

Chapter 662

(Senate Bill 406)

AN ACT concerning

~~**Prenatal and Infant Care Coordination – Grant Funding and Task Force on
Maryland Maternal and Child Health**~~
Prenatal and Infant Care Coordination – Grant Funding and Task Force

FOR the purpose of ~~requiring the Governor to include a certain amount of funding for the Maryland Prenatal and Infant Care Coordination Services Grant Program Fund in the annual budget beginning in a certain fiscal year; requiring the Governor to include a certain amount of funding for the Maryland Prenatal and Infant Care Coordination Services Grant Program Fund in the annual budget beginning in a certain fiscal year;~~ establishing the Task Force on Maryland Maternal and Child Health; providing for the composition, chair, and staff for the Task Force; prohibiting a member of the Task Force from receiving certain compensation, but authorizing the reimbursement of certain expenses; requiring the Task Force to study and make recommendations regarding certain matters; requiring the Task Force to report its findings and recommendations to the General Assembly on or before a certain date; ~~providing for the effective dates of this Act; providing for the effective dates of this Act;~~ providing for the termination ~~of certain provisions of certain provisions~~ of this Act; and generally relating to ~~prenatal and infant care coordination services the Task Force on Maryland Maternal and Child Health~~ prenatal and infant care coordination services.

~~BY repealing and reenacting, without amendments,
Article – Health – General
Section 24-1502(a)
Annotated Code of Maryland
(2015 Replacement Volume and 2018 Supplement)~~

~~BY repealing and reenacting, with amendments,
Article – Health – General
Section 24-1502(f)
Annotated Code of Maryland
(2015 Replacement Volume and 2018 Supplement)~~

BY repealing and reenacting, without amendments,
Article – Health – General
Section 24-1502(a)
Annotated Code of Maryland
(2015 Replacement Volume and 2018 Supplement)

BY repealing and reenacting, with amendments,
Article – Health – General

Section 24-1502(f)
Annotated Code of Maryland
(2015 Replacement Volume and 2018 Supplement)

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

Article – Health – General

24-1502.

(a) There is a Maryland Prenatal and Infant Care Coordination Services Grant Program Fund.

(f) (1) [Beginning in] IN fiscal year 2020 [and in each fiscal year thereafter], the Governor shall include in the annual budget \$50,000 for the Fund.

(2) FOR FISCAL YEAR 2021 AND EACH FISCAL YEAR THEREAFTER, THE GOVERNOR SHALL INCLUDE IN THE ANNUAL BUDGET \$100,000 FOR THE FUND.

~~SECTION 2. AND BE IT FURTHER ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:~~

~~Article – Health – General~~

~~24-1502.~~

~~(a) There is a Maryland Prenatal and Infant Care Coordination Services Grant Program Fund.~~

~~(f) (1) [Beginning in] IN fiscal year 2020 [and in each fiscal year thereafter], the Governor shall include in the annual budget \$50,000 for the Fund.~~

~~(2) FOR FISCAL YEAR 2021 AND EACH FISCAL YEAR THEREAFTER, THE GOVERNOR SHALL INCLUDE IN THE ANNUAL BUDGET \$5,000,000 FOR THE FUND.~~

~~SECTION 2. AND BE IT FURTHER ENACTED, That:~~

~~(a) There is a Task Force on Maryland Maternal and Child Health.~~

~~(b) The Task Force consists of the following members:~~

~~(1) one representative of the Maryland Department of Health, designated by the Secretary of Health;~~

(2) one representative of the Maryland Department of Human Services, designated by the Secretary of Human Services;

(3) one representative of the Maryland Medical Assistance Program, designated by the Secretary of Health;

(4) one representative of the Health Services Cost Review Commission, designated by the Executive Director of the Commission; and

(5) the following members, appointed by the Secretary of Health:

(i) one representative of Johns Hopkins Children's Center;

(ii) one representative from a community-based organization focused on maternal and infant care support and currently partnered with Johns Hopkins Children's Center;

(iii) one representative of University of Maryland Children's Hospital;

(iv) one representative from a community-based organization focused on maternal and infant care support and currently partnered with University of Maryland Children's Hospital; ~~and~~

(v) three representatives of participants who qualify for, are receiving or have received care coordination from targeted programs within the current care coordination system;

(vi) one representative of the Maryland Affiliate of the American College of Nurse Midwives; ~~and~~

(vii) one representative of the Maryland Chapter of the American Academy of Pediatrics;

(viii) one representative of the Maryland Association for the Treatment of Opioid Dependence;

(ix) one physician specializing in neonatology, maternal fetal medicine, or pediatric cardiology from a hospital other than the Johns Hopkins Children's Center or the University of Maryland Children's Hospital;

(x) one representative of the Maryland Patient Safety Center; and

(xi) one representative of the Maryland Section of the American College of Obstetricians and Gynecologists.

(c) The Secretary of Health shall designate the chair of the Task Force.

(d) The Maryland Department of Health, Maryland Department of Human Services, and the Health Services Cost Review Commission jointly shall provide staff for the Task Force.

(e) A member of the Task Force:

(1) may not receive compensation as a member of the Task Force; but

(2) is entitled to reimbursement for expenses under the Standard State Travel Regulations, as provided in the State budget.

(f) The Task Force shall study and make recommendations on:

(1) how the policies of the ~~Health Services Cost Review Commission~~ *Maryland Department of Health* can be used to incentivize early intervention and prevention of key adverse health outcomes, such as asthma, adverse birth outcomes, sickle cell crisis, and mental health crises; ~~and~~

(2) how *State policies and* payment mechanisms can:

(i) support community-based and school-based models of care;

(ii) ~~use the global budgets revenue system~~ *encourage partnerships under the all-payer model* to improve child care;

(iii) assist in collaborations with public health care; and

(iv) use the Core Set of Children's Health Care Quality Measures for Medicaid to monitor improvements; *and*

(3) *programs that the Maryland Medical Assistance Program should implement.*

(g) On or before November 1, 2019, the Task Force shall report its findings and recommendations to the General Assembly in accordance with § 2-1246 of the State Government Article.

SECTION 3. AND BE IT FURTHER ENACTED, That Section 1 of this Act shall take effect October 1, 2019.

~~SECTION 3. AND BE IT FURTHER ENACTED, That Section 1 of this Act shall take effect October 1, 2019.~~

SECTION ~~4.~~ 2. 4. AND BE IT FURTHER ENACTED, That, ~~except as provided in Section 3 of this Act,~~ *except as provided in Section 3 of this Act*, this Act shall take effect July 1, 2019. ~~Section 2 of this Act.~~ It *Section 2 of this Act* shall remain effective for a period of 1 year and, at the end of June 30, 2020, ~~Section 2 of~~ *Section 2 of* this Act, with no further action required by the General Assembly, shall be abrogated and of no further force and effect.

Enacted under Article II, § 17(c) of the Maryland Constitution, May 25, 2019.