SENATE BILL 584

J1 (3lr2191)

ENROLLED BILL

— Finance/Health and Government Operations —

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EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

<u>Underlining</u> indicates amendments to bill.

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Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.

Italics indicate opposite chamber/conference committee amendments.



1 2	<u>information related to Parkinson's Disease;</u> and generally relating to the establishment of a Parkinson's Disease Registry Parkinson's Disease.
3 4 5 6 7	BY repealing and reenacting, without amendments, Article – Health – General Section 18–1202 Annotated Code of Maryland (2019 Replacement Volume and 2022 Supplement)
8 9 10 11 12	BY repealing and reenacting, with amendments, Article – Health – General Section 18–1201 and 18–1203 Annotated Code of Maryland (2019 Replacement Volume and 2022 Supplement)
13 14 15 16 17	BY repealing Article - Health - General Section 18-1202 Annotated Code of Maryland (2019 Replacement Volume and 2022 Supplement)
18 19 20 21 22	BY adding to Article – Health – General Section 18-1202 and 18-1204 through 18-1210 Annotated Code of Maryland (2019 Replacement Volume and 2022 Supplement) SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
2425	That the Laws of Maryland read as follows: Article – Health – General
26	18-1201.
27	(a) In this subtitle the following words have the meanings indicated.
28 29	(b) "Advisory Committee" means the Parkinson's Disease Registry Advisory Committee.
30 31 32	(c) (1) "PARKINSONISMS" MEANS CONDITIONS RELATED TO PARKINSON'S DISEASE THAT CAUSE A COMBINATION OF THE MOVEMENT ABNORMALITIES SEEN IN PARKINSON'S DISEASE.
33 34 35	(2) "PARKINSONISMS" INCLUDES MULTIPLE SYSTEM ATROPHY, DEMENTIA WITH LEWY BODIES, CORTICOBASAL DEGENERATION, AND PROGRESSIVE

1 2 3 4	(D) "Parkinson's disease" means a chronic and progressive disorder resulting from deficiency of the neurotransmitter dopamine as the consequence of specific degenerative changes in the area of the brain called the basal ganglia, characterized by tremors at rest, slow movements, muscle rigidity, stooped posture, and unsteady or shuffling gait.
5	(E) "REGISTRY" MEANS THE PARKINSON'S DISEASE REGISTRY.
6	₹ 18−1202.
7	There is a Parkinson's Disease Registry Advisory Committee in the Department.
8	18-1202.
9	THERE IS A PARKINSON'S DISEASE REGISTRY IN THE DEPARTMENT.
10	18–1203.
11 12	(A) THERE IS A PARKINSON'S DISEASE REGISTRY ADVISORY COMMITTEE IN THE DEPARTMENT.
13	{ (a) } (B) The Advisory Committee shall:
14 15	(1) Assist in the development and implementation of a STATE Parkinson's Disease Registry;
16 17 18	(2) Determine what data shall be collected and be stored in a <u>STATE</u> Parkinson's Disease Registry and the methods to ensure the privacy and confidentiality of data collected and stored in the registry; and
19 20	(3) Advise the Department on Parkinson's disease and maintaining a <u>STATE</u> Parkinson's Disease Registry; <u>AND</u>
21 22 23 24	(4) CONSULT WITH ENTITIES THAT MAY BE ABLE TO COLLECT DATA AND WORK IN PARTNERSHIP WITH THE FEDERAL CENTERS FOR DISEASE CONTROL AND PREVENTION TO AID THE FEDERAL CENTERS FOR DISEASE CONTROL AND PREVENTION IN CREATING A NATIONAL PARKINSON'S DISEASE REGISTRY.
25 26	(B) ENTITIES THAT MAY BE CONSULTED UNDER SUBSECTION (A)(4) OF THIS SECTION INCLUDE:
27	(1) THE STATE-DESIGNATED HEALTH INFORMATION EXCHANGE;
28	(2) Nonprofit organizations; and

