

# SENATE BILL 1040

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CF HB 1258

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By: ~~Senator Garagiola~~ Senators Garagiola, Astle, Glassman, Kelley, Klausmeier, Kittleman, Mathias, Middleton, Pipkin, Pugh, and Ramirez

Introduced and read first time: March 1, 2013

Assigned to: Rules

Re-referred to: Finance, March 7, 2013

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Committee Report: Favorable with amendments

Senate action: Adopted

Read second time: March 21, 2013

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## CHAPTER \_\_\_\_\_

1 AN ACT concerning

2 **Mental Hygiene – Reform of Laws and Delivery of Services**

3 FOR the purpose of modifying certain standards for involuntary admissions of  
4 individuals with mental disorders to certain facilities or a Veterans'  
5 Administration hospital under certain circumstances; modifying certain  
6 standards for emergency evaluations of individuals with mental disorders under  
7 certain circumstances; modifying certain standards for clinical review panel  
8 approval; establishing the Task Force on the Delivery of Services to Individuals  
9 with Mental Illness; providing for the membership and staffing of the Task  
10 Force; requiring the Governor to designate the chair of the Task Force;  
11 providing that a member of the Task Force may not receive compensation as a  
12 member of the Task Force but is entitled to certain reimbursement; requiring  
13 the Task Force to examine certain issues and make certain reports to the  
14 Governor and General Assembly; defining certain terms; making stylistic  
15 changes; providing for the termination of certain provisions of this Act; and  
16 generally relating to the reform of mental hygiene laws and delivery of services  
17 to individuals with mental illness.

18 BY renumbering

19 Article – Health – General

20 Section 10–631 through 10–633, respectively

21 to be Section 10–632 through 10–634, respectively

22 Annotated Code of Maryland

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### 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 (2009 Replacement Volume and 2012 Supplement)

2 BY repealing and reenacting, with amendments,  
3 Article – Health – General  
4 Section 10–613, 10–617(a), 10–620, 10–622(a) and (c), 10–623(b), 10–626(a), and  
5 10–708(g)  
6 Annotated Code of Maryland  
7 (2009 Replacement Volume and 2012 Supplement)

8 BY repealing and reenacting, without amendments,  
9 Article – Health – General  
10 Section 10–708(a)  
11 Annotated Code of Maryland  
12 (2009 Replacement Volume and 2012 Supplement)

13 BY adding to  
14 Article – Health – General  
15 Section 10–631  
16 Annotated Code of Maryland  
17 (2009 Replacement Volume and 2012 Supplement)

18 BY repealing and reenacting, without amendments,  
19 Article – Health – General  
20 Section 10–633(a)  
21 Annotated Code of Maryland  
22 (2009 Replacement Volume and 2012 Supplement)  
23 (As enacted by Section 1 of this Act)

24 BY repealing and reenacting, with amendments,  
25 Article – Health – General  
26 Section 10–633(e)  
27 Annotated Code of Maryland  
28 (2009 Replacement Volume and 2012 Supplement)  
29 (As enacted by Section 1 of this Act)

30 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF  
31 MARYLAND, That Section(s) 10–631 through 10–633, respectively, of Article – Health  
32 – General of the Annotated Code of Maryland be renumbered to be Section(s) 10–632  
33 through 10–634, respectively.

34 SECTION 2. AND BE IT FURTHER ENACTED, That the Laws of Maryland  
35 read as follows:

36 **Article – Health – General**

37 10–613.

1 (A) In Part III of this subtitle[, “involuntary admission”] THE FOLLOWING  
2 WORDS HAVE THE MEANINGS INDICATED.

3 (B) ~~“GRAVELY DISABLED DANGER TO THE LIFE OR SAFETY OF THE~~  
4 ~~INDIVIDUAL OR OF OTHERS”~~ MEANS THAT AN INDIVIDUAL A SUBSTANTIAL RISK:

5 (1) ~~IS INCAPABLE OF MAKING AN INFORMED DECISION AS~~  
6 ~~MANIFESTED BY THREATS OF OR ATTEMPTS AT SUICIDE, SELF-INJURY, OR~~  
7 ~~VIOLENCE BY THE INDIVIDUAL, THAT THE INDIVIDUAL OR ANOTHER~~  
8 ~~INDIVIDUAL WILL SUFFER SUBSTANTIAL BODILY HARM; AND OR~~

