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By: Delegates Nathan-Pulliam, Branch, Braveboy, Burns, Costa, Elliott, Gaines, Gutierrez, Howard, Hubbard, Ivey, Jones, Kipke, Krebs, Morhaim, Murphy, Oaks, B. Robinson, Tarrant, and V. Turner V. Turner, Lee, Pena-Melnyk, Kach, Reznik, A. Kelly, and Cullison

Introduced and read first time: February 8, 2012 Assigned to: Health and Government Operations

Committee Report: Favorable with amendments

House action: Adopted

Read second time: March 18, 2012

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1 AN ACT concerning

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Hepatitis B and Hepatitis C Viruses – Public Awareness, Treatment, and Outreach

4 FOR the purpose of requiring the Department of Health and Mental Hygiene, as funds 5 are available, to conduct a certain needs assessment, initiate a certain 6 statewide public awareness campaign, solicit certain funding, and review and 7 recommend certain initiatives related to the hepatitis B virus; requiring the 8 Department, as funds are available, to coordinate with the Maryland Office of 9 Minority Health and Health Disparities to activate develop certain hepatitis B 10 virus and hepatitis C virus plans; requiring the Department, as funds are 11 available, to develop a certain plan and certain recommendations and to collaborate with the Maryland Insurance Administration to make certain 12 13 recommendations regarding certain insurance coverage; requiring the Maryland 14 Health Care Commission to examine certain research findings and make a 15 certain report to the Governor and certain committees of the General Assembly 16 on or before a certain date; repealing the termination date for provisions of law 17 that require the Department to conduct certain outreach and public awareness 18 campaigns and make certain reports regarding the hepatitis C virus; and 19 generally relating to public awareness, treatment, and outreach relating to the 20 hepatitis B and hepatitis C viruses.

BY repealing and reenacting, with amendments,

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

<u>Underlining</u> indicates amendments to bill.

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



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1 2 3 4	Article – Health – General Section 18–1001 Annotated Code of Maryland (2009 Replacement Volume and 2011 Supplement)
5 6 7 8	BY repealing and reenacting, without amendments, Article – Health – General Section 18–1002 Annotated Code of Maryland
9 10 11 12	(2009 Replacement Volume and 2011 Supplement) BY repealing and reenacting, with amendments, Chapter 457 of the Acts of the General Assembly of 2006, as amended by Chapter 125 of the Acts of the General Assembly of 2009
1314	Section 4 Preamble
15 16	WHEREAS, There are approximately 5,300,000 individuals with hepatitis B, hepatitis C, or both living in the United States; and
17 18	WHEREAS, Hepatitis B and hepatitis C are viral infections that attack the liver and can cause both acute and chronic disease; and
19	WHEREAS, One in 20 Americans has been infected with hepatitis B; and
20 21	WHEREAS, The Centers for Disease Control has recognized hepatitis B as the deadliest vaccine—preventable disease; and
22 23	WHEREAS, Hepatitis C is three to four times more prevalent than human immunodeficiency virus (HIV) and is much more infectious than HIV; and
24 25 26	WHEREAS, Hepatitis B and hepatitis C disproportionately affect minority populations, including African Americans, Hispanics, American Indian/Native Americans as well as Asian and Pacific Islanders; and
27 28 29 30	WHEREAS, The annual health care costs attributable to hepatitis B are estimated to be approximately \$2,000 per infected individual and the annual health care costs attributable to treating hepatitis C with protease inhibitors are approximately \$30,000 per infected individual; and
31 32	WHEREAS, Direct antibodies treatment of hepatitis C, a newer treatment, is associated with a 91% to 94% cure rate; and
33	WHEREAS, Hepatitis B and hepatitis C patients who progress to end-stage