1	<u>(3)</u>	COLI	LEGES OR UNIVERSITIES.
2 3	[(b)] (C) Committee, includ	(1) ing:	The Secretary shall appoint individuals to serve on the Advisory
4		(i)	A neurologist;
5		(ii)	A movement disorder specialist;
6		(iii)	A primary care provider;
7		(iv)	A physician informaticist;
8		(v)	A patient with Parkinson's disease;
9		(vi)	A public health professional;
0		(vii)	A population health researcher familiar with disease registries;
1		(viii)	A Parkinson's disease researcher; and
12		(ix)	Any other individuals the Secretary determines are necessary.
13	(2)	The S	Secretary shall establish:
14 15	Committee;	(i)	The duration of term limits for members of the Advisory
16		(ii)	The frequency of meetings of the Advisory Committee;
17 18	Committee; and	(iii)	Rules and procedures for conducting business of the Advisory
9	function effectively		(III) Any other rules necessary for the Advisory Committee to
$\frac{21}{22}$	(D) BEGI		G JULY 1, 2023, THE ADVISORY COMMITTEE SHALL MEET VARTERLY.
23	18-1204.		
24 25	` '	ON T	ARTMENT SHALL COLLECT DATA FOR THE REGISTRY, HE INCIDENCE OF PARKINSON'S DISEASE IN THE STATE AND

1	(B) THE ADVISORY COMMITTEE, IN CONSULTATION WITH THE
2	DEPARTMENT, SHALL:
3 4	(1) IDENTIFY CATEGORIES OF DATA TO BE COLLECTED FOR THE REGISTRY RELATED TO:
5	(I) PATIENT DEMOGRAPHICS, INCLUDING GEOGRAPHY; AND
6	(II) DIAGNOSES; AND
7	(2) PERIODICALLY REVIEW THE DATA COLLECTED FOR THE
8	REGISTRY TO ASSESS WHETHER THE:
9	(I) DATA INCLUDES SUFFICIENT INFORMATION TO ENSURE
10	THERE ARE NO DUPLICATED PATIENT RECORDS IN THE REGISTRY; AND
11	(II) CATEGORIES OF DATA COLLECTED SHOULD BE ALTERED.
12	18-1205.
10	(1) III FOR OWNERWARD PROVIDED IN WHICH CHERENE ALL
13 14	(A) (1) UNLESS OTHERWISE PROVIDED IN THIS SUBTITLE, ALL INFORMATION COLLECTED FOR THE REGISTRY UNDER THIS SUBTITLE SHALL BE
1 4 15	CONFIDENTIAL.
10	CONTIDENTIAL.
16	(2) THE DEPARTMENT SHALL IMPLEMENT A CODING SYSTEM THAT
17	REMOVES ANY PERSONALLY IDENTIFIABLE INFORMATION OF AN INDIVIDUAL FROM
18	COLLECTED DATA.
10	(D) THE DEDARGNE IN CONCUMENTATION WHEN THE ADVICEDY
19 20	(B) THE DEPARTMENT, IN CONSULTATION WITH THE ADVISORY COMMITTEE, SHALL ESTABLISH A SYSTEM FOR THE COLLECTION OF DATA FOR THE
21	REGISTRY AND DISSEMINATION OF INFORMATION DETERMINING THE INCIDENCE
22	AND PREVALENCE OF PARKINSON'S DISEASE AND RELATED PARKINSONISMS.
23	(C) (1) THE DEPARTMENT, IN CONSULTATION WITH THE ADVISORY
24	COMMITTEE, SHALL:
25	(I) NOTIFY, IN WRITING AND ORALLY, ALL INDIVIDUALS IN THE
26	STATE DIAGNOSED WITH PARKINSON'S DISEASE OR RELATED PARKINSONISMS
27	ABOUT THE CREATION OF THE REGISTRY, DATA COLLECTION ASSOCIATED WITH
28 29	THE REGISTRY, AND THE RIGHT TO OPT OUT OF PARTICIPATION IN THE REGISTRY;
49	
30	(II) PROVIDE AN OPPORTUNITY TO OPT OUT OF PARTICIPATION
31	IN THE REGISTRY.

