

SB0156/403528/1

BY: Health and Government Operations Committee

AMENDMENTS TO SENATE BILL 156
(Third Reading File Bill)

AMENDMENT NO. 1

On page 1, in line 2, strike “**Universal**”; in the same line, strike “**Nurse**”; in lines 12 and 13, in each instance, strike “Universal”; and in the same lines, strike “Nurse”.

AMENDMENT NO. 2

On page 2, in line 6, strike “Universal”; in the same line, strike “Nurse”; in the same line, after “Services” insert “in the State”; strike in their entirety lines 15 through 19, inclusive, and substitute:

“(ii) one representative from each certified site in the State implementing an evidence-based universal nurse home visiting model for families with newborns;

“(iii) one representative from an organization in the State implementing at least two approved Maternal, Infant, and Early Childhood Home Visiting models;

“(iv) one representative of a private insurance carrier;

“(v) one representative of the Maryland Nurses Association;

“(vi) one representative of B’More for Health Babies Initiative;

“(vii) one representative from a local health department;

“(viii) one pediatrician licensed in the State;

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- (ix) one nurse midwife licensed in the State;
- (x) one obstetrician licensed in the State; and
- (xi) one representative of a federally qualified health center.”;

in line 22, after “Maryland” insert “Family Network, in collaboration with the Maryland”; and in the same line, strike “shall” and substitute “, may”.

On page 3, strike in their entirety lines 1 through 6, inclusive, and substitute:

“(1) compile updated participant data and expenditures per participant from the home visiting for families with newborns programs currently operating in the State;

(2) compare the data for home visiting for families with newborns programs in the State to the data for evidence–based models for universal nurse home visiting for families with newborns;

(3) (i) identify service gaps between the evidence–based models for universal nurse home visiting for families with newborns and operational home visiting for families with newborns programs;

(ii) identify opportunities to align the evidence–based models for universal nurse home visiting for families with newborns with operational home visiting for families with newborns programs operating in the State; and

(iii) identify potential funding sources to close the identified service gaps; and

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(4) identify workforce needs, including issues related to cultural competency, for the evidence-based models for universal newborn nurse home visiting for families with newborns and recommendations to address the workforce needs.”.