

Chapter 761

(House Bill 309)

AN ACT concerning

Public Health – Data – Race and Ethnicity Information

FOR the purpose of altering a certain provision of law requiring the Maryland Office of Minority Health and Health Disparities to collaborate with the Maryland Health Care Commission to publish and provide a certain report card to require the Office to also collaborate with certain health occupations boards; requiring the report card to include the racial and ethnic composition of all individuals who hold a certain license or certificate, rather than only physicians; requiring the Office to respond to certain requests within a certain period of time to the extent authorized under certain laws; requiring the Director of the Office to meet with certain representatives at least annually to examine the collection of certain data and identify certain changes; requiring certain health occupations boards to include a certain option on a certain form and to encourage an applicant to provide certain information; requiring the Office, in coordination with the Maryland Health Care Commission and the Maryland Department of Health, to establish, submit to the General Assembly, and implement a certain plan on or before a certain date; and generally relating to public health data and race and ethnicity information.

BY repealing and reenacting, with amendments,
Article – Health – General
Section 20–1004 and 20–1005
Annotated Code of Maryland
(2019 Replacement Volume and 2020 Supplement)

BY adding to
Article – Health Occupations
Section 1–225
Annotated Code of Maryland
(2014 Replacement Volume and 2020 Supplement)

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

Article – Health – General

20–1004.

The Office shall:

(1) Be an advocate for the improvement of minority health care by working with the Department on its own, or in partnership with other public and private entities to

establish appropriate forums, programs, or initiatives designed to educate the public regarding minority health and health disparities issues, with an emphasis on preventive health and healthy lifestyles;

(2) Assist the Secretary in identifying, coordinating, and establishing priorities for programs, services, and resources that the State should provide for minority health and health disparities issues;

(3) Collect, classify, and analyze relevant research information and data collected or compiled by:

(i) The Department;

(ii) The Department in collaboration with others; and

(iii) Other public and private entities;

(4) Research innovative methods and obtain resources to improve existing data systems to ensure that the health information that is collected includes specific race and ethnicity identifiers;

(5) Serve as a clearinghouse and resource library for information about minority health and health disparities data, strategies, services, and programs that address minority health and health disparities issues;

(6) Develop a strategic plan to improve public services and programs targeting minorities;

(7) Obtain funding and, contingent upon funding, provide grants to community-based organizations and historically black colleges and universities to conduct special research, demonstration, and evaluation projects for targeted at-risk racial and ethnic minority populations and to support ongoing community-based programs that are designed to reduce or eliminate racial and ethnic health disparities in the State;

(8) Develop criteria for the awarding of grants for programs that are designed to improve minority health care;

(9) Review existing laws and regulations to ensure that they facilitate the provision of adequate health care to the minorities of this State;

(10) Recommend to the Secretary any additions or changes to existing laws and regulations designed to facilitate the adequate provision of health care to minorities in this State;

(11) Identify and review health promotion and disease prevention strategies relating to the leading health causes of death and disability among minority populations;

(12) Develop and implement model public and private partnerships in racial and ethnic minority communities for health awareness campaigns and to improve the access, acceptability, and use of public health services;

(13) Develop recommendations for the most effective means of providing outreach to racial and ethnic minority communities throughout the State to ensure their maximum participation in publicly funded health benefits programs;

(14) Develop a statewide plan for increasing the number of racial and ethnic minority health care professionals which includes recommendations for the financing mechanisms and recruitment strategies necessary to carry out the plan;

(15) Work collaboratively with universities and colleges of medicine, nursing, pharmacy, dentistry, social work, public health, and allied health in this State and other health care professional training programs to develop courses with cultural competency, sensitivity, and health literacy, that are designed to address the problem of racial and ethnic disparities in health care access, utilization, treatment decisions, quality, and outcomes;

(16) Work collaboratively with the Maryland Health Care Disparities Initiative, the Morgan–Hopkins Center for Health Disparities Solutions, the University of Maryland Disparity Project, the Monumental City Medical Society, faculty and researchers at historically black colleges and universities, and other existing alliances or plans, to reduce or eliminate racial and ethnic disparities in the State;

(17) Seek to establish a statewide alliance with community–based agencies and organizations, historically black colleges and universities, health care facilities, health care provider organizations, managed care organizations, and pharmaceutical manufacturers to promote the objectives of the Office;

