HOUSE BILL 896

J1 (5lr 2696)

ENROLLED BILL

— Health and Government Operations/Finance —

Introduced by Delegate Bromwell <u>Delegates Bromwell, Hammen, Hayes, McMillan, Oaks, Pena-Melnyk, Miele, Saab, Kelly, McDonough, Morgan, Morhaim, Angel, Kipke, Cullison, Sample-Hughes, Barron, Reznik, West, Rose, Hill, and K. Young</u>

Read and I	Examined by Proofreaders:
	Proofreader.
	Proofreader.
Sealed with the Great Seal and	presented to the Governor, for his approval this
day of	at
	Speaker.
	CHAPTER
AN ACT concerning	
v I	oid Use Disorder Consortium avioral Health and Opioid Use Disorders
Committee on Behavioral He composition, cochairs, and state the Committee; prohibiting a compensation, but authorizing Consortium to develop, monitora certain process; requiring the identify certain focus areas	ne Maryland Opioid Use Disorder Consortium Joint ealth and Opioid Use Disorders; providing for the affing of the Consortium membership and cochairs of a member of the Consortium from receiving certains; the reimbursement of certain expenses; requiring the arimplementation of, and revise a certain plan through the Consortium to convene a certain Policy Academy to and draft certain recommendations; requiring the and tables; requiring the Consortium to convene a final

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

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

1

2 3

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

Italics indicate opposite chamber/conference committee amendments.



1 2 3 4 5	Policy Academy for a certain purpose; requiring the Consortium to submit certain reports to the Governor and the General Assembly on or before certain dates specifying the duties and purposes of the Committee; providing for the termination of this Act; and generally relating to the Maryland Opioid Use Disorder Consortium Joint Committee on Behavioral Health and Opioid Use Disorders.					
6 7 8 9 10 11	BY adding to Article - Health - General Section 24-1701 to be under the new subtitle "Subtitle 17. Maryland Opioid Use Disorder Consortium" Annotated Code of Maryland (2009 Replacement Volume and 2014 Supplement)					
12 13 14 15 16	BY adding to Article – State Government Section 2–10A–02 Annotated Code of Maryland (2014 Replacement Volume)					
17 18	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:					
19	Article - Health - General					
20	SUBTITLE 17. MARYLAND OPIOID USE DISORDER CONSORTIUM.					
2021	Subtitle 17. Maryland Opioid Use Disorder Consortium. 24–1701.					
21	24–1701.					
2122	24-1701. (A) THERE IS A MARYLAND OPIOID USE DISORDER CONSORTIUM.					
21222324	24–1701. (A) THERE IS A MARYLAND OPIOID USE DISORDER CONSORTIUM. (B) THE CONSORTIUM CONSISTS OF THE FOLLOWING MEMBERS: (1) TWO MEMBERS OF THE SENATE OF MARYLAND, APPOINTED BY					
21 22 23 24 25 26	24-1701. (A) THERE IS A MARYLAND OPIOID USE DISORDER CONSORTIUM. (B) THE CONSORTIUM CONSISTS OF THE FOLLOWING MEMBERS: (1) TWO MEMBERS OF THE SENATE OF MARYLAND, APPOINTED BY THE PRESIDENT OF THE SENATE; (2) TWO MEMBERS OF THE HOUSE OF DELEGATES, APPOINTED BY					
21 22 23 24 25 26 27 28	24-1701. (A) THERE IS A MARYLAND OPIOID USE DISORDER CONSORTIUM. (B) THE CONSORTIUM CONSISTS OF THE FOLLOWING MEMBERS: (1) TWO MEMBERS OF THE SENATE OF MARYLAND, APPOINTED BY THE PRESIDENT OF THE SENATE; (2) TWO MEMBERS OF THE HOUSE OF DELEGATES, APPOINTED BY THE SPEAKER OF THE HOUSE; (3) THE SECRETARY OF HEALTH AND MENTAL HYGIENE, OR THE					

