5lr2147 CF HB 896

By: Senators Klausmeier, Astle, Bates, Benson, Cassilly, Conway, Currie, DeGrange, Edwards, Feldman, Ferguson, Guzzone, Hershey, Hough, Jennings, Kagan, Kasemeyer, King, Lee, Madaleno, Manno, Mathias, McFadden, Middleton, Miller, Montgomery, Muse, Nathan-Pulliam, Norman, Peters, Pinsky, Pugh, Ramirez, Raskin, Rosapepe, Salling, Waugh, Young, Zirkin, Serafini, and Ready Introduced and read first time: February 6, 2015

Assigned to: Finance

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Committee Report: Favorable with amendments Senate action: Adopted Read second time: March 19, 2015

CHAPTER _____

1 AN ACT concerning

$\frac{2}{3}$

Maryland Opioid Use Disorder Consortium Joint Committee on Behavioral Health and Opioid Use Disorders

FOR the purpose of establishing the Maryland Opioid Use Disorder Consortium Joint 4 $\mathbf{5}$ Committee on Behavioral Health and Opioid Use Disorders; providing for the 6 composition, cochairs, and staffing of the Consortium membership and cochairs of $\overline{7}$ the Committee; prohibiting a member of the Consortium from receiving certain 8 compensation, but authorizing the reimbursement of certain expenses; requiring the 9 Consortium to develop, monitor implementation of, and revise a certain plan through a certain process; requiring the Consortium to convene a certain Policy Academy to 10 11 identify certain focus areas and draft certain recommendations; requiring the Consortium to hold certain roundtables: requiring the Consortium to convene a final 1213 Policy Academy for a certain purpose; requiring the Consortium to submit certain 14 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 1516 of this Act; and generally relating to the Maryland Opioid Use Disorder Consortium Joint Committee on Behavioral Health and Opioid Use Disorders. 17

18 BY adding to

19 Article – Health – General

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	Section 24–1701 to be under the new subtitle "Subtitle 17. Maryland Opioid Use							
2	Disorder Consortium"							
3	Annotated Code of Maryland							
4	(2009 Replacement Volume and 2014 Supplement)							
5 6 7 8 9	<u>BY adding to</u> <u>Article – State Government</u> <u>Section 2–10A–02</u> <u>Annotated Code of Maryland</u> (2014 Replacement Volume)							
10 11	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:							
12	Article – Health – General							
13	SUBTITLE 17. MARYLAND OPIOID USE DISORDER CONSORTIUM.							
14	24–1701.							
15	(A) THERE IS A MARYLAND OPIOID USE DISORDER CONSORTIUM.							
16	(B) THE CONSORTIUM CONSISTS OF THE FOLLOWING MEMBERS:							
17 18	(1) Two members of the Senate of Maryland, appointed by the President of the Senate;							
$\frac{19}{20}$	(2) Two members of the House of Delegates, appointed by the Speaker of the House;							
20	THE OF EARER OF THE HOUSE,							
21	(3) The Secretary of Health and Mental Hygiene, or the							
22	SECRETARY'S DESIGNEE;							
23	(4) The Chief of Staff from the Office of the Governor, or							
$\overline{24}$	THE CHIEF OF STAFF'S DESIGNEE;							
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25	(5) THE EXECUTIVE DIRECTOR OF THE GOVERNOR'S OFFICE OF							
26	CRIME CONTROL AND PREVENTION, OR THE EXECUTIVE DIRECTOR'S DESIGNEE;							
27	(6) THE EXECUTIVE DIRECTOR OF THE GOVERNOR'S OFFICE FOR							
$\overline{28}$	CHILDREN, OR THE EXECUTIVE DIRECTOR'S DESIGNEE;							
29	(7) THE ATTORNEY GENERAL, OR THE ATTORNEY GENERAL'S							
30	DESIGNEE;							