(18) Evaluate multicultural or racial and ethnic minority health programs in other states to assess their efficacy and potential for replication in this State and make recommendations regarding the adoption of such programs, as appropriate;

(19) Apply for and accept any grant of money from the federal government, private foundations, or other sources which may be available for programs related to minority health and health disparities;

(20) Serve as the designated State agency for receipt of federal funds specifically designated for minority health and health disparities programs;

(21) Work collaboratively with the Governor’s Office of Small, Minority, and Women Business Affairs as the Office determines necessary; [and]

(22) In collaboration with the Maryland Health Care Commission **AND THE HEALTH OCCUPATIONS BOARDS ESTABLISHED UNDER THE HEALTH OCCUPATIONS ARTICLE**, publish annually on the Department’s website and provide in writing on request a “Health Care Disparities Policy Report Card” that includes:

(i) An analysis of racial and ethnic variations in insurance coverage for low-income, nonelderly individuals;

(ii) The racial and ethnic composition of the [physician population] **INDIVIDUALS WHO HOLD A LICENSE OR CERTIFICATE ISSUED BY A HEALTH OCCUPATIONS BOARD ESTABLISHED UNDER THE HEALTH OCCUPATIONS ARTICLE** compared to the racial and ethnic composition of the State’s population; and

(iii) The racial and ethnic disparities in morbidity and mortality rates for cardiovascular disease, cancer, diabetes, HIV/AIDS, infant mortality, asthma, and other diseases identified by the Maryland Health Care Commission; **AND**

(23) TO THE EXTENT AUTHORIZED UNDER FEDERAL AND STATE PRIVACY LAWS, RESPOND TO REQUESTS FOR HEALTH DATA THAT INCLUDES RACE AND ETHNICITY INFORMATION WITHIN 30 DAYS AFTER RECEIPT OF THE REQUEST.

20–1005.

Subject to the limitations of any law that governs the activities of other units of the Executive Branch of State government, the Director shall:

(1) Promote health and the prevention of disease among members of minority groups;

(2) Distribute grants from available federal and special funds to community-based health groups to be used to promote health and the prevention of disease among members of minority groups; [and]

(3) Fund projects which are innovative, culturally sensitive, and specific in their approach toward reduction of the incidence and severity of those diseases or conditions which are responsible for excess morbidity and mortality in minority populations; **AND**

(4) MEET WITH REPRESENTATIVES FROM THE MARYLAND HEALTH CARE COMMISSION AND THE DEPARTMENT AT LEAST ANNUALLY TO:

(i) EXAMINE THE COLLECTION OF HEALTH DATA THAT INCLUDES RACE AND ETHNICITY INFORMATION IN THE STATE; AND

(II) IDENTIFY ANY CHANGES FOR IMPROVING THE HEALTH DATA THAT INCLUDES RACE AND ETHNICITY INFORMATION THAT IS ACCESSIBLE BY THE OFFICE.

Article – Health Occupations

1–225.

EACH HEALTH OCCUPATIONS BOARD AUTHORIZED TO ISSUE A LICENSE OR CERTIFICATE UNDER THIS ARTICLE SHALL:

(1) INCLUDE ON THE FORM FOR AN APPLICATION FOR THE LICENSE OR CERTIFICATE OR A LICENSE OR CERTIFICATE RENEWAL AN OPTION FOR THE APPLICANT TO PROVIDE THE APPLICANT’S RACE AND ETHNICITY INFORMATION; AND

(2) ENCOURAGE AN APPLICANT TO PROVIDE RACE AND ETHNICITY INFORMATION ON THE APPLICATION.

SECTION 2. AND BE IT FURTHER ENACTED, That, on or before January 1, 2022, the Maryland Office of Minority Health and Health Disparities shall, in coordination with the Maryland Health Care Commission and the Maryland Department of Health, establish, submit to the General Assembly, in accordance with § 2–1257 of the State Government Article, and implement a plan for:

(1) improving the collection of health data that includes race and ethnicity information in the State;

(2) ensuring that the Office has access to up-to-date health data that includes race and ethnicity information;

(3) to the extent authorized under federal and State privacy laws, posting health data that includes race and ethnicity information on the Office’s website; and

(4) updating the data on the Office’s website at least once every 6 months.

SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2021.

Enacted under Article II, § 17(c) of the Maryland Constitution, May 30, 2021.