

HOUSE BILL 1045

J1, J2

EMERGENCY BILL

6lr1864

By: **Delegate Cullison**

Introduced and read first time: February 9, 2026

Assigned to: Health

A BILL ENTITLED

1 AN ACT concerning

2 **Prescription Drug Monitoring Program – Data Disclosure to Federal Law**
3 **Enforcement – Limitation**

4 FOR the purpose of altering the circumstances under which the Prescription Drug
5 Monitoring Program is required to disclose prescription monitoring data to a federal
6 law enforcement agency; and generally relating to the disclosure of prescription
7 monitoring data by the Prescription Drug Monitoring Program.

8 BY repealing and reenacting, without amendments,
9 Article – Health – General
10 Section 4–310 and 21–2A–06(a)
11 Annotated Code of Maryland
12 (2023 Replacement Volume and 2025 Supplement)

13 BY repealing and reenacting, with amendments,
14 Article – Health – General
15 Section 21–2A–06(b)
16 Annotated Code of Maryland
17 (2023 Replacement Volume and 2025 Supplement)

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

20 **Article – Health – General**

21 4–310.

22 (a) There is a Protected Health Care Commission.

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 (b) The purpose of the Commission is to make recommendations to the Secretary
2 regarding sensitive health services that should be determined by the Secretary to be legally
3 protected health care under this subtitle.

4 (c) The Commission consists of the following members:

5 (1) The Attorney General or the Attorney General's designee;

6 (2) The Executive Director of the Maryland Health Care Commission or the
7 Executive Director's designee; and

8 (3) The following members appointed by the Secretary:

9 (i) A resident of the State who is a licensed physician and nominated
10 by the American College of Obstetricians and Gynecologists;

11 (ii) A resident of the State who is a licensed clinician who provides
12 reproductive health care and nominated by the Reproductive Health Access Project;

13 (iii) A resident of the State who is a certified nurse-midwife
14 nominated by the Maryland affiliate of the American College of Nurse Midwives;

15 (iv) A resident of the State who is a representative of Physicians for
16 Reproductive Health;

17 (vi) Two residents of the State who are consumer representatives
18 with expertise in consumer data privacy; and

19 (vii) A resident of the State with expertise in health information.

20 (d) The Commission shall:

21 (1) Select a chair of the Commission each year; and

22 (2) Meet at least four times a year.

23 (e) The Department shall provide staff for the Commission.

24 (f) (1) The Commission shall identify sensitive health services information by
25 diagnosis, procedural, medication, or related codes for which disclosure by a health
26 information exchange or electronic health network to a treating provider, business entity,
27 another health information exchange, or another electronic health network would create a
28 substantial risk to patients or health care providers.

29 (2) In carrying out its work, the Commission may consult with:

1 (i) Organizations with expertise in legal issues impacting providers
2 of legally protected health care;

3 (ii) Organizations with expertise in consumer health privacy;

4 (iii) Organizations with expertise in health information technology;
5 and

6 (iv) Other organizations with clinical, policy, or legal expertise
7 related to the work of the Commission.

8 (g) (1) The Commission shall issue semiannual reports to the Secretary on
9 recommendations regarding sensitive health services that should be determined by the
10 Secretary to be legally protected health care under this subtitle or for which the Secretary
11 should rescind a previous determination.

12 (2) The reports shall include an assessment of the potential risk to patients
13 and health care providers that would result from the disclosure of the sensitive health
14 services that are addressed in the reports.

15 (3) Within 60 days after receiving a semiannual report under paragraph
16 (1) of this subsection, the Secretary shall submit a written response to the report that
17 includes the findings and determinations of the Secretary to:

18 (i) The Commission; and

19 (ii) In accordance with § 2–1257 of the State Government Article, the
20 Senate Finance Committee and the House Health and Government Operations Committee.
21 21–2A–06.

22 (a) Prescription monitoring data:

23 (1) Are confidential and privileged, and not subject to discovery, subpoena,
24 or other means of legal compulsion in civil litigation;

25 (2) Are not public records; and

26 (3) Except as provided in subsections (b), (c), (d), and (f) of this section or
27 as otherwise provided by law, may not be disclosed to any person.

28 (b) The Program shall disclose prescription monitoring data, in accordance with
29 regulations adopted by the Secretary, to:

30 (1) A prescriber, or a licensed health care practitioner authorized by the
31 prescriber, in connection with the medical care of a patient;

1 (2) A dispenser, or a licensed health care practitioner authorized by the
2 dispenser, in connection with the dispensing of a monitored prescription drug;

3 (3) A [federal law enforcement agency or a] State or local law enforcement
4 agency, on issuance of a subpoena, for the purpose of furthering an existing bona fide
5 individual investigation;

6 (4) **A FEDERAL LAW ENFORCEMENT AGENCY, ON ISSUANCE OF A
7 SUBPOENA, FOR THE PURPOSE OF FURTHERING AN EXISTING BONA FIDE
8 INDIVIDUAL INVESTIGATION UNLESS THE PRESCRIPTION MONITORING DATA HAS
9 BEEN DETERMINED BY THE PROTECTED HEALTH CARE COMMISSION ESTABLISHED
10 UNDER § 4–310 OF THIS ARTICLE TO BE SENSITIVE HEALTH SERVICES INFORMATION
11 THAT HAS BEEN DETERMINED BY THE SECRETARY TO BE LEGALLY PROTECTED
12 HEALTH CARE;**

13 [(4)] (5) A licensing entity, on issuance of an administrative subpoena, for
14 the purposes of furthering an existing bona fide individual investigation;

15 [(5)] (6) A rehabilitation program under a health occupations board, on
16 issuance of an administrative subpoena;

17 [(6)] (7) A patient with respect to prescription monitoring data about the
18 patient;

19 [(7)] (8) The Office of the Attorney General, on issuance of a subpoena for
20 the purpose of furthering a bona fide existing investigation;

21 [(8)] (9) Subject to subsection (i) of this section, authorized users of
22 another state's prescription drug monitoring program or any other authorized local, state,
23 territorial, or federal agency in connection with the provision of medical care;

24 [(9)] (10) The following units of the Department, on approval of the
25 Secretary, for the purpose of furthering an existing bona fide individual investigation:

26 (i) The Maryland Medical Assistance Program;

27 (ii) The Office of the Inspector General;

28 (iii) The Office of Health Care Quality; and

29 (iv) The Office;

30 [(10)] (11) The technical advisory committee established under § 21–2A–07
31 of this subtitle for the purposes set forth in subsections (c), (d), and (e) of this section;

1 ~~[(11)]~~ **(12)** The medical director of a health care facility, as defined in §
2 19–114 of this article, or the medical director’s designee, for the purpose of providing health
3 care practitioners employed or contractually employed at the health care facility access to
4 the prescription monitoring data in connection with the provision of medical care or the
5 dispensing of a monitored prescription drug to a patient of the health care facility;

6 ~~[(12)]~~ **(13)** The Office of the Chief Medical Examiner in accordance with §
7 5–309 of this article; or

8 ~~[(13)]~~ **(14)** The following entities, on approval of the Secretary and for the
9 purpose of furthering an existing bona fide individual case review:

10 (i) The State Child Fatality Review Team or a local child fatality
11 review team established under Title 5, Subtitle 7 of this article, on request from the chair
12 of the State or local team;

13 (ii) A local drug overdose fatality review team established under §
14 5–902 of this article, on request from the chair of the local team;

15 (iii) The Maternal Mortality Review Program established under §
16 13–1203 of this article, on request from the Program; and

17 (iv) A medical review committee described in § 1–401(b)(3) of the
18 Health Occupations Article, on request from the committee.

19 SECTION 2. AND BE IT FURTHER ENACTED, That this Act is an emergency
20 measure, is necessary for the immediate preservation of the public health or safety, has
21 been passed by a ye and nay vote supported by three–fifths of all the members elected to
22 each of the two Houses of the General Assembly, and shall take effect from the date it is
23 enacted.