SENATE BILL 984

J1, J3

By: Senator Klausmeier
Introduced and read first time: February 18, 2022
Assigned to: Rules

A BILL ENTITLED

AN ACT concerning

Public Health – State Designated Exchange – Health Data Utility

FOR the purpose of requiring the State designated exchange to operate as a health data
utility for the State for certain purposes; requiring the Maryland Department of
Health, dispensers, and certain nursing homes and electronic health networks to
provide certain data to the State designated exchange; requiring dispensers to
submit certain prescription information to the State designated exchange; and
generally relating to the State designated exchange operating as a health data
utility.

BY adding to
Article – Health – General
Section 19–145
Annotated Code of Maryland
(2019 Replacement Volume and 2021 Supplement)

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

Article – Health – General

19–145.

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

(2) “DISPENSER” MEANS A PERSON AUTHORIZED BY LAW TO
DISPENSE, AS DEFINED IN § 12–101 OF THE HEALTH OCCUPATIONS ARTICLE, A
PRESCRIPTION DRUG TO A PATIENT OR THE PATIENT’S AGENT IN THE STATE.

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.
[Brackets] indicate matter deleted from existing law.
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(3) “State designated exchange” has the meaning stated in § 4–302.3 of this article.

(B) The State designated exchange shall operate as a health data utility for the State.

(C) The purposes of the health data utility include the:

(1) The collection, aggregation, and analysis of clinical information, public health data, and health administrative and operations data to assist health care and public health leaders in the evaluation of public health interventions and health equity;

(2) The communication of data from public health officials and health care providers to advance disease control and health equity; and

(3) The enhancement and acceleration of the interoperability of health information throughout the State.

(D) The following entities shall provide data to the State designated exchange:

(1) The Department;

(2) Nursing homes required to provide data under § 4–302.3 of this article;

(3) Electronic health networks required to provide data under § 4–302.3 of this article; and

(4) Dispensers.

(E) (1) The purpose of this subsection is to:

(I) Authorize individuals and organizations involved in the treatment and care coordination of patients to access, as legally authorized, a patient’s medication history, including medications prescribed for the patient; and

(II) Assist health care providers, care managers, and public health officials to understand and promote matters of health equity and treatment efficacy.
(2) After dispensing a prescription drug, a dispenser shall submit prescription information to the State designated exchange.

(3) The prescription information shall be submitted:

   (i) By electronic means;

   (ii) Without unduly increasing the workload and expense on a dispenser;

   (iii) In a manner as compatible as possible with existing data submission practices, including technology software of dispensers; and

   (iv) As otherwise required by regulations adopted by the Commission.

(4) The State designated exchange may not impose any fees or other assessments on dispensers to support the operation of the exchange.

(5) The State designated exchange shall make prescription information submitted under this subsection available for purposes of treatment and care coordination of a patient.

(f) The State designated exchange shall provide data, as allowed by law, to individuals and organizations involved in the treatment and care coordination of patients and to public health officials to support public health goals, that may include:

   (1) Understanding and promoting the equitable availability to patients of prescription medications, including for the treatment of infectious disease;

   (2) Assisting health care providers, care managers, and public health officials in identifying opportunities to use treatments more effectively, including for stewardship of antibiotic medications; and

   (3) Any additional patient interventions and activities, including case investigation.
(G) (1) The Commission, in consultation with appropriate stakeholders, shall adopt regulations to carry out this section.

(2) The regulations shall include:

   (i) The specific data required to be provided under subsection (d) of this section;

   (ii) The specific prescription information required to be submitted under subsection (e) of this section;

   (iii) The time frame for submitting prescription information under subsection (e) of this section;

   (iv) The electronic means and manner by which prescription information is to be submitted under subsection (e) of this section; and

   (v) Prescription information submission requirements that align with the data submission requirements on dispensers of monitored prescription drugs under Title 21, Subtitle 2A of this article.

SECTION 2. AND BE IT FURTHER ENACTED, That on or before January 1, 2024, the Maryland Department of Health, the Maryland Health Care Commission, and the State designated exchange shall submit a report to the General Assembly, in accordance with § 2–1257 of the State Government Article, that identifies ongoing revenue sources to fund the activities required under § 19–145 of the Health – General Article, as enacted by Section 1 of this Act.

SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2022.