SENATE BILL 591

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By: **Senator Augustine** Introduced and read first time: February 2, 2022 Assigned to: Finance

A BILL ENTITLED

1 AN ACT concerning

Maryland Health Care Commission – Patient Safety Center – Designation and Fund

- FOR the purpose of requiring the Maryland Health Care Commission to designate a center
 as the Patient Safety Center for the State on or before a certain date; establishing
 requirements for a center designated under this Act; establishing the Patient Safety
- 7 Center Fund as a special, nonlapsing fund; requiring interest earnings of the Fund
- 8 to be credited to the Fund; and generally relating to a Patient Safety Center.
- 9 BY adding to
- 10 Article Health General
- 11 Section 19–112
- 12 Annotated Code of Maryland
- 13 (2019 Replacement Volume and 2021 Supplement)
- 14 BY repealing and reenacting, without amendments,
- 15 Article State Finance and Procurement
- 16 Section 6–226(a)(2)(i)
- 17 Annotated Code of Maryland
- 18 (2021 Replacement Volume)
- 19 BY repealing and reenacting, with amendments,
- 20 Article State Finance and Procurement
- 21 Section 6–226(a)(2)(ii)144. and 145.
- 22 Annotated Code of Maryland
- 23 (2021 Replacement Volume)
- 24 BY adding to
- 25 Article State Finance and Procurement
- 26 Section 6–226(a)(2)(ii)146.
- 27 Annotated Code of Maryland

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



(2021 Replacement Volume)

Preamble

3 WHEREAS, The Maryland Health Care Commission has been designating the 4 State's patient safety center since 2009; and

5 WHEREAS, The Maryland Patient Safety Center, Inc., has been designated by the 6 Maryland Health Care Commission as the State's patient safety center through April 2025; 7 and

8 WHEREAS, The vision of the Maryland Patient Safety Center, Inc., the 9 State-designated patient safety center since its inception, is to be a model of patient safety 10 innovation and implementation and to convene providers, patients, and families across the 11 health care continuum to prevent avoidable harm and provide safe and equitable health 12 care for all; and

WHEREAS, The Maryland Patient Safety Center, Inc., has convened and facilitated successful, results-driven quality improvement and patient safety initiatives focused on decreasing lengths of stay and transfers for infants with neonatal abstinence syndrome, increasing rates of women with opioid use disorder in treatment at the time of delivery, reducing primary cesarean section rates, improving sepsis survival, reducing injuries related to falls in long-term care facilities, and reducing facility-acquired infections in hospitals and long-term care facilities; and

WHEREAS, The COVID-19 pandemic has stressed Maryland's health care workforce and led to a severe staffing shortage, nearing 2,600 nursing vacancies, and in response, the Maryland Patient Safety Center, Inc., has collaborated with the Armstrong Institute for Patient Safety and Quality at The Johns Hopkins University to deliver Caring for the Caregiver, a training program focused on peer support, resiliency, and emotional well-being of the health care workforce with the goal of decreased turnover and optimal safety for providers and patients alike; and

WHEREAS, Racial and ethnic disparities persist in maternal health care and present a patient safety concern, as shown in the 2020 Maryland Mortality Review Committee report, which demonstrated that the maternal mortality rate from 2014 to 2018 was 18.4 per 100,000 live births for all races, but 8.8 for white Marylanders and 35.1 for Black Marylanders; and

WHEREAS, The Statewide Integrated Health Improvement Strategy includes maternal and child health as one of three population health priorities and the State has committed to reducing the overall severe maternal morbidity rate by 19% by 2026, focusing on closing the racial gap by lowering the Black (non–Hispanic) rate by 20%; and

36 WHEREAS, Through a 2-year collaborative agreement, the Maryland Patient 37 Safety Center, Inc., supported 31 Maryland birthing hospitals in achieving an aggregate

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1 decrease of primary cesarean sections by 5.1% during the collaborative period with a total

2 cost savings of \$2.6 million; and

3 WHEREAS, Health equity is a priority for the Maryland Patient Safety Center, Inc., 4 and, through partnerships with local experts, it created the Maternal Health Equity Project 5 to educate and develop resources for nonobstetric providers on maternal morbidity, racial 6 bias, and the value of the patient's voice and experience; now, therefore,

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

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Article – Health – General

10 **19–112.**

11 (A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS 12 INDICATED.

13(2) "CENTER" MEANS A PATIENT SAFETY CENTER DESIGNATED BY14THE COMMISSION.

15(3) "FUND" MEANS THE MARYLAND PATIENT SAFETY CENTER16FUND.

17 (B) (1) ON OR BEFORE DECEMBER 31, 2025, THE COMMISSION SHALL 18 DESIGNATE A CENTER FOR THE STATE.

19 (2) THE CENTER DESIGNATED UNDER PARAGRAPH (1) OF THIS 20 SUBSECTION SHALL CONTINUE TO ACT AS THE STATE-DESIGNATED CENTER FOR 21 THE DURATION OF THE DESIGNATION PERIOD, AS DETERMINED BY THE 22 COMMISSION, IF THE CENTER CONTINUOUSLY MEETS THE STANDARDS AND 23 REQUIREMENTS ESTABLISHED BY THE COMMISSION.

