SENATE BILL 196

J12lr0053 (PRE-FILED) By: Chair, Finance Committee (By Request - Departmental - Health) Requested: October 5, 2021 Introduced and read first time: January 12, 2022 Assigned to: Finance Committee Report: Favorable Senate action: Adopted Read second time: February 12, 2022 CHAPTER AN ACT concerning Maryland Department of Health - Overdose Report FOR the purpose of extending the termination date for certain provisions of law requiring the Secretary of Health to examine and report on fatal overdoses involving opioids and other controlled substances; altering the requirements relating to the examination and report; and generally relating to the Maryland Department of Health and reporting on fatal overdoses. BY repealing and reenacting, with amendments. Article – Health – General Section 7.5–701 Annotated Code of Maryland (2019 Replacement Volume and 2021 Supplement) BY repealing and reenacting, with amendments, Chapter 211 of the Acts of the General Assembly of 2018 Section 3 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND. That the Laws of Maryland read as follows: Article - Health - General 7.5 - 701.

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

4

5

6

7

8

9

10

11

12

13

14

15

16 17

18

19

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



32

1 2 3 4 5	(a) On or before July 1 each year, the Secretary shall examine the [prescription and treatment] history[, including court—ordered treatment or treatment provided through the criminal justice system,] of individuals in the State who suffered fatal overdoses involving [opiates] OPIOIDS and other controlled [dangerous] substances in the immediately preceding 4 calendar years.			
6 7 8 9 10 11	(b) In conducting the examination required under subsection (a) of this section, the Secretary shall collaborate with the Department of Public Safety and Correctional Services, the Department of Human Services, the Department of Juvenile Services, the Maryland Institute for Emergency Medical Services Systems, the Department of Housing and Community Development, and any other State and local agency that the Secretary considers necessary.			
12 13 14 15	provide a report on the findings of the examination required under subsection (a) of this section to the Governor and, in accordance with § 2–1257 of the State Government Article,			
16	(2) The report required under paragraph (1) of this subsection shall:			
17 18 19	(i) Include an assessment of the factors associated with fatal and nonfatal opioid overdose risk and an assessment of the programs targeted at opioid use and misuse, including:			
20 21 22	1. Utilization of mental health and substance use disorder treatment and recovery support services, including claims data from the Maryland Medical Assistance Program;			
23	2. Utilization of hospital services;			
24	3. Utilization of emergency medical services;			
25	4. Utilization of controlled prescription drugs and antidotes;			
26 27	5. Involvement with the State and local criminal justice system, including arrest, incarceration, and community supervision;			
28	6. Involvement with social services agencies;			
29 30	7. Socioeconomic status, race, age, ethnicity, location of overdose, marital status, and employment status;			
31	8. Education status; and			

Access to public or private health insurance coverage;

9.

$\frac{1}{2}$	found to be at risk	(ii) of over	Identify and assess methods of intervening with populations close or a substance use disorder; and
3 4	prevention, respon	(iii) se, and	Include recommendations for improving and providing statewide data collection efforts related to substance use disorder.
5 6	(3) include accessing,		ssessment required under paragraph (2) of this subsection shall nere feasible links to, the following data sets:
7		(i)	Overdose deaths and other fatal drug poisonings;
8		(ii)	Substance use treatment;
9		(iii)	Prescription Drug Monitoring Program;
10		(iv)	Emergency medical services database;
11 12	gestation;	(v)	Select birth information for children exposed to opioids during
13		(vi)	Cancer registry;
14		(vii)	Cause and manner of death and toxicology;
15 16 17	associated with substance–related	subst	<u>e</u>
18		(ix)	All payer claims database;
19 20	incarcerations in co		Corrections mental health and substance use disorder data and onal facilities including county detention centers;
21		(xi)	[Needle exchange program] SYRINGE SERVICE PROGRAMS;
22		(xii)	Drug seizures;
23		(xiii)	Index of concentration at the extremes;
24		(xiv)	Maryland violent death records system;
25 26	Community-based	(xv) Epide	Electronic Surveillance System for the Early Notification of mics;
27		(xvi)	Vital statistics;
28		(xvii)	State and local fatality review records; and

1 (xviii) Maryland Medical Assistance Program pharmacy claims. 2 (4) On or before September 1, 2018, each entity identified under subsection 3 (b) of this section shall provide data to the Department in accordance with this section and 4 enter into a data sharing use agreement with the Department. 5 Any records and information provided to the Department in accordance with (d) 6 this section that could identify any individual are not public records and are not subject to 7 discovery, subpoena, or other means of legal compulsion in civil or criminal litigation. 8 (e) The Department shall seek any available federal funding to implement the 9 requirements of this section. 10 SECTION 2. AND BE IT FURTHER ENACTED, That the Laws of Maryland read 11 as follows: 12Chapter 211 of the Acts of 2018 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect June 13 1, 2018. [It] SECTION 1-224 OF THE HEALTH OCCUPATIONS ARTICLE, AS ENACTED 14 BY SECTION 1 OF THIS ACT, shall remain effective for a period of 4 years and 2 months 15 and, at the end of July 31, 2022, § 1–224 OF THE HEALTH OCCUPATIONS ARTICLE, AS 16 17 ENACTED BY SECTION 1 OF this Act, with no further action required by the General Assembly, shall be abrogated and of no further force and effect. **SECTION 7.5–701 OF THE** 18 19 HEALTH - GENERAL ARTICLE, AS ENACTED BY SECTION 1 OF THIS ACT, SHALL 20 REMAIN EFFECTIVE FOR A PERIOD OF 6 YEARS AND 2 MONTHS AND, AT THE END OF JULY 31, 2024, § 7.5–701 OF THE HEALTH – GENERAL ARTICLE, AS ENACTED BY 2122SECTION 1 OF THIS ACT, WITH NO FURTHER ACTION REQUIRED BY THE GENERAL 23 ASSEMBLY, SHALL BE ABROGATED AND OF NO FURTHER FORCE AND EFFECT. 24 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect July 25 1, 2022. Section 1 of this Act shall remain effective for a period of 2 years and 1 month and. 26at the end of July 31, 2024, Section 1 of this Act, with no further action required by the 27 General Assembly, shall be abrogated and of no further force and effect. Approved: Governor.

Speaker of the House of Delegates.

President of the Senate.