1	(6) THE EXECUTIVE DIRECTOR OF THE GOVERNOR'S OFFICE FOR
2	CHILDREN, OR THE EXECUTIVE DIRECTOR'S DESIGNEE;
0	(5)
3	(7) THE ATTORNEY GENERAL, OR THE ATTORNEY GENERAL'S
4	DESIGNEE;
5	(8) The Superintendent of State Police, or the
6	SUPERINTENDENT'S DESIGNEE:
7	(9) The Dean of the University of Maryland, Baltimore,
8	SCHOOL OF MEDICINE, OR THE DEAN'S DESIGNEE;
0	(10) The Dray of the Hampromy of Mary and Darminore
9	(10) THE DEAN OF THE UNIVERSITY OF MARYLAND, BALTIMORE, SCHOOL OF NURSING, OR THE DEAN'S DESIGNEE;
10	Denote of Iversing, or the Dean's Designer;
11	(11) THE DEAN OF THE UNIVERSITY OF MARYLAND, BALTIMORE,
12	SCHOOL OF PHARMACY, OR THE DEAN'S DESIGNEE;
13	(12) THE DEAN OF THE UNIVERSITY OF MARYLAND, COLLEGE PARK,
14	SCHOOL OF PUBLIC HEALTH, OR THE DEAN'S DESIGNEE;
1 =	(19) THE DEAN OF THE JOHNS HOPKING HARVEDSITY COHOOL OF
15 16	(13) THE DEAN OF THE JOHNS HOPKINS UNIVERSITY SCHOOL OF PUBLIC HEALTH, OR THE DEAN'S DESIGNEE;
10	1 Obbie HEALTH, OR THE DEAN S DESIGNED,
17	(14) ONE PHYSICIAN, APPOINTED BY THE MEDICAL AND
18	CHIRURGICAL FACULTY OF MARYLAND;
19	(15) Two substance use disorder direct care providers,
20	APPOINTED BY THE GOVERNOR BASED ON RECOMMENDATIONS OF ORGANIZATIONS
21	OR ASSOCIATIONS REPRESENTING DIRECT CARE PROVIDERS; AND
22	(16) THE FOLLOWING MEMBERS, APPOINTED BY THE GOVERNOR:
	(10) THE TOELDOWING MEMBERS, THE CHANGE OF THE CONTENT OF THE CHANGE OF
23	(I) TWO REPRESENTATIVES OF LOCAL GOVERNMENT;
24	(II) ONE REPRESENTATIVE OF LOCAL LAW ENFORCEMENT;
~ =	
25	(III) TWO REPRESENTATIVES OF SUBSTANCE USE DISORDER
26	TREATMENT PROGRAMS, ONE EACH FROM AN INPATIENT SETTING AND AN
27	OUTPATIENT SETTING;
28	(IV) TWO REPRESENTATIVES WITH EXPERIENCE AS FAMILY
29	MEMBERS OF INDIVIDUALS WITH OPIOID USE DISORDERS; AND

30

THE STRATEGIC STATEWIDE PLAN.

1	(V) ONE REPRESENTATIVE WHO IS AN INDIVIDUAL IN
2	RECOVERY FROM AN OPIOID USE DISORDER WHO HAS EXPERIENCE WITH
3	MEDICATION ASSISTED TREATMENT.
4	(c) (1) The President of the Senate shall designate one of the
5	MEMBERS APPOINTED FROM THE SENATE AS COCHAIR OF THE CONSORTIUM.
6	(2) THE SPEAKER OF THE HOUSE SHALL DESIGNATE ONE OF THE
7	MEMBERS APPOINTED FROM THE HOUSE AS COCHAIR OF THE CONSORTIUM.
8	(D) THE DEPARTMENT OF LEGISLATIVE SERVICES, THE DEPARTMENT OF
9	HEALTH AND MENTAL HYGIENE, AND THE GOVERNOR'S OFFICE OF CRIME
10	CONTROL AND PREVENTION SHALL PROVIDE STAFF FOR THE CONSORTIUM.
11	(E) A MERICARD OF THE CONCORDANCE
11	(E) A MEMBER OF THE CONSORTIUM:
12	(1) May not receive compensation as a member of the
13	CONSORTIUM; BUT
10	Consontrom, bot
14	(2) Is entitled to reimbursement for expenses under the
15	STANDARD STATE TRAVEL REGULATIONS, AS PROVIDED IN THE STATE BUDGET.
10	STANDARD STATE TWINDE WEGGETTONS, AS TWO VIDED IN THE STATE BODGET.
16	(F) (1) THE CONSORTIUM SHALL DEVELOP A STRATEGIC STATEWIDE
17	PLAN TO TREAT AND REDUCE OPIOID USE DISORDERS IN THE STATE.
18	(2) The strategic statewide plan shall include a timeline
19	FOR FUTURE ACTIONS TO TREAT AND REDUCE OPIOID USE DISORDERS IN THE
20	STATE.
21	(G) THE CONSORTIUM SHALL:
22	(1) USE A STRATEGIC STATEWIDE PLAN DEVELOPMENT PROCESS
23	SIMILAR TO THE PROCESS USED IN COLORADO IN 2013 TO DEVELOP THE
24	"Colorado Plan to Reduce Prescription Drug Abuse"; and
25	(2) SEEK TECHNICAL ASSISTANCE FROM THE NATIONAL
26	GOVERNOR'S ASSOCIATION AND OTHER APPROPRIATE ENTITIES TO DEVELOP THE
27	STRATEGIC STATEWIDE PLAN.
	() (1) m
28	(H) (1) THE CONSORTIUM SHALL CONVENE AN INITIAL POLICY
29	ACADEMY TO IDENTIFY FOCUS AREAS AND DRAFT INITIAL RECOMMENDATIONS FOR