9 (2) ~~HAS BEHAVED IN SUCH A MANNER AS TO INDICATE AS~~  
10 ~~MANIFESTED BY BEHAVIOR INDICATING THAT THE INDIVIDUAL IS UNLIKELY,~~  
11 ~~WITHOUT THE SUPERVISION AND THE ASSISTANCE OF OTHERS, TO SATISFY THE~~  
12 ~~INDIVIDUAL’S NEED FOR NOURISHMENT, PERSONAL OR MEDICAL CARE,~~  
13 ~~SHELTER, OR SELF-PROTECTION AND SAFETY, SO THAT IT IS PROBABLE THAT~~  
14 ~~SUBSTANTIAL BODILY HARM, SIGNIFICANT PSYCHIATRIC DETERIORATION OR~~  
15 ~~DEBILITATION, OR SERIOUS ILLNESS WILL RESULT UNLESS ADEQUATE~~  
16 ~~TREATMENT IS PROVIDED TO THE INDIVIDUAL THAT THE INDIVIDUAL WILL~~  
17 ~~SUFFER SUBSTANTIAL BODILY HARM, SIGNIFICANT PSYCHIATRIC~~  
18 ~~DETERIORATION OR DEBILITATION, OR SERIOUS ILLNESS.~~

19 (C) ~~“INCAPABLE OF MAKING AN INFORMED DECISION” MEANS THAT AN~~  
20 ~~INDIVIDUAL IS UNAWARE OF THE EFFECTS OF THE INDIVIDUAL’S PSYCHIATRIC~~  
21 ~~DISORDER OR THAT THE INDIVIDUAL LACKS THE CAPACITY TO MAKE A~~  
22 ~~WELL-REASONED, WILLFUL, AND KNOWING DECISION CONCERNING THE~~  
23 ~~INDIVIDUAL’S OWN MEDICAL OR PSYCHIATRIC TREATMENT, TAKING INTO~~  
24 ~~CONSIDERATION THE HISTORY, IF AVAILABLE, OF THE INDIVIDUAL’S~~  
25 ~~NONCOMPLIANCE WITH TREATMENT OR OF CRIMINAL ACTS RELATED TO THE~~  
26 ~~INDIVIDUAL’S MENTAL ILLNESS.~~

27 ~~(D)~~ (C) “INVOLUNTARY ADMISSION” includes every admission of a minor  
28 to a State facility unless the admission is a voluntary admission authorized under Part  
29 II of this subtitle.

30 (E) ~~“MENTAL DISORDER” DOES NOT INCLUDE:~~

31 (1) ~~INTELLECTUAL DISABILITY;~~

32 (2) ~~CONDITIONS THAT PRIMARILY ARE CAUSED BY DRUG OR~~  
33 ~~ALCOHOL ABUSE;~~

34 (3) ~~EPILEPSY, MULTIPLE SCLEROSIS, PARKINSON’S DISEASE,~~  
35 ~~ALZHEIMER’S DISEASE, AND OTHER KNOWN NEUROLOGICAL DISORDERS;~~

1           ~~(4) NORMAL AGE RELATED CHANGES IN THE BRAIN;~~

2           ~~(5) BRAIN CHANGES RELATED TO TERMINAL MEDICAL~~  
3 ~~CONDITIONS;~~

4           ~~(6) PERSONALITY DISORDERS AS DEFINED IN THE AMERICAN~~  
5 ~~PSYCHIATRIC ASSOCIATION'S "DIAGNOSTIC AND STATISTICAL MANUAL OF~~  
6 ~~MENTAL DISORDERS"; AND~~

7           ~~(7) PERVASIVE DEVELOPMENTAL DISORDERS AS DEFINED IN THE~~  
8 ~~AMERICAN PSYCHIATRIC ASSOCIATION'S "DIAGNOSTIC AND STATISTICAL~~  
9 ~~MANUAL OF MENTAL DISORDERS".~~

10 10-617.

11           (a) A facility or Veterans' Administration hospital may not admit the  
12 individual under Part III of this subtitle unless:

13           (1) The individual has a mental disorder;

14           (2) The individual needs inpatient care or treatment;

15           (3) The individual [presents]‡

16           ~~(I) IS IS REASONABLY EXPECTED, IN THE FORESEEABLE~~  
17 ~~FUTURE, TO PRESENT a danger to the life or safety of the individual or of others; OR~~

18           ~~(II) IS GRAVELY DISABLED;~~

19           (4) The individual is unable or unwilling to be admitted voluntarily;

20 and

21           (5) There is no available, less restrictive form of intervention that is  
22 consistent with the welfare and safety of the individual.