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1	(8) TI	E	SUPERINTENDENT	OF	STATE	POLICE,	-OR-	
2	Superinteni	ENT'S	DESI	GNEE;					
3	<u>49</u>	} T ∓	E D	ean of the Univ	ERSITY	<u>v of Ma</u>	RVIAND.	LALTIN	IORE.
4	•			R THE DEAN'S DESI					,
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5	•			ean of the Univ		y of Ma	RYLAND, I	BALTIM	IORE,
6	School of N	URSIN	3, OR	THE DEAN'S DESIC	NEE;				
7	(1	1) Tr	E D	ean of the Univ	ERSIT	v of Ma	RYLAND. F	SALTIN	IORE.
8	```	,		OR THE DEAN'S DES			,,,		,
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9				CAN OF THE UNIVER			LAND, COLI	LEGE F	'ARK,
10	SCHOOL OF P	UBLIC	HEA	lth, or the Dean'	S DESI	GNEE;			
11	(1	3) T ∓	E D	ean of the John	IS HOP	WINS UN	HVERSITY (Schoo	L OF
12				DEAN'S DESIGNEE					
13				PHYSICIAN, APPO)INTED	BY 7	fhe Med	ICAL	-AND
14	CHIRURGICAL	FACU	LTY (of Maryland;					
15	(1	5) T V	/0 S	UBSTANCE USE D	ISORDI	ER DIRE	CT CARE	PROVII)ERS,
16	APPOINTED B	THE (TOVE	RINGR BASED ON RI	ECOMM	ENDATIO	NS OF ORG	ANIZAT	HONS
17	OR ASSOCIATI	ONS RI	PRE	SENTING DIRECT C.	ARE PR	OVIDERS	; AND		
18	(1	<u>с) Т</u> г	E EO	LLOWING MEMBER	S ADDO	UNTED D	V THE COV	FDNOD	<u></u>
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20		(II	• •	NE REPRESENTATI	VE OF I	LOCAL LA	W ENFORC	EMENT	<u>'e</u> 9
21				WO REPRESENTAT					
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23	OUTPATIENT S	ETTIN	G;						
24		(II)	}	WO REPRESENTAT	TVES V	VITH EX	PERIENCE	AS FA	
25	MEMBERS OF			S WITH OPIOID USE					
26		``'		NE REPRESENTAT					
27				OPIOID USE DISO	RDER	WHO HA	S EXPERII	ENCE	WITH
28	MEDICATION /	SSIST	ED TI	ÆATMENT.					
29	(C) (1) TH	e P r	RESIDENT OF THE S	ENATE	SHALL D	ESIGNATE (ONE OI	- THE
30	MEMBERS API	'OINTE	D FR	om the Senate As	- COCH	AIR OF TH	ie Consor	TIUM.	

(2) THE SPEAKER OF THE HOUSE SHALL DESIGNATE ONE OF THE 1 2 MEMBERS APPOINTED FROM THE HOUSE AS COCHAIR OF THE CONSORTHUM. 3 (D) THE DEPARTMENT OF LEGISLATIVE SERVICES. THE DEPARTMENT OF HEALTH AND MENTAL HYGIENE. AND THE GOVERNOR'S OFFICE OF CRIME 4 CONTROL AND PREVENTION SHALL PROVIDE STAFF FOR THE CONSORTHUM. 5 6 (E) <u>A MEMBER OF THE CONSORTHUM:</u> MAY NOT BECEIVE COMPENSATION AS A MEMBER OF THE 7 (1) 8 **CONSORTIUM: BUT** 9 (2) IS ENTITLED TO REIMBURSEMENT FOR EXPENSES UNDER THE STANDARD STATE TRAVEL REGULATIONS. AS PROVIDED IN THE STATE BUDGET. 10 THE CONSORTIUM SHALL DEVELOP A STRATEGIC STATEWIDE 11 (F) (1) 12 PLAN TO TREAT AND REDUCE OPIOID USE DISORDERS IN THE STATE. 13 (2) THE STRATEGIC STATEWIDE PLAN SHALL INCLUDE A TIMELINE 14 FOR FUTURE ACTIONS TO TREAT AND REDUCE OPIOID USE DISORDERS IN THE 15STATE. 16 (G) THE CONSORTIUM SHALL: 17 (1) USE A STRATEGIC STATEWIDE PLAN DEVELOPMENT PROCESS SIMILAR TO THE PROCESS USED IN COLORADO IN 2013 TO DEVELOP THE 18 19 "COLORADO PLAN TO REDUCE PRESCRIPTION DRUG ABUSE": AND 20 (2) SEEK TECHNICAL ASSISTANCE FROM THE NATIONAL 21 **GOVERNOR'S ASSOCIATION AND OTHER APPROPRIATE ENTITIES TO DEVELOP THE** 22 STRATEGIC STATEWIDE PLAN. 23 (III) (1) THE CONSORTHUM SHALL CONVENE AN INITIAL POLICY 24ACADEMY TO IDENTIFY FOCUS AREAS AND DRAFT INITIAL RECOMMENDATIONS FOR 25THE STRATEGIC STATEWIDE PLAN. THE INITIAL POLICY ACADEMY SHALL CONSIST OF 26 (2) WORKGROUPS, INCLUDING: 2728(I) THE PRESCRIPTION DRUG MONITORING PROGRAM 29 WORKGROUP:

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1		(II)	The	PRESC	RIBER-	AND	PROVIDER	EDUCATION
2	Workgroup;							
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3		(III)	THE 1	REATME	NT WOI	RKGROUI] -	
4		(IV)	THE I	PUBLIC F	DUCAT	ION AND	AWARENESS '	Workgroup;
5	AND	(1)	1112 1					, online of t
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10		(11)	N/ A 3 7 T		EXDED			BERS OF THE
$\frac{10}{11}$	Consortium, A							BEKS OF THE
11	CONSORTION, M	<u>- 1 OIN</u>	<u>160 D1</u>	THE COC			UNDURTIUM,	
12	(I) THE	Cons	ORTIUN	I SHALL	HOLD R	OUNDTAI	BLES ACROSS	FHE STATE TO
13	RECEIVE INPUT	FROM	LOCAL	- OFFICL/	LS ANI	- EXPER	rs to refine	, EXPAND, OR
14	MODIFY THE INI	FIAL I	RECOM	AENDATH	ons fo	R THE ST	RATEGIC STA	TEWIDE PLAN
15	DRAFTED UNDER	SUBS	ECTION	(H) OF T	THIS SEC	TION.		
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16	(J) (1)							ICY ACADEMY
17	TO REVISE ITS R							
18	AND ESTABLISH	\ TIME	ELINE F	OR IMPLI	EMENTA	TION OF	THE STRATEG	I C STATEWIDE
19	PLAN.							
20	(2)	AFTI	ER SUI		OF 1	HE STR	ATEGIC STAT	'EWIDE PLAN
21	FINALIZED UNDE				-			
22	MEET, AS NECES			. ,				
23	STATEWIDE PLAN		/					
24	(3)							WORKGROUPS
25	ESTABLISHED UN	IDER S	SUBSEC'	TION (H)	OF THI	S SECTIO	N, AS NECESSA	RY, TO:
26		(I)	COMP	I FTF TH	E WOD	<u>k of th</u>	F FINAL POLI	CY ACADEMY
$\frac{20}{27}$	UNDER PARAGRA	· ·						
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28		(II)	Moni'	FOR IMP	LEMEN ¹	FATION O	F AND MAKE	REVISIONS TO
29	THE STRATEGIC	STAT	EWIDE-	PLAN SU	BMITTI	ED UNDE	R PARAGRAPH	I (2) OF THIS
30	SUBSECTION.							

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1	(k) In developing, monitoring the implementation of, and
2	REVISING THE STRATEGIC STATEWIDE PLAN, THE CONSORTIUM SHALL
3	COORDINATE WITH ORGANIZATIONS OR WORK TO MAXIMIZE THE IMPACT OF
4	ORGANIZATIONS, INITIATIVES, AND TOOLS ALREADY IN PLACE IN THE STATE TO
5	TREAT OR REDUCE OPIOID USE DISORDERS, INCLUDING:
6	(1) The Controlled Dangerous Substances Unit in the
7	DEPARTMENT OF HEALTH AND MENTAL HYGIENE;
8	(2) THE RAPID RESPONSE TEAM AT THE UNIVERSITY OF MARYLAND
9	SCHOOL OF PHARMACY;
10	(3) THE STATE OVERDOSE PREVENTION PLAN DEVELOPED IN 2013
11	AND UPDATED IN 2014, WHICH INCLUDES PRESCRIBER EDUCATION AND DATA
12	ANALYSIS AND THE USE OF THE DEPARTMENT OF HEALTH AND MENTAL HYGIENE
13	Virtual Data Unit;
14	(4) LOCAL OVERDOSE PREVENTION PLANS;
15	(5) The overdose prevention media campaign within the
16	DEPARTMENT OF HEALTH AND MENTAL HYGIENE BEHAVIORAL HEALTH
17	Administration;
18	(6) EFFORTS TO ENHANCE OVERDOSE RESPONSE LAWS,
19	REGULATIONS, AND TRAINING;
20	(7) Laws establishing local overdose fatality review
21	TEAMS;
22	(8) PRESCRIBER EDUCATION TRAINING APPROVED BY THE FEDERAL
23	FOOD AND DRUG ADMINISTRATION, INCLUDING TRAINING HELD STATEWIDE BY
24	THE MEDICAL AND CHIRURGICAL FACULTY OF MARYLAND AND THE MARYLAND
25	Society for Addiction Medicine; and
26	(9) THE PRESCRIPTION DRUG MONITORING PROGRAM AND
27	EFFORTS TO EXPAND ITS USE BY THE DEPARTMENT OF HEALTH AND MENTAL
28	Hygiene as a public health tool for monitoring and responding to
29	PRESCRIBING PATTERNS ACROSS THE STATE.
30	(L) THE CONSORTIUM SHALL SUBMIT TO THE GOVERNOR AND, IN
31	ACCORDANCE WITH § 2–1246 OF THE STATE GOVERNMENT ARTICLE, THE GENERAL
32	Assembly:

1 (1) ON OR BEFORE JANUARY 1, 2016, A REPORT THAT INCLUDES ANY $\mathbf{2}$ INITIAL RECOMMENDATIONS OF THE CONSORTIUM FOR THE STRATEGIC STATEWIDE 3 PLAN; 4 (2) ON OR BEFORE JANUARY 1, 2017, A REPORT THAT INCLUDES THE $\mathbf{5}$ FINALIZED STRATEGIC STATEWIDE PLAN AND ANY RECOMMENDATIONS FOR 6 **LEGISLATIVE ACTION TO IMPLEMENT THE PLAN; AND** 7 (3) ON OR BEFORE JANUARY 1, 2018, AND ON JANUARY 1 OF EACH 8 YEAR THEREAFTER, A REPORT THAT INCLUDES AN UPDATE ON IMPLEMENTATION 9 OF THE STRATEGIC STATEWIDE PLAN AND ANY REVISIONS THAT HAVE BEEN MADE 10 TO THE STRATEGIC STATEWIDE PLAN BY THE CONSORTIUM. 11 **Article – State Government** 2–10A–02. 12 THERE IS A JOINT COMMITTEE ON BEHAVIORAL HEALTH AND OPIOID 13 (A) **USE DISORDERS.** 1415**(B)** (1) THE COMMITTEE CONSISTS OF 10 MEMBERS. 16 (2) **OF THE 10 MEMBERS:** 17**(I) 5** SHALL BE MEMBERS OF THE SENATE, APPOINTED BY THE 18 **PRESIDENT OF THE SENATE; AND** (II) <u>5 SHALL BE MEMBERS OF THE HOUSE OF DELEGATES</u>, 19 APPOINTED BY THE SPEAKER OF THE HOUSE. 2021**(C)** THE MEMBERS OF THE COMMITTEE SERVE AT THE PLEASURE OF THE 22PRESIDING OFFICER WHO APPOINTED THEM. 23THE PRESIDENT AND THE SPEAKER JOINTLY SHALL APPOINT A **(D)** SENATOR AND A DELEGATE TO SERVE AS COCHAIRS. 2425**(E)** THE COMMITTEE SHALL HAVE OVERSIGHT OVER: 26 (1) THE PRESCRIPTION DRUG MONITORING PROGRAM; 27STATE AND LOCAL PROGRAMS TO TREAT AND REDUCE (2) 28**BEHAVIORAL HEALTH DISORDERS; AND** 29(3) STATE AND LOCAL PROGRAMS TO TREAT AND REDUCE OPIOID USE