$\frac{1}{2}$	(2) WORKGROUPS, I			YAL P	POLICY	- Acai)EMY	SHAL	L C (NSIST	OF
3	Workgroup;	(I)	THE	PRESC	CRIPTIO	N DR	UG	MONITE	ORING	Pro c	GRAM
5 6	Workgroup;	(II)	THE	PRES	SCRIBEI	R AN	D	Provid	ER	Educa	TION
7		(III)	THE '	TREATM	IENT W	ORKGR(OUP;				
8	AND	(IV)	THE	Public	EDUC!	ATION A	ND /	\ WAREN	ess W	ORKGI	toup;
0		(V)	THE	DATA A	NALYSI	S Work	(GRO	UP.			
11	(3) WORKGROUPS:	THE	MEM	I BERSHI	P OF	THE	-INI	rial P e	OLICY	-Acal	DEMY
13		(I)	SHAL	L INCLU	JDE MEI	MBERS (OF TI	HE CONS	ORTIU	M; ANE	.
14 15	Consortium, A	(II) PPOIN						RE NOT		ERS OI	THE
16 17 18	(I) THE RECEIVE INPUT MODIFY THE INI DRAFTED UNDER	FROM	LOCA	L OFFIC	CIALS AT	ND EXP 'OR THI	ERTS		FINE,	EXPANI	D, OR
20 21 22 23	(J) (1) TO REVISE ITS I AND ESTABLISH PLAN.	RECOM	MEND/	ATIONS,	FINALI	ZE THE	STR	ATEGIC	STATE	WIDE I	PLAN,
24 25 26 27	(2) FINALIZED UNDI MEET, AS NECES STATEWIDE PLAN	ER PAR SSARY	AGRAI , TO M	PH (1) O I ONITOR	F THIS S	SUBSEC'	TION ENT/	•	NSOR	TIUM S	HALL
28 29	(3) ESTABLISHED UT							ENE TH , AS NEC			OUPS
RΩ		(1)	Сом	DI ETE T	CHE WO	DK OF	тиг	FINAL]	POLIC	V ACAI	DEMV

UNDER PARAGRAPH (1) OF THIS SUBSECTION; AND

31

32

PRESCRIBING PATTERNS ACROSS THE STATE.

1	(II) MONITOR IMPLEMENTATION OF AND MAKE REVISIONS TO			
2	THE STRATEGIC STATEWIDE PLAN SUBMITTED UNDER PARAGRAPH (2) OF THIS			
3	SUBSECTION.			
4	(K) IN DEVELOPING, MONITORING THE IMPLEMENTATION OF, AND			
5	REVISING THE STRATEGIC STATEWIDE PLAN, THE CONSORTIUM SHALL			
6	COORDINATE WITH ORGANIZATIONS OR WORK TO MAXIMIZE THE IMPACT OF			
7	ORGANIZATIONS, INITIATIVES, AND TOOLS ALREADY IN PLACE IN THE STATE TO			
8	TREAT OR REDUCE OPIOID USE DISORDERS, INCLUDING:			
O	THE TOWN HERE OF THE COLD FOR PROPERTY, INCLUDING,			
9	(1) THE CONTROLLED DANGEROUS SUBSTANCES UNIT IN THE			
10	DEPARTMENT OF HEALTH AND MENTAL HYGIENE;			
11	(2) THE RAPID RESPONSE TEAM AT THE UNIVERSITY OF MARYLAND			
12	SCHOOL OF PHARMACY;			
10	(a)			
13	(3) THE STATE OVERDOSE PREVENTION PLAN DEVELOPED IN 2013			
14	AND UPDATED IN 2014, WHICH INCLUDES PRESCRIBER EDUCATION AND DATA			
15	ANALYSIS AND THE USE OF THE DEPARTMENT OF HEALTH AND MENTAL HYGIENE			
16	VIRTUAL DATA UNIT;			
17	(4) Local overdose prevention plans;			
_ ,	(-,			
18	(5) THE OVERDOSE PREVENTION MEDIA CAMPAIGN WITHIN THE			
19	DEPARTMENT OF HEALTH AND MENTAL HYGIENE BEHAVIORAL HEALTH			
20	ADMINISTRATION;			
21	(6) EFFORTS TO ENHANCE OVERDOSE RESPONSE LAWS,			
22	REGULATIONS, AND TRAINING;			
ດດ	(7) I AVIC ECTADISCHING LOCAL OVERDOGE EATTALITY DEVIEW			
23	(7) LAWS ESTABLISHING LOCAL OVERDOSE FATALITY REVIEW			
24	TEAMS;			
25	(8) Prescriber education training approved by the federal			
$\frac{-3}{26}$	FOOD AND DRUG ADMINISTRATION, INCLUDING TRAINING HELD STATEWIDE BY			
27	THE MEDICAL AND CHIRURGICAL FACULTY OF MARYLAND AND THE MARYLAND			
28	SOCIETY FOR ADDICTION MEDICINE; AND			
29	(9) THE PRESCRIPTION DRUG MONITORING PROGRAM AND			
30	EFFORTS TO EXPAND ITS USE BY THE DEPARTMENT OF HEALTH AND MENTAL			
31	HYGIENE AS A PUBLIC HEALTH TOOL FOR MONITORING AND RESPONDING TO			