23 10-620.

24           (a) In Part IV of this subtitle the following words have the meanings  
25 indicated.

26           (b) "Court" means a district or circuit court of this State.

27           (C) "DANGER TO THE LIFE OR SAFETY OF THE INDIVIDUAL OR OF  
28 OTHERS" HAS THE MEANING STATED IN § 10-613 OF THIS SUBTITLE.

1           ~~(d)~~ **(D)** “Emergency evaluatee” means an individual for whom an emergency  
2 evaluation is sought or made under Part IV of this subtitle.

3           ~~(d)~~ **(E)**       (1) “Emergency facility” means a facility that the Department  
4 designates, in writing, as an emergency facility.

5                       (2) “Emergency facility” includes a licensed general hospital that has  
6 an emergency room, unless the Department, after consultation with the health officer,  
7 exempts the hospital.

8           ~~(E)~~   ~~“GRAVELY DISABLED” HAS THE MEANING STATED IN § 10-613 OF~~  
9 ~~THIS SUBTITLE.~~

10           ~~(F)~~   ~~“INCAPABLE OF MAKING AN INFORMED DECISION” HAS THE~~  
11 ~~MEANING STATED IN § 10-613 OF THIS SUBTITLE.~~

12           [(e)] ~~(G)~~ **(F)** ~~(1)~~ “Mental disorder” means the behavioral or other symptoms  
13 that indicate:

14                       ~~(i)~~ **(1)** To a lay petitioner who is submitting an emergency  
15 petition, a clear disturbance in the mental functioning of another individual; and

16                       ~~(ii)~~ **(2)** To the following health professionals doing an  
17 examination, at least one mental disorder that is described in the version of the  
18 American Psychiatric Association’s “Diagnostic and Statistical Manual – Mental  
19 Disorders” that is current at the time of the examination:

20                                       ~~1.~~ **(I)** Physician;

21                                       ~~2.~~ **(II)** Psychologist;

22                                       ~~3.~~ **(III)**       Clinical social worker;

23                                       ~~4.~~ **(IV)**       Licensed clinical professional counselor;

24                                       ~~5.~~ **(V)**       Clinical nurse specialist in psychiatric and mental  
25 health nursing (APRN/PMH);

26                                       ~~6.~~ **(VI)**       Psychiatric nurse practitioner (CRNP-PMH);  
27 or

28                                       ~~7.~~ **(VII)**       Licensed clinical marriage and family  
29 therapist.

30                       ~~(2)~~   ~~“Mental disorder” does not include [intellectual];~~

- 1                    ~~(I) INTELLECTUAL disability;~~
- 2                    ~~(II) CONDITIONS THAT PRIMARILY ARE DUE TO DRUG OR~~  
3 ~~ALCOHOL ABUSE;~~
- 4                    ~~(III) EPILEPSY, MULTIPLE SCLEROSIS, PARKINSON'S~~  
5 ~~DISEASE, ALZHEIMER'S DISEASE, AND OTHER KNOWN NEUROLOGICAL~~  
6 ~~DISORDERS;~~
- 7                    ~~(IV) NORMAL AGE RELATED CHANGES IN THE BRAIN;~~
- 8                    ~~(V) BRAIN CHANGES RELATED TO TERMINAL MEDICAL~~  
9 ~~CONDITIONS;~~
- 10                   ~~(VI) PERSONALITY DISORDERS AS DEFINED IN THE~~  
11 ~~AMERICAN PSYCHIATRIC ASSOCIATION'S "DIAGNOSTIC AND STATISTICAL~~  
12 ~~MANUAL OF MENTAL DISORDERS"; AND~~
- 13                   ~~(VII) PERVASIVE DEVELOPMENTAL DISORDERS.~~

14                   [(f)] ~~(H)~~ (G) "Peace officer" means a sheriff, a deputy sheriff, a State police  
15 officer, a county police officer, a municipal or other local police officer, or a Secret  
16 Service agent who is a sworn special agent of the United States Secret Service or  
17 Department of Homeland Security authorized to exercise powers delegated under 18  
18 U.S.C. § 3056.

