AMENDMENTS TO HOUSE BILL 1188
(First Reading File Bill)

AMENDMENT NO. 1

On page 1, in the sponsor line, strike “and McComas” and substitute “McComas, Pendergrass, Pena–Melnyk, Bagnall, Belcastro, Bhandari, Carr, Chisholm, Cullison, Hill, Johnson, Kelly, Kerr, Kipke, Landis, R. Lewis, Morgan, Reilly, Rosenberg, Saab, Sample–Hughes, Szeliga, and K. Young”; strike beginning with “and” in line 2 down through “Practitioners” in line 3; in line 4, after the first “of” insert “renaming the Statewide Steering Committee on Services for Adults with Sickle Cell Disease to be the Statewide Steering Committee on Sickle Cell Disease;”; strike beginning with “requiring” in line 8 down through “licensees;” in line 10; in line 11, strike “information for individuals and health care practitioners on”; in lines 11 and 12, strike “and trait”; after line 12, insert:

“BY repealing and reenacting, with amendments, Article – Health – General Section 18–506 and 18–507 Annotated Code of Maryland (2019 Replacement Volume and 2021 Supplement)”;

and strike in their entirety lines 18 through 22, inclusive.

AMENDMENT NO. 2

On page 1, after line 25, insert:

“18–506.

(a) In this section, “Steering Committee” means the Statewide Steering Committee on [Services for Adults with] Sickle Cell Disease.
(b) There is a Statewide Steering Committee on [Services for Adults with] Sickle Cell Disease.

(c) The Steering Committee shall include representatives from:

(1) Local and national groups that advocate for individuals with sickle cell disease;

(2) Interest and support groups for individuals with sickle cell disease;

(3) Community and consumer groups;

(4) Academic and private clinical settings with knowledge and experience caring for adults with sickle cell disease;

(5) Area hospitals caring for individuals with sickle cell disease; and

(6) Pediatric clinics that care for children with sickle cell disease.

(d) The Steering Committee shall:

(1) Establish institution and community partnerships;

(2) Establish a statewide network of stakeholders who care for individuals with sickle cell disease;

(3) Educate individuals with sickle cell disease, the public, and health care providers about the State options for care of sickle cell disease; and

(4) Identify funding sources for implementing or supporting the actions, studies, policies, regulations, or laws recommended by the Steering Committee, including funding from:
18–507.

(a) The Department may, in consultation with the Statewide Steering Committee on [Services for Adults with] Sickle Cell Disease, provide services relating to sickle cell disease, including:

(1) Educational programs on sickle cell disease for individuals affected by the disease, including:

(i) Individuals with sickle cell disease;

(ii) Families of individuals with sickle cell disease;

(iii) Caregivers of individuals with sickle cell disease;

(iv) Employees at primary and secondary schools; and

(v) Health care providers;

(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;

(3) Testing;

(4) Genetic counseling;

(Over)
(5) Assistance with any available reimbursement for medical expenses related to sickle cell disease;

(6) Education and counseling services after the receipt of sickle cell trait test results from the State's Newborn Screening Program; and

(7) Any other programs or services that are necessary to decrease the use of acute care services by individuals who have sickle cell disease.

(b) The Department shall provide the services in subsection (a) of this section through community–based organizations to the extent practicable.”.

On page 2, in line 2, after “DEPARTMENT” insert “, IN CONSULTATION WITH THE STATEWIDE STEERING COMMITTEE ON SICKLE CELL DISEASE,”.

On pages 2 and 3, strike in their entirety the lines beginning with line 21 on page 2 through line 30 on page 3.

On page 4, after line 5, insert:

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

(a) The Statewide Steering Committee on Sickle Cell Disease, in conjunction with the Maryland Department of Health and other relevant stakeholders, shall study and make recommendations on:

(1) how to enhance access to services for individuals with sickle cell disease with a focus on areas of the State where there is a statistically high number of individuals with sickle cell disease and areas where there is a lack of providers with expertise in treating sickle cell disease:
(2) whether to establish a sickle cell disease registry, and if recommended, the process and guidelines for establishing a registry, obtaining information, connecting with the State designated exchange, and protecting data privacy;

(3) how to enhance the coordination of health care services for individuals with sickle cell disease who are transitioning from pediatric to adult health care in the State including the identification of available resources for individuals who are transitioning; and

(4) how to engage with community–based health fairs and other community–sponsored events in areas with a statistically high number of individuals with sickle cell disease to provide outreach and education on living with sickle cell disease and how to access health care services.

(b) On or before December 1, 2022, the Statewide Committee on Sickle Cell Disease shall report its findings and recommendations, in accordance with § 2–1257 of the State Government Article, to the General Assembly on or before December 1, 2022.”;

in line 6, strike “3.” and substitute “4.”; and in line 7, strike “October” and substitute “July”.