24 (C) THE DESIGNATED CENTER SHALL:

25 (1) DEVELOP, COORDINATE, AND IMPLEMENT PATIENT SAFETY 26 INITIATIVES ACROSS THE STATE;

27 (2) BE A MODEL FOR PATIENT SAFETY INNOVATION AND 28 IMPLEMENTATION IN THE STATE;

29(3) CONVENE HEALTH CARE PROVIDERS, PATIENTS, AND FAMILIES30 TO:

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$\frac{1}{2}$	(I) IMPROVE THE QUALITY OF HEALTH CARE AND REDUCE PREVENTABLE AND AVOIDABLE HARM; AND				
$\frac{3}{4}$	(II) PROVIDE SAFE AND EQUITABLE HEALTH CARE FOR STATE CITIZENS; AND				
$5 \\ 6$	(4) SHARE INFORMATION RELATING TO BEST PRACTICES AMONG PROVIDERS AND PATIENTS IN THE STATE.				
7	(D) (1) THERE IS A PATIENT SAFETY CENTER FUND.				
8 9 10	(2) THE PURPOSE OF THE FUND IS TO SUBSIDIZE A PORTION OF THE COSTS OF THE CENTER SO THAT THE CENTER MAY PERFORM THE DUTIES DESCRIBED UNDER SUBSECTION (C) OF THIS SECTION.				
11	(3) THE COMMISSION SHALL ADMINISTER THE FUND.				
12 13					
$\begin{array}{c} 14 \\ 15 \end{array}$	(II) THE STATE TREASURER SHALL HOLD THE FUND SEPARATELY, AND THE COMPTROLLER SHALL ACCOUNT FOR THE FUND.				
16	(5) THE FUND CONSISTS OF:				
17 18	(I) MONEY APPROPRIATED IN THE STATE BUDGET TO THE FUND;				
19	(II) INTEREST EARNINGS; AND				
$\begin{array}{c} 20\\ 21 \end{array}$	(III) ANY OTHER MONEY FROM ANY OTHER SOURCE ACCEPTED FOR THE BENEFIT OF THE FUND.				
22 23 24	(6) THE FUND MAY BE USED ONLY TO SUBSIDIZE A PORTION OF THE COSTS OF THE CENTER SO THAT THE CENTER MAY PERFORM THE DUTIES DESCRIBED UNDER SUBSECTION (C) OF THIS SECTION.				
$\frac{25}{26}$	(7) (I) THE STATE TREASURER SHALL INVEST THE MONEY OF THE FUND IN THE SAME MANNER AS OTHER STATE MONEY MAY BE INVESTED.				
$\begin{array}{c} 27\\ 28 \end{array}$	(II) ANY INTEREST EARNINGS OF THE FUND SHALL BE CREDITED TO THE FUND.				

1 (E) (1) FOR FISCAL YEAR 2023 AND EACH FISCAL YEAR THEREAFTER, 2 THE GOVERNOR SHALL INCLUDE IN THE ANNUAL BUDGET BILL AN APPROPRIATION 3 OF \$1,000,000 FOR THE FUND.

4 (2) THE COMMISSION MAY PROVIDE AN ANNUAL GRANT FROM THE 5 FUND TO THE CENTER IN THE AMOUNT APPROPRIATED UNDER PARAGRAPH (1) OF 6 THIS SUBSECTION, PLUS ANY INTEREST AND OTHER INCOME DISTRIBUTED TO THE 7 FUND.

8 (3) EXPENDITURES FROM THE FUND MAY BE MADE ONLY IN 9 ACCORDANCE WITH THE STATE BUDGET.

10 (4) MONEY EXPENDED FROM THE FUND FOR THE CENTER IS 11 SUPPLEMENTAL TO, AND IS NOT INTENDED TO TAKE THE PLACE OF, FUNDING THAT 12 OTHERWISE WOULD BE APPROPRIATED FOR THE CENTER.

13 (F) ON OR BEFORE OCTOBER 1 EACH YEAR, THE COMMISSION, IN 14 CONJUNCTION WITH THE CENTER, SHALL REPORT TO THE SENATE FINANCE 15 COMMITTEE AND THE HOUSE HEALTH AND GOVERNMENT OPERATIONS 16 COMMITTEE, IN ACCORDANCE WITH § 2–1257 OF THE STATE GOVERNMENT 17 ARTICLE, ON:

18 (1) THE CENTER'S STATEWIDE ACTIVITIES RELATED TO THE 19 DEVELOPMENT, COORDINATION, AND IMPLEMENTATION OF PATIENT SAFETY 20 INITIATIVES; AND

21 (2) How the Center's statewide initiatives align with 22 State-designated priorities.

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Article – State Finance and Procurement

24 6-226.

(a) (2) (i) Notwithstanding any other provision of law, and unless
inconsistent with a federal law, grant agreement, or other federal requirement or with the
terms of a gift or settlement agreement, net interest on all State money allocated by the
State Treasurer under this section to special funds or accounts, and otherwise entitled to
receive interest earnings, as accounted for by the Comptroller, shall accrue to the General
Fund of the State.

(ii) The provisions of subparagraph (i) of this paragraph do not apply
to the following funds:

	6		SENATE BILL 591
1 2	[and]	144.	the Health Equity Resource Community Reserve Fund;
3		145.	the Access to Counsel in Evictions Special Fund; AND
4		146.	THE PATIENT SAFETY CENTER FUND.
$5\\6$	SECTION 2. AND October 1, 2022.	BE I	T FURTHER ENACTED, That this Act shall take effect