19 10-622.

20                   (a) A petition for emergency evaluation of an individual may be made under  
21 this section only if the petitioner has reason to believe that the individual:

22                   (1) Has a mental disorder; and

23                   (2) ~~(H)~~ [The individual presents] **IS REASONABLY EXPECTED, IN**  
24 **THE FORESEEABLE FUTURE, TO PRESENT** a danger to the life or safety of the  
25 individual or of others; ~~OR~~

26                   ~~(H) IS GRAVELY DISABLED.~~

27                   (c) (1) A petition under this section shall:

28                   (i) Be signed and verified by the petitioner;

29                   (ii) State the petitioner's:

- 1                   1.     Name;
- 2                   2.     Address; and
- 3                   3.     Home and work telephone numbers;
- 4                   (iii)  State the emergency evaluatee's:
- 5                   1.     Name; and
- 6                   2.     Description;
- 7                   (iv)  State the following information, if available:
- 8                   1.     The address of the emergency evaluatee; and
- 9                   2.     The name and address of the spouse or a child,
- 10                  parent, or other relative of the emergency evaluatee or any other individual who is
- 11                  interested in the emergency evaluatee;
- 12                  (v)   If the individual who makes the petition for emergency
- 13                  evaluation is an individual authorized to do so under subsection (b)(1)(i) of this
- 14                  section, contain the license number of the individual;
- 15                  (vi)  Contain a description of the behavior and statements of the
- 16                  emergency evaluatee or any other information that led the petitioner to believe that the
- 17                  emergency evaluatee has a mental disorder and that the individual [presents a danger
- 18                  to the life or safety of the individual or of others;]‡
- 19                               ~~1.   IS IS REASONABLY EXPECTED, IN THE~~
- 20                               ~~FORESEEABLE FUTURE, TO PRESENT A DANGER TO THE LIFE OR SAFETY OF THE~~
- 21                               ~~INDIVIDUAL OR OF OTHERS; OR~~
- 22                               ~~2.   IS GRAVELY DISABLED;~~ and
- 23                   (vii)  Contain any other facts that support the need for an
- 24                  emergency evaluation.
- 25                  (2)   The petition form shall contain a notice that the petitioner:
- 26                   (i)   May be required to appear before a court; and
- 27                   (ii)  Makes the statements under penalties of perjury.

1 (b) After review of the petition, the court shall endorse the petition if the  
 2 court finds probable cause to believe that the emergency evaluatee has shown the  
 3 symptoms of a mental disorder and that the individual [presents a danger to the life or  
 4 safety of the individual or of others];

5 ~~(1) IS IS REASONABLY EXPECTED, IN THE FORESEEABLE FUTURE,~~  
 6 ~~TO PRESENT A DANGER TO THE LIFE OR SAFETY OF THE INDIVIDUAL OR OF~~  
 7 ~~OTHERS; OR~~

8 ~~(2) IS GRAVELY DISABLED.~~

9 10-626.

10 (a) A court may order, at any time, an emergency evaluation under Part IV  
 11 of this subtitle of an individual who has been arrested, if the court finds probable  
 12 cause to believe that the individual has a mental disorder and the individual [presents  
 13 a danger to the life or safety of the individual or of others];

14 ~~(1) IS IS REASONABLY EXPECTED, IN THE FORESEEABLE FUTURE,~~  
 15 ~~TO PRESENT A DANGER TO THE LIFE OR SAFETY OF THE INDIVIDUAL OR OF~~  
 16 ~~OTHERS; OR~~

17 ~~(2) IS GRAVELY DISABLED.~~

18 10-631.

19 ~~(A) IN PART V OF THIS SUBTITLE THE FOLLOWING WORDS HAVE THE~~  
 20 ~~MEANINGS INDICATED, "DANGER TO THE LIFE OR SAFETY OF THE INDIVIDUAL~~  
 21 ~~OR OF OTHERS" HAS THE MEANING STATED IN § 10-613 OF THIS SUBTITLE.~~