liver disease may require treatments costing between \$30,980 and \$110,576 per

- hospital admission, and hepatitis B and hepatitis C patients who are diagnosed too late may require a liver transplant costing at least \$314,000; and
- WHEREAS, The Centers for Disease Control has revised its vaccine recommendations to include vaccination at birth, vaccination of all previously unvaccinated children and adolescents, and vaccination of previously unvaccinated adults at risk for hepatitis B infection in an effort to eliminate hepatitis B from the United States; and
- 8 WHEREAS, There is no vaccination for hepatitis C; and
- 9 WHEREAS, According to the Institute of Medicine, hepatitis B and hepatitis C 10 infections cause substantial morbidity and mortality despite being preventable and 11 treatable; now, therefore,
- SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:
- 14 Article Health General
- 15 18–1001.
- 16 As funds are available, the Department shall:
- 17 (1) Conduct a needs assessment to determine the incidence of the 18 **HEPATITIS B VIRUS AND** hepatitis C virus in the State;
- 19 (2) Initiate a statewide public awareness campaign targeting 20 vulnerable populations and health care providers in the State to urge **HEPATITIS B** 21 **VIRUS AND** hepatitis C virus education and testing;
- 22 (3) Coordinate with other units of State government, including the 23 Department of Public Safety and Correctional Services and the Veterans' 24 Administration, to activate a hepatitis C virus plan for the education, testing, and 25 treatment of the populations within the jurisdiction of the units;
- 26 (4) Solicit funding from the private sector and units of federal, state, and local government for **HEPATITIS B VIRUS AND** hepatitis C virus outreach;
- 28 (5) Provide funding for hepatitis C virus pilot programs, which may 29 include programs in methadone clinics or programs for the Department of Correctional 30 Services population;
- 31 (6) Review and recommend initiatives to promote advocacy, education, 32 physician outreach, and awareness of the **HEPATITIS B VIRUS AND** hepatitis C virus;

1 2 3	(7) Assess the feasibility of creating a Hepatitis C Virus Administration in the Department and examine methods to maximize existing resources to raise awareness of the hepatitis virus; [and]
4	(8) Implement the 2005 Report of the Hepatitis C Advisory Council;
5	(9) COORDINATE WITH THE MARYLAND OFFICE OF MINORITY
6	HEALTH AND HEALTH DISPARITIES TO DEVELOP AND ACTIVATE A HEPATITIS E
7	VIRUS PLAN AND A HEPATITIS C VIRUS PLAN FOR THE EDUCATION, TESTING
8	AND TREATMENT OF HIGH RISK POPULATIONS AND ETHNIC AND RACIAL
9	POPULATIONS WHO ARE AFFECTED DISPROPORTIONATELY BY THE HEPATITIS E
10	AND HEPATITIS C VIRUSES, INCLUDING THE ASIAN POPULATION AND AFRICAN
11	IMMIGRANTS;
12	(10) DEVELOP A PLAN TO INCREASE THE AVAILABILITY AND
13	PROVISION OF HEPATITIS B VIRUS VACCINATIONS IN THE STATE, IN
14	ACCORDANCE WITH RECOMMENDATIONS FROM THE CENTERS FOR DISEASE
15	CONTROL;
1.0	(11) Privil of Decomply Micror to IMPROVE THE ANAPPRING
16 17	(11) DEVELOP RECOMMENDATIONS TO IMPROVE THE AWARENESS AND THE AFFORDABILITY OF MEDICATIONS FOR TREATING THE HEPATITIS C
18	VIRUS; AND
	,
19	(12) COLLABORATE WITH THE MARYLAND INSURANCE
20	ADMINISTRATION TO MAKE RECOMMENDATIONS REGARDING INSURANCE
21	COVERAGE FOR COMPLICATIONS ASSOCIATED WITH MEDICATIONS USED FOR
22	THE TREATMENT OF THE HEPATITIS C VIRUS.
23	18–1002.
24 25 26 27 28	On or before December 1, 2006, and annually thereafter, the Department shall report to the Governor and, in accordance with § 2–1246 of the State Government Article, to the Senate Education, Health, and Environmental Affairs Committee and the House Health and Government Operations Committee on the activities of the Department in implementing § 18–1001 of this subtitle.
29 30	Chapter 457 of the Acts of 2006, as amended by Chapter 125 of the Acts of 2009
31 32 33 34	SECTION 4. AND BE IT FURTHER ENACTED, That this Act shall take effect July 1, 2006. [Section 2 of this Act shall remain effective for a period of 7 years and, at the end of June 30, 2013, with no further action required by the General Assembly Section 2 of this Act shall be abrogated and of no further force and effect.]

President of the Senate.
Speaker of the House of Delegates.
Governor.
Approved:
July 1, 2012.
SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effectively 1, 2012
(2) on or before December 1, 2012, report its findings and recommendations to the Governor and, in accordance with § 2–1246 of the State Government Article, to the Senate Education, Health, and Environmental Affairs Committee and the House Health and Government Operations Committee.
(1) examine <u>existing</u> research findings related to health disparities in the effectiveness of medical treatment of African Americans with hepatitis C and make recommendations for <u>collect recommended</u> protocols for treating African Americans who have hepatitis C <u>from experts in the field</u> ; and
SECTION 2. AND BE IT FURTHER ENACTED, That the Maryland Health Care Commission shall: