J13 lr 0 4 1 8**CF HB 497** 

By: Senators Hershey and Mautz

Introduced and read first time: February 3, 2023

Assigned to: Finance

## A BILL ENTITLED

1	AN ACT concerning			
2 3	Rural Health Collaborative Pilot Repeal and Mid Shore Health Improvement Coalition Funding			
4	FOR the purpose of repealing the provisions of law establishing and governing the Rural			
5 6	, 1 0			
$\frac{6}{7}$	the State budget in certain fiscal years to fund the operations of the Mid Shore Health Improvement Coalition; and generally relating to the Rural Health			
8	Collaborative Pilot and the Mid Shore Health Improvement Coalition.			
9	BY repealing			
10	Article – Health – General			
11	Section 2-901 through 2-908 and the subtitle "Subtitle 9. Rural Health			
12	Collaborative Pilot"			
13	Annotated Code of Maryland			
14	(2019 Replacement Volume and 2022 Supplement)			
15	BY adding to			
16	Article – Health – General			
17	Section 24–2201 to be under the new subtitle "Subtitle 22. Mid Shore Health			
18	Improvement Coalition Funding"			
19	Annotated Code of Maryland			
20	(2019 Replacement Volume and 2022 Supplement)			
21	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,			
22	That the Laws of Maryland read as follows:			
23	Article - Health - General			
24	[Subtitle 9. Rural Health Collaborative Pilot.]			

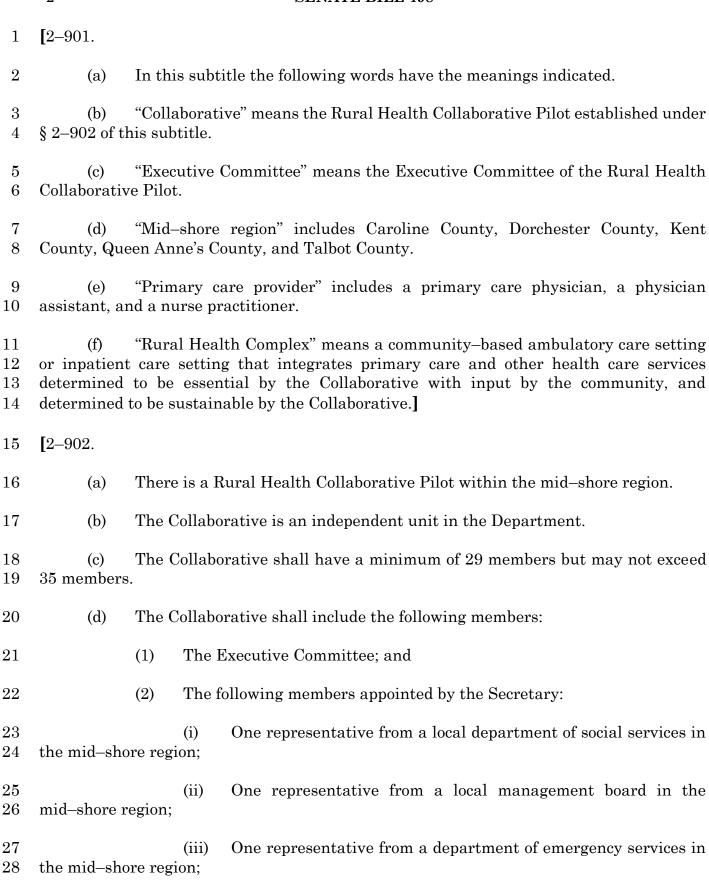


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region;

(iv)



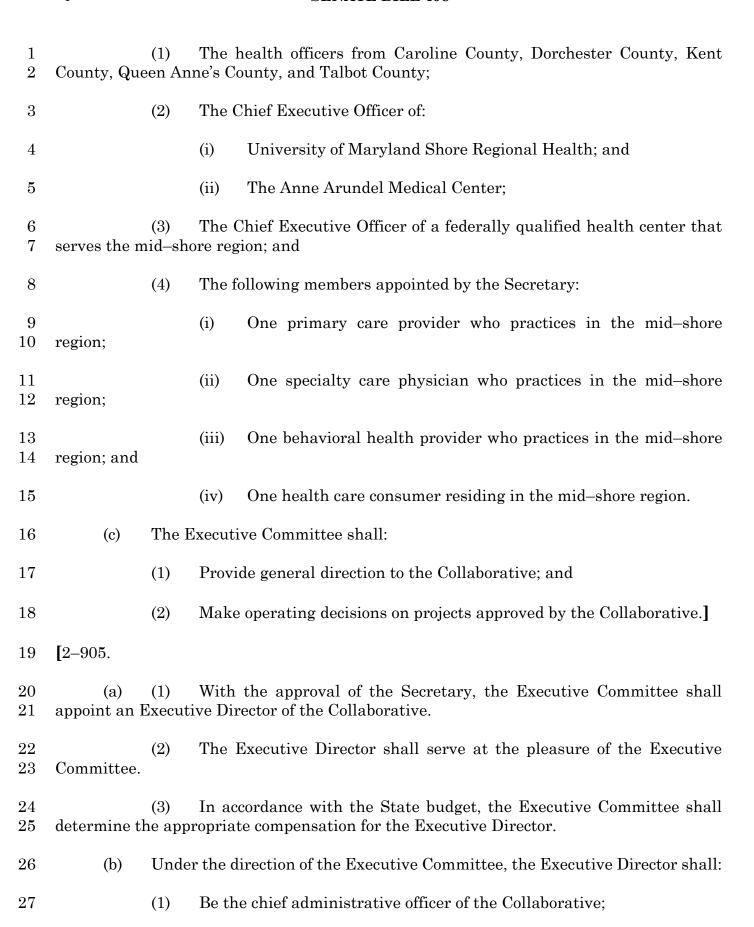
One representative from a local agency on aging in the mid-shore

$\frac{1}{2}$	mid-shore region;	(v)	One representative from a local board of education in the	
3 4	region;	(vi)	One health care consumer from each county in the mid-shore	
5 6	region; and	(vii)	One health care provider from each county in the mid-shore	
7 8	the mid-shore reg	(viii) ion.	Two representatives from primary transportation providers in	
9	(e) The p	ourpose	es of the Collaborative are to:	
10 11 12	(1) enhances access to of:		a regional partnership in building a rural health system that tilization of health care services designed to meet the triple aim	
13		(i)	Providing health care;	
14		(ii)	Alignment with the State's Medicare waiver; and	
15		(iii)	Improving population health;	
16	(2)	Media	ate disputes between stakeholders;	
17 18	(3) mid-shore region;	Assis	t in collaboration among health care service providers in the	
19 20	(4) the health status,		ase the awareness among county officials and residents regarding needs, and available resources in the mid–shore region; and	
21	(5)	Enha	nce rural economic development in the mid-shore region.]	
22	[2–903.			
23 24 25 26	This subtitle does not affect the authority of the Secretary, the Maryland Health Care Commission, or the Health Services Cost Review Commission to regulate a health care facility, a health care institution, a health care service, or a health care program under this article.]			
27	[2-904.			
28	(a) There	e is a R	ural Health Care Collaborative Executive Committee.	

The Executive Committee consists of the following members:

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(b)



1 (2)Direct, administer, and manage the operations of the Collaborative; and 2 Perform all duties necessary to comply with and carry out the (3)3 provisions of this subtitle. 4 In accordance with the State budget, the Executive Director may employ and (c) retain a staff for the Collaborative. 5 6 The Executive Director shall determine the classification, grade, and (d) 7 compensation of those positions designated under subsection (c) of this section: 8 (1) In consultation with the Secretary of Budget and Management; 9 With the approval of the Executive Committee; and (2)10 (3)In accordance with the State pay plan. [2–906. 11 12 In addition to the powers set forth elsewhere in this subtitle, the Collaborative (a) 13 may: 14 (1) Adopt bylaws, rules, and policies: 15 (2) Adopt regulations to carry out this subtitle; 16 (3) Maintain an office at the place designated by the Collaborative; 17 (4) Apply for and receive grants, contracts, or other public or private funding; 18 19 (5)Issue and award contracts and grants; and 20 (6)Do all things necessary or convenient to carry out the powers granted by this subtitle. 2122 To carry out the purposes of this subtitle, the Collaborative may create and consult with ad hoc advisory committees. 23[2-907. 2425For fiscal year 2019 and for each fiscal year thereafter, the Governor shall provide 26 an appropriation in the State budget adequate to fully fund the operations of the 27 Collaborative.

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[2–908.

- The Collaborative shall direct the establishment of Rural Health 1 (1) (a) 2 Complexes by: 3 (i) Assessing the needs of communities in the mid-shore region that 4 lack access to essential community-based primary care, behavioral health, specialty care, or dental care services: 5 6 Identifying care delivery models that have the potential to reduce (ii) 7 deficits in care; and 8 (iii) Convening health and hospital systems, community 9 organizations, and local stakeholders to build consensus on the appropriate scale of a Rural Health Complex. 10 11 (2) (i) The Secretary shall approve a Rural Health Complex: 12 Recommended by the Collaborative by a majority of a 1. 13 quorum of the Collaborative present and voting; That meets the standards and criteria established by the 14 15 Collaborative for a Rural Health Complex; and 16 3. If the Rural Health Complex demonstrates that it meets 17 the standards and criteria established by the Collaborative. 18 A complex that fails to meet the standards and criteria (ii) 19 established by the Collaborative shall relinquish its designation as a complex. 20 (3)On or before December 1, 2020, the Collaborative shall report to the 21Governor and, in accordance with § 2–1257 of the State Government Article, the General 22Assembly on the standards and criteria that a community must meet to establish a Rural 23Health Complex before the Collaborative approves a Rural Health Complex. 24 On or before December 1, 2021, and December 1 each year thereafter, the 25Collaborative shall report to the Governor and, in accordance with § 2–1257 of the State 26 Government Article, the General Assembly on its activities regarding health care delivery in the mid-shore region, including: 27 28 The number of Rural Health Complexes approved; (1) 29The effect that each Rural Health Complex had on the health status of 30 the overall population and the vulnerable population in its community; and
- 31 (3) The effect that Rural Health Complexes have had on the available 32 community—based health care resources in communities where complexes have been 33 established.]

- 1 SUBTITLE 22. MID SHORE HEALTH IMPROVEMENT COALITION FUNDING.
- 2 **24–2201.**
- FOR FISCAL YEAR 2024, AND FOR EACH FISCAL YEAR THEREAFTER, THE
- 4 GOVERNOR SHALL PROVIDE AN APPROPRIATION IN THE STATE BUDGET TO FUND
- 5 THE OPERATIONS OF THE MID SHORE HEALTH IMPROVEMENT COALITION.
- SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect July  $7 \quad 1,2023.$