SENATE BILL 600

J1 9lr1496 CF HB 761

By: Senator Nathan-Pulliam Senators Nathan-Pulliam, Ellis, Feldman, Patterson, Smith, and Young

Introduced and read first time: February 4, 2019

Assigned to: Education, Health, and Environmental Affairs

Committee Report: Favorable with amendments

Senate action: Adopted

Read second time: March 18, 2019

CHAPTER _____

1 AN ACT concerning

Health – Sickle Cell Disease – Steering Committee, and Services, Testing, and Funding (Sickle Cell Treatment Act of 2019)

5 FOR the purpose of altering the intent of certain provisions of law regarding sickle cell 6 anemia to include the provision of certain resources; altering the representatives 7 required to be included on the Statewide Steering Committee on Services for Adults 8 with Sickle Cell Disease; altering the duties of the Steering Committee; requiring 9 authorizing the Maryland Department of Health to provide certain services relating 10 to sickle cell disease in consultation with the Steering Committee; requiring the 11 Department to provide certain services through community-based organizations to 12 the extent practicable; requiring a local health department to provide sickle cell disease testing and counseling at no cost to any individual referred by certain health 13 care providers; requiring a local health department to notify an individual if certain 14 15 testing is positive for sickle cell disease; requiring the Maryland Public Health Laboratory, under certain circumstances, to provide an individual's sickle cell 16 17 screening test results to a local health department or entity contracting with the 18 local health department providing certain services to the individual; and generally 19 relating to sickle cell disease.

20 BY repealing and reenacting, with amendments,

21 Article – Health – General 22 Section 18–501 and 18–506

23 Annotated Code of Maryland

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	(2015 Replacement Volume and 2018 Supplement)			
2 3 4 5 6	BY adding to Article – Health – General Section 18–507 and 18–508 Annotated Code of Maryland (2015 Replacement Volume and 2018 Supplement)			
7 8	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:			
9	Article – Health – General			
10	18–501.			
11	The intent of this subtitle is:			
12 13	(1) To educate parents and physicians regarding homozygous sickle cell anemia; [and]			
14	(2) To monitor each affected infant's health in that regard; AND			
15 16	(3) TO PROVIDE RESOURCES FOR DETECTING SICKLE CELL DISEASE AND SUPPORTING INDIVIDUALS WITH SICKLE CELL DISEASE.			
17	18–506.			
18 19	(a) In this section, "Steering Committee" means the Statewide Steering Committee on Services for Adults with Sickle Cell Disease.			
20 21	(b) There is a Statewide Steering Committee on Services for Adults with Sickle Cell Disease.			
22	(c) The Steering Committee shall include representatives from:			
23 24	(1) Local and national groups that advocate for individuals with sickle cell disease;			
25	(2) Interest and support groups for individuals with sickle cell disease;			
26	[(3) The Genetic Alliance;			
27	(4) Faith-based organizations;]			
28	[(5)] (3) Community and consumer groups;			

$\frac{1}{2}$	experience ca	[(6)] (4) aring for adu	Academic and private clinical settings with knowledge and lts with sickle cell disease;
3		[(7)] (5)	Area hospitals caring for individuals with sickle cell disease; and
4		[(8)] (6)	Pediatric clinics that care for children with sickle cell disease.
5	(d)	The Steering	g Committee shall:
6		(1) Estab	lish institution and community partnerships;
7 8	with sickle co	` '	lish a statewide network of stakeholders who care for individuals
9 10		` '	ate individuals with sickle cell disease, the public, and health care options for care of sickle cell disease; and
11		[(4) Seek	grant funding to:
12 13	sickle cell dis	(i) sease;	Develop and establish a case management system for adults with
14		(ii)	Establish an adult sickle cell disease day infusion center;
15 16	and treatmen	(iii) nt program f	Develop, implement, and lead a State comprehensive education or adults with sickle cell disease; and
17 18 19 20	dynamics, c	ultural pra	Develop and implement a health care provider awareness and increase provider awareness of health disparities, community ctice, behavioral and psychosocial issues, and the use of and emergency room protocols.]
21 22 23	SUPPORTIN	G THE AC	TIFY FUNDING SOURCES FOR IMPLEMENTING OR CTIONS, STUDIES, POLICIES, REGULATIONS, OR LAWS STEERING COMMITTEE, INCLUDING FUNDING FROM:
24		(I)	STATE, FEDERAL, AND LOCAL GOVERNMENT SOURCES; AND
25		(II)	PRIVATE SOURCES.
26	18–507.		
27	(A)	THE DEP	ARTMENT SHALL MAY, IN CONSULTATION WITH THE

