

# SENATE BILL 5

J1, J2

(PRE-FILED)

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CF HB 28

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By: **Senators Griffith, Benson, Ellis, Kelley, Washington, and West**

Requested: November 1, 2020

Introduced and read first time: January 13, 2021

Assigned to: Finance and Budget and Taxation

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## A BILL ENTITLED

1 AN ACT concerning

2 **Public Health – Implicit Bias Training and the Office of Minority Health and**  
3 **Health Disparities**

4 FOR the purpose of requiring the Office of Minority Health and Health Disparities to  
5 publish, to a certain extent, certain data on its website and to update certain data at  
6 a certain frequency; requiring the Governor, beginning in a certain fiscal year, to  
7 include a certain appropriation in the annual budget bill for the Office; altering a  
8 provision of law related to the intent of the General Assembly regarding the funding  
9 of the Office; requiring the Office to report certain information to certain committees  
10 of the General Assembly on or before a certain date each year; altering the purpose  
11 of the Cultural and Linguistic Health Care Professional Competency Program;  
12 requiring the Program, in coordination with the Office, to identify and approve  
13 certain implicit bias training programs; authorizing the Office to approve only  
14 implicit bias training programs that are recognized by a certain board or accredited  
15 by a certain council; requiring the Program to provide a certain list on request;  
16 requiring an applicant for the renewal of a license or certificate issued by a certain  
17 health occupations board to attest in a certain application that the applicant  
18 completed a certain implicit bias training program under certain circumstances;  
19 making technical changes; and generally relating to implicit bias training and the  
20 Office of Minority Health and Health Disparities.

21 BY repealing and reenacting, with amendments,

22 Article – Health – General

23 Section 20–1004(21) and (22), 20–1007, 20–1301, 20–1302, and 20–1305

24 Annotated Code of Maryland

25 (2019 Replacement Volume and 2020 Supplement)

26 BY adding to

27 Article – Health – General

28 Section 20–1004(23) and 20–1306

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EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 Annotated Code of Maryland  
2 (2019 Replacement Volume and 2020 Supplement)

3 BY adding to  
4 Article – Health Occupations  
5 Section 1–225  
6 Annotated Code of Maryland  
7 (2014 Replacement Volume and 2020 Supplement)

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

10 **Article – Health – General**

11 20–1004.

12 The Office shall:

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

15 (22) In collaboration with the Maryland Health Care Commission, publish  
16 annually on the Department’s website and provide in writing on request a “Health Care  
17 Disparities Policy Report Card” that includes:

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

20 (ii) The racial and ethnic composition of the physician population  
21 compared to the racial and ethnic composition of the State’s population; and

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

25 **(23) TO THE EXTENT AUTHORIZED UNDER FEDERAL AND STATE**  
26 **PRIVACY LAWS, PUBLISH ON ITS WEBSITE HEALTH DATA THAT INCLUDES RACE AND**  
27 **ETHNICITY INFORMATION COLLECTED BY THE OFFICE AND UPDATE THE DATA AT**  
28 **LEAST ONCE EVERY 6 MONTHS.**

29 20–1007.

30 **(A) FOR FISCAL YEAR 2023 AND EACH FISCAL YEAR THEREAFTER, THE**  
31 **GOVERNOR SHALL INCLUDE IN THE ANNUAL BUDGET BILL AN APPROPRIATION FOR**  
32 **THE OFFICE IN AN AMOUNT THAT IS AT LEAST \$1,788,314 OR 1.2% OF THE TOTAL**  
33 **FUNDS APPROPRIATED TO THE DEPARTMENT IN THAT FISCAL YEAR, WHICHEVER IS**

1 **GREATER.**

2 **(B)** It is the intent of the General Assembly that the Office [be funded]  
3 **SUPPLEMENT THE FUNDING FOR THE OFFICE PROVIDED UNDER SUBSECTION (A) OF**  
4 **THIS SECTION WITH FUNDING** from federal and special funding sources.