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1	(2) (1) An individual with Parkinson's disease or related
2	PARKINSONISMS MAY OPT OUT OF PARTICIPATING IN THE REGISTRY BY
3	SUBMITTING WRITTEN NOTICE TO THE DEPARTMENT.
4	(II) IF AN INDIVIDUAL OPTS OUT OF PARTICIPATION IN THE
5	REGISTRY, THE DEPARTMENT:
6	1. Shall record an incidence of a patient with
7	PARKINSON'S DISEASE; AND
8	2. MAY NOT RECORD ANY ADDITIONAL INFORMATION
9	ABOUT THE INDIVIDUAL.
10	(D) THE DEPARTMENT MAY:
11	(1) CREATE, REVIEW, AND REVISE A LIST OF DATA POINTS REQUIRED
12	AS PART OF MANDATED PARKINSON'S DISEASE REPORTING UNDER THIS SECTION,
13	INCLUDING NECESSARY TRIGGERING DIAGNOSTIC CONDITIONS THAT ARE
14	CONSISTENT WITH THE LATEST INTERNATIONAL STATISTICAL CLASSIFICATION OF
15	DISEASES AND RELATED HEALTH PROBLEMS; AND
16	(2) IMPLEMENT THE COLLECTION OF DATA POINTS ON THE LIST
17	CREATED UNDER ITEM (1) OF THIS SUBSECTION THROUGH A BULLETIN, OR SIMILAR
18	INSTRUCTION, TO NURSE PRACTITIONERS, PHYSICIANS, AND PHYSICIAN
19	ASSISTANTS.
20	(E) AT LEAST 180 DAYS BEFORE THE DEPARTMENT ADOPTS MANDATORY
21	REPORTING OF PARKINSON'S DISEASE AND RELATED PARKINSONISMS, THE
22	DEPARTMENT SHALL PROVIDE NOTIFICATION OF THE MANDATORY REPORTING OF
23	PARKINSON'S DISEASE AND RELATED PARKINSONISMS:
24	(1) ON THE DEPARTMENT'S WEBSITE;
25	(2) DIRECTLY TO ASSOCIATIONS REPRESENTING HOSPITALS,
26	HEALTH CARE PROFESSIONALS, AND OTHER HEALTH CARE PROVIDERS IN THE
27	STATE; AND
28	(3) DIRECTLY TO THE STATE BOARD OF NURSING AND THE STATE
29	BOARD OF PHYSICIANS.
30	(f) (1) A nurse practitioner, physician, or physician assistant
31	WHO DIAGNOSES PATIENTS WITH PARKINSON'S DISEASE AND RELATED

PARKINSONISMS SHALL REPORT EACH CASE OF PARKINSON'S DISEASE AND

- 1 RELATED PARKINSONISMS TO THE REGISTRY IN A FORMAT DETERMINED BY THE
 2 DEPARTMENT.
- 3 (2) THE DEPARTMENT MAY USE EXISTING REPORTING PROCEDURES
 4 TO IMPLEMENT THE REQUIREMENT UNDER PARAGRAPH (1) OF THIS SUBSECTION
 5 FOR DIAGNOSIS REPORTING AND DATA SUBMISSION BY A NURSE PRACTITIONER,
- 6 PHYSICIAN OR PHYSICIAN ASSISTANT.
- 7 18 1206
- 8 (A) THE DEPARTMENT MAY ENTER INTO AGREEMENTS TO PROVIDE DATA
 9 COLLECTED IN THE REGISTRY WITH PARKINSON'S DISEASE REGISTRIES IN OTHER
 10 STATES, FEDERAL PARKINSON'S DISEASE CONTROL AGENCIES, LOCAL HEALTH
 11 DEPARTMENTS, OR HEALTH RESEARCHERS FOR THE STUDY OF PARKINSON'S
 12 DISEASE AND RELATED PARKINSONISMS.
- 13 (B) (1) BEFORE CONFIDENTIAL INFORMATION IS DISCLOSED UNDER
 14 SUBSECTION (A) OF THIS SECTION, THE DEPARTMENT SHALL RECEIVE A WRITTEN
 15 AGREEMENT FROM THE PARTNERING ENTITY TO MAINTAIN THE CONFIDENTIALITY
 16 OF THE INFORMATION.
- 17 (2) IF THE ENTITY RECEIVING CONFIDENTIAL DATA FROM THE 18 REGISTRY IS A RESEARCH ENTITY. THE RESEARCH ENTITY SHALL:
- 19 (I) OBTAIN APPROVAL FROM THE COMMITTEE AT THE
 20 RESEARCH ENTITY THAT NORMALLY REVIEWS RESEARCH PROJECTS FOR THE
 21 PROTECTION OF HUMAN SUBJECTS ESTABLISHED IN ACCORDANCE WITH TITLE 45
 22 OF THE CODE OF FEDERAL REGULATIONS: AND
- 23 (II) PROVIDE DOCUMENTATION TO THE DEPARTMENT THAT
 24 DEMONSTRATES, TO THE DEPARTMENT'S SATISFACTION, THAT THE RESEARCH
 25 ENTITY HAS ESTABLISHED PROCEDURES AND THE ABILITY TO MAINTAIN THE
 26 CONFIDENTIALITY OF THE DISCLOSED INFORMATION.
- 27 (C) THE DEPARTMENT SHALL ESTABLISH PROCEDURES TO REVIEW AND 28 APPROVE REQUESTS TO USE REGISTRY DATA FOR SCIENTIFIC RESEARCH.
- 29 **18-1207**
- 30 (A) NOTWITHSTANDING ANY OTHER PROVISION OF LAW OR RULE OF 31 PROCEDURE OR EVIDENCE IN THE MARYLAND RULES:
- 32 (1) A DATA DISCLOSURE AUTHORIZED BY THIS SUBTITLE MAY NOT:

1	(I) INCLUDE INFORMATION OTHER THAN THE INFORMATION
$\overline{2}$	NECESSARY FOR THE PURPOSE OF THE DISCLOSURE;
_	THE DESCRIPTION THE POWER OF THE DESCRIPTION.
3	(II) BE USED FOR A PURPOSE OTHER THAN THE PURPOSE FOR
4	THE DISCLOSURE; OR
-	
5	(III) BE FURTHER DISCLOSED;
J	
6	(2) THE CONFIDENTIAL INFORMATION COLLECTED FOR THE
7	REGISTRY MAY NOT BE MADE AVAILABLE FOR SUBPOENA, DISCLOSED,
8	DISCOVERABLE, OR COMPELLED TO BE PRODUCED IN ANY CIVIL, CRIMINAL,
9	ADMINISTRATIVE, OR OTHER PROCEEDING; AND
J	The minimum of the first incommentation of the first incom
10	(3) THE CONFIDENTIAL INFORMATION COLLECTED FOR THE
11	REGISTRY MAY NOT BE DEEMED ADMISSIBLE AS EVIDENCE IN ANY CIVIL, CRIMINAL,
12	ADMINISTRATIVE, TRIBUNAL, OR OTHER PROCEEDING.
14	ADMINISTRATIVE, TRIBUNAL, OR OTHER PROCEEDING.
13	(B) (1) This section does not preempt the authority of a health
14	CARE PROVIDER, AS DEFINED IN § 19-132 OF THIS ARTICLE, PROVIDING
15	DIAGNOSTIC SERVICES OR TREATMENT TO PATIENTS WITH PARKINSON'S DISEASE
_	OR RELATED PARKINSONISMS TO MAINTAIN A PARKINSON'S DISEASE REGISTRY.
16	OK KELATED PAKKINSONISMS TO MAINTAIN A PAKKINSON S DISEASE KEGISTKY.
17	(2) This section does not prohibit the publication of
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	REPORTS AND STATISTICAL COMPILATIONS THAT DO NOT IDENTIFY INDIVIDUALS
19	WITH PARKINSON'S DISEASE OR RELATED PARKINSONISMS OR INDIVIDUAL
20	SOURCES OF INFORMATION.
21	18-1208.
4 1	10-14V0,
22	(A) THE DEPARTMENT SHALL MAINTAIN A RECORD OF INDIVIDUALS
23	GRANTED ACCESS TO CONFIDENTIAL INFORMATION FROM THE REGISTRY.
۷٥	WWWIED ACCESS TO CONFIDENTIAL INFORMATION FROM THE REGISTRIF
24	(B) THE DEPARTMENT MAY NOT DENY A REQUEST FOR INSPECTION OF THE
	· ·
25	RECORD MAINTAINED UNDER SUBSECTION (A) OF THIS SECTION UNDER TITLE 4 OF
26	THE GENERAL PROVISIONS ARTICLE.
27	(C) THE RECORD MAINTAINED UNDER SUBSECTION (A) OF THIS SECTION
28	SHALL INCLUDE THE ACCESSING INDIVIDUAL'S:
29	(1) NAME:
⊿ 9	(1) NAME;
20	(9) Timi E.
30	(2) TITLE;
31	(3) Address:
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1	(4) Organizational affiliation;
2	(5) DATES OF ACCESS; AND
3	(6) PURPOSE FOR ACCESSING THE INFORMATION.
4	18 1209.
5	THE DEPARTMENT SHALL ADOPT REGULATIONS NECESSARY TO CARRY OUT
6	THIS SUBTITLE.
7	18–1210.
8	(A) ON OR BEFORE DECEMBER 1 EACH YEAR, BEGINNING IN 2023, THE
9	Advisory Committee shall report to the Secretary of Health and, in
10	ACCORDANCE WITH § 2–1257 OF THE STATE GOVERNMENT ARTICLE, THE SENATE
11	FINANCE COMMITTEE AND THE HOUSE HEALTH AND GOVERNMENT OPERATIONS
12	COMMITTEE ON THE REGISTRY AND THE PREVALENCE OF PARKINSON'S DISEASE IN THE STATE.
13	THE STATE.
14	(B) THE DEPARTMENT SHALL POST THE REPORT REQUIRED UNDER
15	SUBSECTION (A) OF THIS SECTION ON A DEDICATED WEBSITE ACCESSIBLE TO THE
16	PUBLIC.
17	<u>18–1204.</u>
18	(A) THE DEPARTMENT, IN COLLABORATION WITH THE STATE-DESIGNATED
19	HEALTH INFORMATION EXCHANGE, SHALL ESTABLISH AND MAINTAIN A PUBLICLY
20	ACCESSIBLE WEBSITE THAT HAS THE FOLLOWING INFORMATION IN A
21	DOWNLOADABLE FORMAT:
22	(1) THE INCIDENCE OF PARKINSON'S DISEASE IN THE STATE; AND
23	(2) TO THE EXTENT POSSIBLE, THE INCIDENCE OF PARKINSON'S
$\frac{25}{24}$	DISEASE DISAGGREGATED BASED ON:
4 4	DISEASE DISAGGREGATED BASED ON.
25	(I) AGE, INCLUDING AGE OF DIAGNOSIS;
26	(II) GENDER;
27	(III) SEX;
28	(IV) RACE;