STATEWIDE STEERING COMMITTEE ON SERVICES FOR ADULTS WITH SICKLE CELL

DISEASE, PROVIDE SERVICES RELATING TO SICKLE CELL DISEASE, INCLUDING:

28 29

$\frac{1}{2}$	(1) EDUCATIONAL PROGRAMS ON SICKLE CELL DISEASE FOR INDIVIDUALS AFFECTED BY THE DISEASE, INCLUDING:				
3	(I) INDIVIDUALS WITH SICKLE CELL DISEASE;				
4	(II) FAMILIES OF INDIVIDUALS WITH SICKLE CELL DISEASE;				
5	(III) CAREGIVERS OF INDIVIDUALS WITH SICKLE CELL DISEASE;				
6	(IV) EMPLOYEES AT PRIMARY AND SECONDARY SCHOOLS; AND				
7	(V) HEALTH CARE PROVIDERS;				
8 9 10 11	(2) SOCIAL SERVICES SUPPORT TO INDIVIDUALS WITH SICKLE CELL DISEASE, INCLUDING SUPPORT FROM SOCIAL WORKERS AND COMMUNITY HEALTH WORKERS TO PROVIDE INFORMATION ON SERVICES THAT MAY BE AVAILABLE TO THE INDIVIDUAL;				
12	(3) TESTING;				
13	(4) GENETIC COUNSELING;				
14 15	(5) By establishing sickle cell disease infusion centers in the State;				
16 17	(6) (5) ASSISTANCE WITH ANY AVAILABLE REIMBURSEMENT FOR MEDICAL EXPENSES RELATED TO SICKLE CELL DISEASE;				
18 19 20	(7) (6) EDUCATION AND COUNSELING SERVICES AFTER THE RECEIPT OF SICKLE CELL TRAIT TEST RESULTS FROM THE STATE'S NEWBORN SCREENING PROGRAM; AND				
21 22 23	(8) (7) ANY OTHER PROGRAMS OR SERVICES THAT ARE NECESSARY TO DECREASE THE USE OF ACUTE CARE SERVICES BY INDIVIDUALS WHO HAVE SICKLE CELL DISEASE.				
24 25 26	(B) THE DEPARTMENT SHALL PROVIDE THE SERVICES IN SUBSECTION (A) OF THIS SECTION THROUGH COMMUNITY-BASED ORGANIZATIONS TO THE EXTENT PRACTICABLE.				

27 18-508.

1	(A) (1) A LOCAL HEALTH DEPARTMENT SHALL PROVIDE SICKLE CELL				
2	DISEASE TESTING AND COUNSELING AT NO COST TO ANY INDIVIDUAL WHO IS				
3	REFERRED BY:				
4	(I) A PHYSICIAN LICENSED TO PRACTICE MEDICINE IN THE				
5	STATE;				
6	(II) A PHYSICIAN ASSISTANT LICENSED UNDER TITLE 15 OF THE				
7	HEALTH OCCUPATIONS ARTICLE; OR				
'	THEREIT OCCUPATIONS AND TOLES, ON				
8	(III) A NURSE PRACTITIONER LICENSED TO PRACTICE				
9	REGISTERED NURSING IN THE STATE WHO IS CERTIFIED AS A NURSE PRACTITIONER				
10	BY THE STATE BOARD OF NURSING UNDER TITLE 8 OF THE HEALTH OCCUPATIONS				
11	ARTICLE.				
12	(2) A LOCAL HEALTH DEPARTMENT SHALL NOTIFY AN INDIVIDUAL IF				
13	ANY TESTING CONDUCTED BY THE DEPARTMENT IS POSITIVE FOR SICKLE CELL				
14	DISEASE.				
15	(B) THE MARYLAND PUBLIC HEALTH LABORATORY SHALL PROVIDE AN				
16	INDIVIDUAL'S SICKLE CELL SCREENING TEST RESULTS TO ANY LOCAL HEALTH				
17	DEPARTMENT OR ENTITY CONTRACTING WITH THE LOCAL HEALTH DEPARTMENT				
18	THAT IS PROVIDING SICKLE CELL SERVICES TO THE INDIVIDUAL UNDER				
19	SUBSECTION (A) OF THIS SECTION:				
20	(1) ON REQUEST; AND				
20	(1) ON INDICEDITATION				
21	(2) WITH THE INDIVIDUAL'S AUTHORIZATION.				
22	SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect June				
23	1, 2019.				
20	1, 2010.				
	Approved:				
	Governor.				
	President of the Senate.				

Speaker of the House of Delegates.