5 **(C)** **ON OR BEFORE OCTOBER 1 EACH YEAR, THE OFFICE SHALL REPORT TO**  
6 **THE HOUSE HEALTH AND GOVERNMENT OPERATIONS COMMITTEE AND THE**  
7 **SENATE FINANCE COMMITTEE, IN ACCORDANCE WITH § 2–1257 OF THE STATE**  
8 **GOVERNMENT ARTICLE, THE FOLLOWING INFORMATION FROM THE IMMEDIATELY**  
9 **PRECEDING FISCAL YEAR:**

10 **(1) THE OFFICE’S EFFORTS TO OBTAIN FUNDING DESCRIBED UNDER**  
11 **SUBSECTION (B) OF THIS SECTION; AND**

12 **(2) THE AMOUNT OF FUNDING FROM FEDERAL AND SPECIAL**  
13 **FUNDING SOURCES THE OFFICE RECEIVED.**

14 20–1301.

15 (a) In this subtitle the following words have the meanings indicated.

16 (b) “Cultural and linguistic competency” means cultural and linguistic abilities  
17 that can be incorporated into therapeutic and medical evaluation and treatment, including:

18 (1) Direct communication in the patient’s primary language;

19 (2) Understanding and applying the roles that culture, ethnicity, and race  
20 play in diagnosis, treatment, and clinical care; and

21 (3) Awareness of how the attitudes, values, and beliefs of health care  
22 providers and patients influence and impact professional and patient relations.

23 (c) “Health care professional” includes a physician, nurse, dentist, social worker,  
24 psychologist, pharmacist, health educator, or other allied health professional.

25 **(D) “IMPLICIT BIAS” MEANS A BIAS IN JUDGMENT THAT RESULTS FROM**  
26 **SUBTLE COGNITIVE PROCESSES, INCLUDING THE FOLLOWING PREJUDICES AND**  
27 **STEREOTYPES THAT OFTEN OPERATE AT A LEVEL BELOW CONSCIOUS AWARENESS**  
28 **AND WITHOUT INTENTIONAL CONTROL:**

29 **(1) PREJUDICIAL NEGATIVE FEELINGS OR BELIEFS ABOUT A GROUP**  
30 **THAT AN INDIVIDUAL HOLDS WITHOUT BEING AWARE OF THE FEELINGS OR BELIEFS;**  
31 **AND**

1           **(2) UNCONSCIOUS ATTRIBUTIONS OF PARTICULAR QUALITIES TO A**  
2 **MEMBER OF A SPECIFIC SOCIAL GROUP THAT ARE INFLUENCED BY EXPERIENCE AND**  
3 **BASED ON LEARNED ASSOCIATIONS BETWEEN VARIOUS QUALITIES AND SOCIAL**  
4 **CATEGORIES, INCLUDING RACE AND GENDER.**

5           **[(d)] (E)**       “Program” means the Cultural and Linguistic Health Care Professional  
6 Competency Program.

7 20–1302.

8           (a)       There is a Cultural and Linguistic Health Care Professional Competency  
9 Program.

10          (b)       The purpose of the Program is to:

11                   (1)       Provide for a voluntary program in which educational classes are  
12 offered to health care professionals to teach health care professionals:

13                           (i)       Methods to improve the health care professionals’ cultural and  
14 linguistic competency to communicate with non–English speaking patients and patients  
15 from other cultures who are English speaking;

16                           (ii)       Cultural beliefs and practices that may impact patient health  
17 care practices and allow health care professionals to incorporate the knowledge of the  
18 beliefs and practices in the diagnosis and treatment of patients; and

19                           (iii)       Methods to enable health care professionals to increase the  
20 health literacy of their patients to improve the patient’s ability to obtain, process, and  
21 understand basic health information and services to make appropriate health care  
22 decisions; and

23                   (2)       Establish and provide an evidence–based implicit bias training  
24 program for health care professionals involved in the perinatal care of patients under §  
25 20–1305 of this subtitle; **AND**

26           **(3) IDENTIFY AND APPROVE IMPLICIT BIAS TRAINING PROGRAMS**  
27 **FOR HEALTH OCCUPATION LICENSURE AND CERTIFICATION UNDER § 1–225 OF THE**  
28 **HEALTH OCCUPATIONS ARTICLE.**

29 20–1305.

