

HOUSE BILL 756

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9lr2272

By: Delegates Nathan-Pulliam, Ali, Benson, Braveboy, Gutierrez, Haynes, Ivey, Kaiser, Lee, Levy, Montgomery, Pena-Melnyk, Ramirez, Reznik, Taylor, and Valderrama

Introduced and read first time: February 11, 2009

Assigned to: Health and Government Operations

Committee Report: Favorable with amendments

House action: Adopted

Read second time: March 27, 2009

CHAPTER _____

1 AN ACT concerning

2 **Cultural and Linguistic Health Care Provider Competency Program**

3 FOR the purpose of establishing a Cultural and Linguistic Health Care Provider
4 Competency Program; providing for the purpose of the Program; ~~requiring the~~
5 ~~Program to operate through certain professional associations; requiring~~
6 encouraging certain professional societies to ~~develop a~~ identify certain training
7 ~~program~~ programs or to develop or collaborate in the development of certain
8 training programs, if feasible; ~~providing for the funding for the Program;~~
9 ~~requiring the Office of Minority Health and Health Disparities to convene a~~
10 ~~certain workgroup~~; requiring the Department of Health and Mental Hygiene to
11 develop a certain method through which certain training is recognized by
12 certain licensing boards; defining certain terms; and generally relating to the
13 Cultural and Linguistic Health Care Provider Competency Program.

14 BY adding to

15 Article – Health – General

16 Section 20-1301 through ~~20-1306~~ 20-1304 to be under the new subtitle

17 “Subtitle 13. Cultural and Linguistic Competency of Health Care
18 Providers”

19 Annotated Code of Maryland

20 (2005 Replacement Volume and 2008 Supplement)

21 Preamble

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

~~Strike-out~~ indicates matter stricken from the bill by amendment or deleted from the law by amendment.



1 WHEREAS, Research suggests that health care providers' diagnostic and
2 treatment decisions, as well as their feelings about patients, are influenced by
3 patients' race or ethnicity; and

4 WHEREAS, Health care providers may not recognize manifestations of
5 prejudice in their own behavior; and

6 WHEREAS, Education programs regarding cultural competence, sensitivity,
7 and health literacy have been developed to enhance health professionals' awareness of
8 how cultural and social factors influence health care, while providing methods to
9 obtain, negotiate, and manage this information clinically once it is obtained; now,
10 therefore,

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

13 **Article - Health - General**

14 **SUBTITLE 13. CULTURAL AND LINGUISTIC COMPETENCY OF HEALTH CARE**
15 **PROVIDERS.**

16 **20-1301.**

17 **(A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS**
18 **INDICATED.**

19 **(B) "CULTURAL AND LINGUISTIC COMPETENCY" MEANS CULTURAL AND**
20 **LINGUISTIC ABILITIES THAT CAN BE INCORPORATED INTO THERAPEUTIC AND**
21 **MEDICAL EVALUATION AND TREATMENT, INCLUDING:**

22 **(1) DIRECT COMMUNICATION IN THE PATIENT'S PRIMARY**
23 **LANGUAGE;**

24 **(2) UNDERSTANDING AND APPLYING THE ROLES THAT CULTURE,**
25 **ETHNICITY, AND RACE PLAY IN DIAGNOSIS, TREATMENT, AND CLINICAL CARE;**
26 **AND**

27 **(3) AWARENESS OF HOW THE ATTITUDES, VALUES, AND BELIEFS**
28 **OF HEALTH CARE PROVIDERS AND PATIENTS INFLUENCE AND IMPACT**
29 **PROFESSIONAL AND PATIENT RELATIONS.**

30 **(C) "HEALTH CARE PROVIDER" INCLUDES A PHYSICIAN, NURSE,**
31 **DENTIST, SOCIAL WORKER, PSYCHOLOGIST, OR OTHER ALLIED HEALTH**
32 **PROFESSIONAL.**

1 (D) "PROGRAM" MEANS THE CULTURAL AND LINGUISTIC HEALTH
2 CARE PROVIDER COMPETENCY PROGRAM.

3 20-1302.

4 (A) THERE IS A CULTURAL AND LINGUISTIC HEALTH CARE PROVIDER
5 COMPETENCY PROGRAM.

