

BY: Health and Government Operations Committee

AMENDMENTS TO HOUSE BILL 815  
(First Reading File Bill)

AMENDMENT NO. 1

On page 1, in the sponsor line, strike “~~and Sample-Hughes~~” and substitute “Sample-Hughes, Alston, Bagnall, Bhandari, Chisholm, Cullison, Guzzone, Hill, Hutchinson, S. Johnson, Kaiser, Kerr, Kipke, R. Lewis, Lopez, Martinez, M. Morgan, Pena-Melnyk, Reilly, Rosenberg, Szeliga, Taveras, White, and Woods”; strike in their entirety lines 2 and 3 and substitute “Cancer Screening – Health Insurance and Assessment of Outreach, Education, and Health Disparities”; strike beginning with “establishing” in line 4 down through “Health;” in line 5; in line 7, strike “breast cancer diagnosis, including diagnostic imaging, and”; in lines 9 and 10, strike “the diagnostic imaging for breast cancer and”; in line 10, after “diagnosis;” insert “requiring the Maryland Department of Health to conduct an assessment on certain outreach, education, and health disparities in cancer screening;”; in the same line, strike “breast and lung”; in line 11, after “cancer” insert “screenings”; and strike in their entirety lines 12 through 22, inclusive.

AMENDMENT NO. 2

On page 2, strike in their entirety lines 3 through 23, inclusive.

On pages 2 through 4, strike in their entirety the lines beginning with line 25 on page 2 through line 17 on page 4, inclusive.

On page 5, in line 1, strike “**SUBJECT TO**” and substitute “**EXCEPT AS PROVIDED IN**”; and strike beginning with “**IF**” in line 6 down through “**CODE**” in line 12 and substitute “**IF AN INSURED OR ENROLLEE IS COVERED UNDER A HIGH-DEDUCTIBLE HEALTH PLAN, AS DEFINED IN 26 U.S.C. § 223, AN ENTITY SUBJECT TO THIS SECTION MAY SUBJECT FOLLOW-UP DIAGNOSTIC LUNG IMAGING TO THE DEDUCTIBLE REQUIREMENT OF THE HIGH-DEDUCTIBLE HEALTH PLAN**”.

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AMENDMENT NO. 3

On page 5, after line 12, insert:

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

(a) The Maryland Department of Health shall conduct an assessment on current outreach, education, and health disparities in cancer screening, including the availability of biomarker testing, in the State.

(b) The assessment required under subsection (a) of this section shall include an examination of current programs overseen by the Department and local health departments.

(c) (1) In conducting the assessment required under subsection (a) of this section, the Department shall establish a stakeholder workgroup to advise on the current state of cancer screening in the State and make recommendations on the development of an outreach plan to educate communities negatively impacted by health disparities in cancer screening and cancer care.

(2) The stakeholder workgroup established under paragraph (1) of this subsection shall include:

(i) representatives of communities traditionally underserved by the health care system;

(ii) representatives of organizations, networks, or associations of health care professionals that are composed of a majority of Black and Indigenous people of color; and

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(iii) representatives of religious organizations, health educators, community health workers, and peer outreach workers with experience in engaging communities of color in health care.

(d) On or before January 1, 2024, the Department shall report to the General Assembly, in accordance with § 2-1257 of the State Government Article, on the assessment required under subsection (a) of this section.”;

in lines 13 and 16, in each instance, strike “2” and substitute “1”; and in line 19, strike “October” and substitute “July”.