

HOUSE BILL 520

J1, O4

9lr1341
CF SB 406

By: **Delegates Lierman, Jones, Bagnall, Boyce, Bridges, Charkoudian, Clippinger, Conaway, Ebersole, Feldmark, Glenn, Hettleman, Ivey, Jalisi, Korman, Krimm, Lafferty, Lehman, R. Lewis, McIntosh, Palakovich Carr, Sample-Hughes, Smith, Solomon, Valderrama, and Wells**

Introduced and read first time: February 4, 2019

Assigned to: Health and Government Operations and Appropriations

A BILL ENTITLED

1 AN ACT concerning

2 **Prenatal and Infant Care Coordination – Grant Funding and Task Force**

3 FOR the purpose of requiring the Governor to include a certain amount of funding for the
4 Maryland Prenatal and Infant Care Coordination Services Grant Program Fund in
5 the annual budget beginning in a certain fiscal year; establishing the Task Force on
6 Maryland Maternal and Child Health; providing for the composition, chair, and staff
7 for the Task Force; prohibiting a member of the Task Force from receiving certain
8 compensation, but authorizing the reimbursement of certain expenses; requiring the
9 Task Force to study and make recommendations regarding certain matters;
10 requiring the Task Force to report its findings and recommendations to the General
11 Assembly on or before a certain date; providing for the effective dates of this Act;
12 providing for the termination of certain provisions of this Act; and generally relating
13 to prenatal and infant care coordination services.

14 BY repealing and reenacting, without amendments,
15 Article – Health – General
16 Section 24–1502(a)
17 Annotated Code of Maryland
18 (2015 Replacement Volume and 2018 Supplement)

19 BY repealing and reenacting, with amendments,
20 Article – Health – General
21 Section 24–1502(f)
22 Annotated Code of Maryland
23 (2015 Replacement Volume and 2018 Supplement)

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

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



Article – Health – General

24–1502.

(a) There is a Maryland Prenatal and Infant Care Coordination Services Grant Program Fund.

(f) **(1)** [Beginning in] **IN** fiscal year 2020 [and in each fiscal year thereafter], the Governor shall include in the annual budget \$50,000 for the Fund.

(2) FOR FISCAL YEAR 2021 AND EACH FISCAL YEAR THEREAFTER, THE GOVERNOR SHALL INCLUDE IN THE ANNUAL BUDGET \$5,000,000 FOR THE FUND.

SECTION 2. AND BE IT FURTHER ENACTED, That:

(a) There is a Task Force on Maryland Maternal and Child Health.

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

(1) one representative of the Maryland Department of Health, designated by the Secretary of Health;

(2) one representative of the Maryland Department of Human Services, designated by the Secretary of Human Services;

(3) one representative of the Maryland Medical Assistance Program, designated by the Secretary of Health;

(4) one representative of the Health Services Cost Review Commission, designated by the Executive Director of the Commission; and

(5) the following members, appointed by the Secretary of Health:

(i) one representative of Johns Hopkins Children’s Center;

(ii) one representative from a community–based organization focused on maternal and infant care support and currently partnered with Johns Hopkins Children’s Center;

(iii) one representative of University of Maryland Children’s Hospital;

(iv) one representative from a community–based organization focused on maternal and infant care support and currently partnered with University of Maryland Children’s Hospital; and

1 (v) three representatives of participants who qualify, are receiving
2 or have received care coordination from targeted programs within the current care
3 coordination system.

4 (c) The Secretary of Health shall designate the chair of the Task Force.

5 (d) The Maryland Department of Health, Maryland Department of Human
6 Services, and the Health Services Cost Review Commission jointly shall provide staff for
7 the Task Force.

8 (e) A member of the Task Force:

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

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

12 (f) The Task Force shall study and make recommendations on:

13 (1) how the policies of the Health Services Cost Review Commission can be
14 used to incentivize early intervention and prevention of key adverse health outcomes, such
15 as asthma, adverse birth outcomes, sickle cell crisis, and mental health crises; and

16 (2) how payment mechanisms can:

17 (i) support community-based and school-based models of care;

18 (ii) use the global budgets revenue system to improve child care;

19 (iii) assist in collaborations with public health care; and

20 (iv) use the Core Set of Children's Health Care Quality Measures for
21 Medicaid to monitor improvements.

22 (g) On or before November 1, 2019, the Task Force shall report its findings and
23 recommendations to the General Assembly in accordance with § 2-1246 of the State
24 Government Article.

25 SECTION 3. AND BE IT FURTHER ENACTED, That Section 1 of this Act shall take
26 effect October 1, 2019.

27 SECTION 4. AND BE IT FURTHER ENACTED, That, except as provided in Section
28 3 of this Act, this Act shall take effect July 1, 2019. Section 2 of this Act shall remain
29 effective for a period of 1 year and, at the end of June 30, 2020, Section 2 of this Act, with
30 no further action required by the General Assembly, shall be abrogated and of no further
31 force and effect.