1	(L) THE CONSORTIUM SHALL SUBMIT TO THE GOVERNOR AND, IN
2	ACCORDANCE WITH § 2-1246 OF THE STATE GOVERNMENT ARTICLE, THE GENERAL
3	ASSEMBLY:
4	(1) ON OR BEFORE JANUARY 1, 2016, A REPORT THAT INCLUDES ANY
5	INITIAL RECOMMENDATIONS OF THE CONSORTIUM FOR THE STRATEGIC STATEWIDE
6	PLAN;
Ü	
7	(2) ON OR BEFORE JANUARY 1, 2017, A REPORT THAT INCLUDES THE
8	FINALIZED STRATEGIC STATEWIDE PLAN AND ANY RECOMMENDATIONS FOR
9	LEGISLATIVE ACTION TO IMPLEMENT THE PLAN; AND
9	DEGISEATIVE ACTION TO IMPLEMENT THE PEAN, AND
0	(3) On or before January 1, 2018, and on January 1 of each
1	YEAR THEREAFTER, A REPORT THAT INCLUDES AN UPDATE ON IMPLEMENTATION
12	OF THE STRATEGIC STATEWIDE PLAN AND ANY REVISIONS THAT HAVE BEEN MADE
13	TO THE STRATEGIC STATEWIDE PLAN BY THE CONSORTIUM.
4	Article - State Government
L 4	Article - State Government
5	2-10A-02.
IJ	<u>2-10A-02.</u>
6	(A) THERE IS A JOINT COMMITTEE ON BEHAVIORAL HEALTH AND OPIOID
L7	USE DISORDERS.
L 1	OSE DISORDERS.
18	(B) (1) THE COMMITTEE CONSISTS OF 10 MEMBERS.
LO	(b) (1) THE COMMITTEE CONSISTS OF TO MEMBERS.
9	(2) OF THE 10 MEMBERS:
IJ	(2) OF THE TO MEMBERS.
20	(I) 5 SHALL BE MEMBERS OF THE SENATE, APPOINTED BY THE
21	
ίL	FRESIDENT OF THE SENATE; AND
າດ	(II) 5 CHALL DE MEMDEDO DE MHE HOUGE DE DELECAMES
22	(II) 5 SHALL BE MEMBERS OF THE HOUSE OF DELEGATES,
23	APPOINTED BY THE SPEAKER OF THE HOUSE.
	(a) The Member of the Constitution and the property of the
24	(C) THE MEMBERS OF THE COMMITTEE SERVE AT THE PLEASURE OF THE
25	PRESIDING OFFICER WHO APPOINTED THEM.
	(a) Man Danier Danier Communication (contraction)
26	(D) THE PRESIDENT AND THE SPEAKER JOINTLY SHALL APPOINT A
27	SENATOR AND A DELEGATE TO SERVE AS COCHAIRS.
28	(E) THE COMMITTEE SHALL HAVE OVERSIGHT OVER:

(1) THE PRESCRIPTION DRUG MONITORING PROGRAM;

