17 (8) DEVELOPING WAYS TO PROMOTE THE BETTER USE OF AFTER
 18 SCHOOL FACILITIES AND SHARED FACILITIES WITH THE COMMUNITY FOR
 19 PHYSICAL ACTIVITIES;

20(9) EXPLORING WAYS TO ENCOURAGE SCHOOLS, RESTAURANTS,21AND THE FOOD INDUSTRY TO INCREASE THE NUMBER AND VARIETY OF22NUTRITIOUS FOOD OFFERINGS; AND

(10) STUDYING THE FEASIBILITY OF MANDATING BODY MASS
 INDEX SCREENINGS IN PUBLIC SCHOOLS AND HOW THE SCREENING
 INFORMATION WOULD BE USED.

26 (G) THE TASK FORCE SHALL REPORT ITS FINDINGS AND
27 RECOMMENDATIONS TO THE GOVERNOR AND, SUBJECT TO § 2–1246 OF THE
28 STATE GOVERNMENT ARTICLE, THE GENERAL ASSEMBLY, ON OR BEFORE
29 DECEMBER 31, 2009.

30 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect 31 July 1, 2008. It shall remain effective for a period of 2 years and, at the end of June 30, 32 2010, with no further action required by the General Assembly, this Act shall be 33 abrogated and of no further force and effect.

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