30 **DISORDERS.**

	8 SENATE BILL 607						
1	(F) <u>The purposes of the Committee are to:</u>						
$\frac{2}{3}$	(1) <u>REVIEW THE FINAL REPORT OF THE GOVERNOR'S HEROIN AND</u> OPIOID EMERGENCY TASK FORCE;						
4 5	(2) <u>REVIEW AND MONITOR THE ACTIVITIES OF THE GOVERNOR'S</u> INTER-AGENCY HEROIN AND OPIOID COORDINATING COUNCIL;						
$6 \\ 7$	(3) EVALUATE THE EFFECTIVENESS OF PROGRAMS, POLICIES, AND PRACTICES, INCLUDING:						
8	(I) <u>THE STATE'S BEHAVIORAL HEALTH SYSTEM;</u>						
9 10	(II) <u>THE CONTROLLED DANGEROUS SUBSTANCES UNIT IN THE</u> DEPARTMENT OF HEALTH AND MENTAL HYGIENE;						
$\begin{array}{c} 11 \\ 12 \end{array}$	(III) THE RAPID RESPONSE TEAM AT THE UNIVERSITY OF MARYLAND SCHOOL OF PHARMACY;						
$13 \\ 14 \\ 15 \\ 16$	(IV) THE STATE OVERDOSE PREVENTION PLAN DEVELOPED IN 2013 AND UPDATED IN 2014, WHICH INCLUDES PRESCRIBER EDUCATION AND DATA ANALYSIS AND THE USE OF THE DEPARTMENT OF HEALTH AND MENTAL HYGIENE VIRTUAL DATA UNIT;						
17	(V) LOCAL OVERDOSE PREVENTION PLANS;						
18 19	(VI) STRATEGIC PLANNING PRACTICES TO REDUCE PRESCRIPTION DRUG ABUSE IN THE STATE;						
20 21 22	(VII) THE OVERDOSE PREVENTION MEDIA CAMPAIGN IN THE DEPARTMENT OF HEALTH AND MENTAL HYGIENE BEHAVIORAL HEALTH Administration;						
$\begin{array}{c} 23\\ 24 \end{array}$	(VIII) EFFORTS TO ENHANCE OVERDOSE RESPONSE STATUTORY LAWS, REGULATIONS, AND TRAINING;						
$\frac{25}{26}$	(IX) LAWS ESTABLISHING LOCAL OVERDOSE FATALITY REVIEW TEAMS;						
27 28 29 30	(X) PRESCRIBER EDUCATION TRAINING APPROVED BY THE FEDERAL FOOD AND DRUG ADMINISTRATION, INCLUDING TRAINING HELD STATEWIDE BY MEDCHI, THE MARYLAND STATE MEDICAL SOCIETY, AND THE MARYLAND SOCIETY FOR ADDICTION MEDICINE; AND						

1(XI)EFFORTS TO EXPAND USE OF THE PRESCRIPTION DRUG2MONITORING PROGRAM BY THE DEPARTMENT OF HEALTH AND MENTAL HYGIENE3AS A PUBLIC HEALTH TOOL FOR MONITORING AND RESPONDING TO PRESCRIBING4PATTERNS ACROSS THE STATE;

5(4)REVIEW THE EXTENT TO WHICH HEALTH INSURANCE CARRIERS IN6THE STATE ARE COMPLYING WITH FEDERAL AND STATE MENTAL HEALTH AND7ADDICTION PARITY LAWS; AND

8 (5) IDENTIFY AREAS OF CONCERN AND, AS APPROPRIATE, 9 <u>RECOMMEND CORRECTIVE MEASURES TO THE GOVERNOR AND THE GENERAL</u> 10 <u>ASSEMBLY.</u>

11 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect June 12 1, 2015. It shall remain effective for a period of 6 years and, at the end of May 31, 2021, 13 with no further action required by the General Assembly, this Act shall be abrogated and 14 of no further force and effect.

Approved:

Governor.

President of the Senate.

Speaker of the House of Delegates.