6 (B) THE PURPOSE OF THE PROGRAM IS TO PROVIDE FOR A VOLUNTARY
7 PROGRAM IN WHICH EDUCATIONAL CLASSES ARE OFFERED TO HEALTH CARE
8 PROVIDERS TO TEACH HEALTH CARE PROVIDERS:

9 (1) METHODS TO IMPROVE THE HEALTH CARE PROVIDER'S
10 CULTURAL AND LINGUISTIC COMPETENCY TO COMMUNICATE WITH
11 NON-ENGLISH SPEAKING PATIENTS AND PATIENTS FROM OTHER CULTURES
12 WHO ARE ENGLISH SPEAKING;

13 (2) CULTURAL BELIEFS AND PRACTICES THAT MAY IMPACT
14 PATIENT HEALTH CARE PRACTICES AND ALLOW HEALTH CARE PROVIDERS TO
15 INCORPORATE THE KNOWLEDGE OF THE BELIEFS AND PRACTICES IN THE
16 DIAGNOSIS AND TREATMENT OF PATIENTS; AND

17 (3) METHODS TO ENABLE HEALTH CARE PROVIDERS TO
18 INCREASE THE HEALTH LITERACY OF THEIR PATIENTS TO IMPROVE THE
19 PATIENT'S ABILITY TO OBTAIN, PROCESS, AND UNDERSTAND BASIC HEALTH
20 INFORMATION AND SERVICES TO MAKE APPROPRIATE HEALTH CARE
21 DECISIONS.

22 20-1303.

23 ~~(A) THE PROGRAM SHALL OPERATE THROUGH THE~~ THE MEDICAL AND
24 CHIRURIGICAL FACULTY OF MARYLAND, THE STATE MEDICAL SOCIETY, THE
25 MARYLAND NURSES ASSOCIATION, THE MARYLAND STATE DENTAL
26 ASSOCIATION, THE NATIONAL ASSOCIATION OF SOCIAL WORKERS -
27 MARYLAND CHAPTER, AND THE MARYLAND SOCIETY FOR CLINICAL SOCIAL
28 WORK, THE MARYLAND PSYCHOLOGICAL ASSOCIATION, OR ANY OTHER
29 HEALTH PROFESSIONAL ASSOCIATION IN THE STATE IS ENCOURAGED TO
30 IDENTIFY TRAINING PROGRAMS, OR, IF FEASIBLE, TO DEVELOP OR
31 COLLABORATE IN THE DEVELOPMENT OF TRAINING PROGRAMS, THAT;

32 ~~(B) EACH PROFESSIONAL SOCIETY LISTED IN SUBSECTION (A) OF THIS~~
33 ~~SECTION SHALL DEVELOP A TRAINING PROGRAM TO ADDRESS;~~

34 (1) ADDRESS ETHNIC LANGUAGE OR RACIAL GROUPS OF
35 INTEREST TO THE HEALTH CARE PROVIDER MEMBERS ~~THAT;~~;

1 ~~(1)~~ (2) **IS ARE** BASED ON THE ESTABLISHED KNOWLEDGE OF
2 HEALTH CARE PROVIDERS SERVING TARGET POPULATIONS;

3 ~~(2)~~ (3) **IS ARE** DEVELOPED IN COLLABORATION WITH THE
4 OFFICE OF MINORITY HEALTH AND HEALTH DISPARITIES; AND

5 ~~(3)~~ (4) ~~INCLUDES~~ INCLUDE STANDARDS THAT IDENTIFY THE
6 DEGREE OF COMPETENCY FOR PARTICIPANTS TO QUALIFY FOR COMPLETION OF
7 ~~THE A~~ PROGRAM.

8 ~~20-1304.~~

9 ~~THE PROGRAM SHALL BE FUNDED THROUGH FEES PAID BY THE HEALTH~~
10 ~~CARE PROVIDERS WHO ENROLL IN THE TRAINING PROGRAMS AND BY ANY~~
11 ~~OTHER SOURCE OF FUNDING OBTAINED BY THE APPROPRIATE PROFESSIONAL~~
12 ~~SOCIETY.~~

13 ~~20-1305.~~

14 ~~THE OFFICE OF MINORITY HEALTH AND HEALTH DISPARITIES SHALL~~
15 ~~CONVENE A WORKGROUP INCLUDING PATIENTS, HEALTH CARE PROVIDERS,~~
16 ~~AND THE PROFESSIONAL SOCIETIES LISTED IN § 20-1303(A) OF THIS SUBTITLE~~
17 ~~TO EVALUATE THE TRAINING PROGRAMS ESTABLISHED UNDER THIS SUBTITLE.~~

18 ~~20-1306.~~ 20-1304.

19 **THE DEPARTMENT OF HEALTH AND MENTAL HYGIENE SHALL DEVELOP A**
20 **METHOD THROUGH WHICH THE APPROPRIATE PROFESSIONAL LICENSING**
21 **BOARD RECOGNIZES THE TRAINING RECEIVED BY HEALTH CARE PROVIDERS**
22 **UNDER THIS SUBTITLE, EITHER THROUGH CONTINUING EDUCATION CREDITS**
23 **OR OTHERWISE.**

24 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
25 October 1, 2009.