29

1	(2) STATE AND LOCAL PROGRAMS TO TREAT AND REDUCE
2	BEHAVIORAL HEALTH DISORDERS; AND
3	(3) STATE AND LOCAL PROGRAMS TO TREAT AND REDUCE OPIOID USE
4	DISORDERS.
5	(F) THE PURPOSES OF THE COMMITTEE ARE TO:
6	(1) REVIEW THE FINAL REPORT OF THE GOVERNOR'S HEROIN AND
7	OPIOID EMERGENCY TASK FORCE;
8	(2) REVIEW AND MONITOR THE ACTIVITIES OF THE GOVERNOR'S
9	INTER-AGENCY HEROIN AND OPIOID COORDINATING COUNCIL;
10	(3) EVALUATE MONITOR THE EFFECTIVENESS OF PROGRAMS,
11	POLICIES, AND PRACTICES, INCLUDING:
12	(I) THE STATE'S BEHAVIORAL HEALTH SYSTEM;

13	(II) THE CONTROLLED DANGEROUS SUBSTANCES UNIT IN THE
14	DEPARTMENT OF HEALTH AND MENTAL HYGIENE:
	DEFINITION OF TEMPERATURE THE THEORY
15	(HI) THE RAPID RESPONSE TEAM AT THE UNIVERSITY OF
16	MARYLAND SCHOOL OF PHARMACY:
10	MINITERIND SCHOOL OF THEMENICITY
17	(IV) THE STATE OVERDOSE PREVENTION PLAN DEVELOPED IN
18	2013 AND UPDATED IN 2014, WHICH INCLUDES PRESCRIBER EDUCATION AND DATA
19	ANALYSIS AND THE USE OF THE DEPARTMENT OF HEALTH AND MENTAL HYGIENE
20	
20	<u>VIRTUAL DATA UNIT;</u>
21	(V) (III) LOCAL OVERDOGE DREVENITION DI ANG.
41	(V) (III) LOCAL OVERDOSE PREVENTION PLANS;
22	(VII) (IV) CURATECIC DIANNING DRACTICES TO DEDICE
	(VI) (IV) STRATEGIC PLANNING PRACTICES TO REDUCE
23	PRESCRIPTION DRUG ABUSE IN THE STATE;
0.4	(TITE) THE CHERROOF PREVENTION REPORT CAMPAIGN IN THE
24	(VII) THE OVERDOSE PREVENTION MEDIA CAMPAIGN IN THE
25	DEPARTMENT OF HEALTH AND MENTAL HYGIENE BEHAVIORAL HEALTH
26	ADMINISTRATION;
27	(VIII) (V) EFFORTS TO ENHANCE OVERDOSE RESPONSE
28	STATUTORY LAWS, REGULATIONS, AND TRAINING;
29	(IX) (VI) LAWS ESTABLISHING LOCAL OVERDOSE FATALITY
30	REVIEW TEAMS; AND

1	(X) PRESCRIBER EDUCATION TRAINING APPROVED BY THE
2	FEDERAL FOOD AND DRUG ADMINISTRATION, INCLUDING TRAINING HELD
3	STATEWIDE BY MEDCHI, THE MARYLAND STATE MEDICAL SOCIETY, AND THE
4	MARYLAND SOCIETY FOR ADDICTION MEDICINE; AND
5	(XI) (VII) EFFORTS TO EXPAND USE OF THE PRESCRIPTION
6	DRUG MONITORING PROGRAM BY THE DEPARTMENT OF HEALTH AND MENTAL
7	HYGIENE AS A PUBLIC HEALTH TOOL FOR MONITORING AND RESPONDING TO
8	PRESCRIBING PATTERNS ACROSS THE STATE;
	,
9	(4) REVIEW THE EXTENT TO WHICH HEALTH INSURANCE CARRIERS IN
10	THE STATE ARE COMPLYING WITH FEDERAL AND STATE MENTAL HEALTH AND
11	ADDICTION PARITY LAWS; AND
10	(F) IDENTIFY ADDIS OF CONCERN AND AS ADDRODDIATE
12	(5) <u>IDENTIFY AREAS OF CONCERN AND, AS APPROPRIATE</u> , RECOMMEND CORRECTIVE MEASURES TO THE GOVERNOR AND THE GENERAL
13 14	ASSEMBLY.
14	ASSEMBLI.
15	SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect June
16	1, 2015. It shall remain effective for a period of 6 years and, at the end of May 31, 2021,
17	with no further action required by the General Assembly, this Act shall be abrogated and
18	of no further force and effect.
	Approved:
	Governor.
	Speaker of the House of Delegates.
	President of the Senate.