1	(V) ETHNICITY; AND
2	(VI) CASES BY COUNTY.
3 4	(B) THE WEBSITE REQUIRED UNDER SUBSECTION (A) OF THIS SECTION SHALL:
5 6	(1) INCLUDE THE DATA AVAILABLE FOR THE 5-YEAR PERIOD ENDING ON SEPTEMBER 30, 2023; AND
7 8	(2) BE UPDATED ON OR BEFORE JANUARY 1 EACH YEAR, TO INCLUDE ANY NEWLY AVAILABLE DATA.
9 10 11 12 13 14	SECTION 2. AND BE IT FURTHER ENACTED, That on or before December July 1, 2023 2024, the Parkinson's Disease Registry Advisory Committee shall report to the Senate Finance Committee and the House Health and Government Operations Committee, in accordance with § 2–1257 of the State Government Article, on recommendations for a path forward toward the establishment of a fully functional State Parkinson's Disease Registry.
15 16 17	SECTION 3. AND BE IT FURTHER ENACTED, That the Maryland Department of Health shall establish the website required under § 18–1204 of the Health – General Article, as enacted by Section 1 of this Act, on or before October 1, 2023.
18 19	SECTION $\underline{\textbf{2}}$. AND BE IT FURTHER ENACTED, That this Act shall take effect October June 1, 2023.
	Approved:
	Governor.
	President of the Senate.
	Speaker of the House of Delegates.