22 ~~(B) "GRAVELY DISABLED" HAS THE MEANING STATED IN § 10-613 OF~~  
 23 ~~THIS SUBTITLE.~~

24 ~~(C) "INCAPABLE OF MAKING AN INFORMED DECISION" HAS THE~~  
 25 ~~MEANING STATED IN § 10-613 OF THIS SUBTITLE.~~

26 ~~(D) "MENTAL DISORDER" DOES NOT INCLUDE:~~

27 ~~(1) INTELLECTUAL DISABILITY;~~

28 ~~(2) CONDITIONS THAT PRIMARILY ARE CAUSED BY DRUG OR~~  
 29 ~~ALCOHOL ABUSE;~~

30 ~~(3) EPILEPSY, MULTIPLE SCLEROSIS, PARKINSON'S DISEASE,~~  
 31 ~~ALZHEIMER'S DISEASE, AND OTHER KNOWN NEUROLOGICAL DISORDERS;~~



1           ~~(4) NORMAL AGE RELATED CHANGES IN THE BRAIN;~~

2           ~~(5) BRAIN CHANGES RELATED TO TERMINAL MEDICAL~~  
3 ~~CONDITIONS;~~

4           ~~(6) PERSONALITY DISORDERS AS DEFINED IN THE AMERICAN~~  
5 ~~PSYCHIATRIC ASSOCIATION'S "DIAGNOSTIC AND STATISTICAL MANUAL OF~~  
6 ~~MENTAL DISORDERS"; AND~~

7           ~~(7) PERVASIVE DEVELOPMENTAL DISORDERS AS DEFINED IN THE~~  
8 ~~AMERICAN PSYCHIATRIC ASSOCIATION'S "DIAGNOSTIC AND STATISTICAL~~  
9 ~~MANUAL OF MENTAL DISORDERS".~~

10 10-633.

11           (a) Any individual proposed for involuntary admission under Part III of this  
12 subtitle shall be afforded a hearing to determine whether the individual is to be  
13 admitted to a facility or a Veterans' Administration hospital as an involuntary patient  
14 or released without being admitted.

15           (e) The hearing officer shall:

16                   (1) Consider all the evidence and testimony of record; and

17                   (2) Order the release of the individual from the facility unless the  
18 record demonstrates by clear and convincing evidence that at the time of the hearing  
19 each of the following elements exist as to the individual whose involuntary admission  
20 is sought:

21                           (i) The individual has a mental disorder;

22                           (ii) The individual needs in-patient care or treatment;

23                           (iii) The individual [presents]‡

24                                   ~~1. IS IS~~ REASONABLY EXPECTED, IN THE  
25 FORESEEABLE FUTURE, TO PRESENT a danger to the life or safety of the individual  
26 or of others; ~~OR~~

27                                   ~~2. IS GRAVELY DISABLED;~~

28                           (iv) The individual is unable or unwilling to be voluntarily  
29 admitted to the facility;

1 (v) There is no available less restrictive form of intervention  
2 that is consistent with the welfare and safety of the individual; and

3 (vi) If the individual is 65 years old or older and is to be  
4 admitted to a State facility, the individual has been evaluated by a geriatric  
5 evaluation team and no less restrictive form of care or treatment was determined by  
6 the team to be appropriate.

7 10-708.

8 (a) (1) In this section the following words have the meanings indicated.

9 (2) "Panel" means a clinical review panel that determines, under the  
10 provisions of this section, whether to approve that medication be administered to an  
11 individual who objects to the medication.

12 (3) "Medication" means psychiatric medication prescribed for the  
13 treatment of a mental disorder.

14 (4) "Lay advisor" means an individual at a facility, who is  
15 knowledgeable about mental health practice and who assists individuals with rights  
16 complaints.

17 (g) The panel may approve the administration of medication or medications  
18 and may recommend and approve alternative medications if the panel determines  
19 that:

20 (1) The medication is prescribed by a psychiatrist for the purpose of  
21 treating the individual's mental disorder;

22 (2) The administration of medication represents a reasonable exercise  
23 of professional judgment; and

24 (3) Without the medication, the individual is at substantial risk of  
25 continued hospitalization because of:

26 (i) Remaining seriously mentally ill with no significant relief of  
27 the mental illness symptoms that cause the individual to [be a danger to the  
28 individual or to others] **MEET THE CRITERIA FOR INVOLUNTARY ADMISSION**  
29 **UNDER § 10-617(A)(3) OF THIS TITLE;**

30 (ii) Remaining seriously mentally ill for a significantly longer  
31 period of time with mental illness symptoms that cause the individual to [be a danger  
32 to the individual or to others] **MEET THE CRITERIA FOR INVOLUNTARY ADMISSION**  
33 **UNDER § 10-617(A)(3) OF THIS TITLE;** or

1 (iii) Relapsing into a condition in which the individual is [in  
2 danger of serious physical harm resulting from the individual's inability to provide for  
3 the individual's essential human needs of health or safety] **UNLIKELY TO SATISFY**  
4 **THE INDIVIDUAL'S NEED FOR NOURISHMENT, PERSONAL OR MEDICAL CARE,**  
5 **SHELTER, OR SELF-PROTECTION AND SAFETY, SO THAT IT IS PROBABLE THAT**  
6 **SUBSTANTIAL BODILY HARM, SIGNIFICANT PSYCHIATRIC DETERIORATION OR**  
7 **DEBILITATION, OR SERIOUS ILLNESS WILL RESULT.**

8 SECTION 3. AND BE IT FURTHER ENACTED, That:

9 (a) There is a Task Force on the Delivery of Services to Individuals with  
10 Mental Illness.

11 (b) The Task Force consists of the following members:

12 (1) one member of the Senate of Maryland, appointed by the President  
13 of the Senate;

14 (2) one member of the House of Delegates, appointed by the Speaker of  
15 the House;

16 (3) the Secretary of Health and Mental Hygiene, or the Secretary's  
17 designee;

18 (4) the Secretary of Public Safety and Correctional Services, or the  
19 Secretary's designee;

20 (5) the Attorney General, or the Attorney General's designee;

21 (6) the Executive Director of the Mental Hygiene Administration, or  
22 the Executive Director's designee;

23 (7) the Executive Director of the Alcohol and Drug Abuse  
24 Administration, or the Executive Director's designee; and

25 (8) the following members, appointed by the Governor:

26 (i) one representative of the Maryland Hospital Association;

27 (ii) one representative of MedChi, The Maryland State Medical  
28 Society;

29 (iii) one representative of the Mental Health Association of  
30 Maryland;

1 (iv) one representative of the National Alliance on Mental  
2 Illness;

3 (v) one representative of the Community Behavioral Health  
4 Association of Maryland;

5 (vi) one representative of the Maryland Disability Law Center;

6 (vii) one representative of the Maryland Psychiatric Society; ~~and~~

7 (viii) one representative of the Office of the Public Defender;

8 (ix) one representative of the Treatment Advocacy Center;

9 (x) one member of the Maryland Sheriffs' Association; and

10 (xi) one representative of the Sheppard Pratt Health System.

11 (c) The Governor shall designate the chair of the Task Force.

12 (d) The Department of Health and Mental Hygiene shall provide staff for the  
13 Task Force.

14 (e) A member of the Task Force:

15 (1) may not receive compensation as a member of the Task Force; but

16 (2) is entitled to reimbursement for expenses under the Standard  
17 State Travel Regulations, as provided in the State budget.

18 (f) The Task Force shall examine issues relating to the delivery of services to  
19 individuals with mental illness in the State, including:

20 (1) the feasibility and desirability of:

21 (i) establishing involuntary outpatient commitment of mentally  
22 ill individuals; and

23 (ii) admitting mentally ill individuals involuntarily into  
24 facilities for inpatient treatment and care until the individuals are psychiatrically  
25 stable instead of requiring release from facilities when the individuals are no longer  
26 dangerous;

27 (2) expanding the use of and increasing funding for crisis services,  
28 diversion services, and mental health courts; and

1           (3)    eliminating procedural barriers to keeping mentally ill individuals  
2 hospitalized for longer periods of time, if needed, to reduce the likelihood of psychiatric  
3 deterioration and arrest of the individuals after discharge.

4           (g)    The Task Force shall report its findings and recommendations to the  
5 Governor and, in accordance with § 2-1246 of the State Government Article, the  
6 General Assembly:

7                   (1)    in an interim report on or before January 1, 2014; and

8                   (2)    in a final report on or before January 1, 2015.

9           SECTION 4. AND BE IT FURTHER ENACTED, That this Act shall take effect  
10 July 1, 2013. Section 3 of this Act shall remain effective for a period of 2 years and, at  
11 the end of June 30, 2015, with no further action required by the General Assembly,  
12 Section 3 of this Act shall be abrogated and of no further force and effect.

Approved:

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Governor.

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President of the Senate.

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Speaker of the House of Delegates.