30          (a)       (1)       In this section the following words have the meanings indicated.

31                   (2)       [“Implicit bias” means a bias in judgment that results from subtle  
32 cognitive processes, including the following prejudices and stereotypes that often operate  
33 at a level below conscious awareness and without intentional control:

1 (i) Prejudicial negative feelings or beliefs about a group that an  
2 individual holds without being aware of the feelings or beliefs; and

3 (ii) Unconscious attributions of particular qualities to a member of a  
4 specific social group that are influenced by experience and based on learned associations  
5 between various qualities and social categories, including race and gender.

6 (3) “Perinatal care” means the provision of care during pregnancy, labor,  
7 delivery, and postpartum and neonatal periods.

8 [(4)] (3) “Perinatal care facility” includes:

9 (i) A hospital, as defined in § 19–301 of this article, that provides  
10 perinatal care; and

11 (ii) A freestanding birthing center, as defined in § 19–3B–01 of this  
12 article.

13 (b) (1) On or before January 1, 2021, the Program shall establish an  
14 evidence–based implicit bias training program for all health care professionals involved in  
15 the perinatal care of patients in a perinatal care facility.

16 (2) (i) The Program shall establish the implicit bias program required  
17 under paragraph (1) of this subsection using best practices in implicit bias training.

18 (ii) The implicit bias program required under paragraph (1) of this  
19 subsection may include best practices used in other states.

20 (c) On or before January 1, 2022, and once every 2 years thereafter or more  
21 frequently, as determined by the perinatal care facility, a health care professional who is  
22 an employee of, and involved in the perinatal care of patients at, a perinatal care facility  
23 shall complete the training established under subsection (b) of this section.

24 (d) The Program shall offer the training established under subsection (b) of this  
25 section to any health care professional involved in perinatal care of patients at a perinatal  
26 care facility who is not required to complete the training under subsection (c) of this section  
27 because the health care professional is not an employee of a perinatal care facility.

28 **20–1306.**

29 **(A) (1) THE PROGRAM SHALL, IN COORDINATION WITH THE OFFICE OF**  
30 **MINORITY HEALTH AND HEALTH DISPARITIES, IDENTIFY AND APPROVE IMPLICIT**  
31 **BIAS TRAINING PROGRAMS THAT AN INDIVIDUAL MAY COMPLETE TO SATISFY THE**  
32 **REQUIREMENTS OF § 1–225 OF THE HEALTH OCCUPATIONS ARTICLE.**

1               **(2) THE PROGRAM MAY APPROVE ONLY IMPLICIT BIAS TRAINING**  
2 **PROGRAMS UNDER PARAGRAPH (1) OF THIS SUBSECTION THAT ARE RECOGNIZED BY**  
3 **A HEALTH OCCUPATIONS BOARD ESTABLISHED UNDER THE HEALTH OCCUPATIONS**  
4 **ARTICLE OR ACCREDITED BY THE ACCREDITATION COUNCIL FOR CONTINUING**  
5 **MEDICAL EDUCATION.**

6               **(B) THE PROGRAM SHALL PROVIDE A LIST OF TRAINING PROGRAMS**  
7 **APPROVED UNDER SUBSECTION (A) OF THIS SECTION ON REQUEST.**

8                               **Article – Health Occupations**

9 **1-225.**

10               **AN APPLICANT FOR THE RENEWAL OF A LICENSE OR CERTIFICATE ISSUED BY**  
11 **A HEALTH OCCUPATIONS BOARD UNDER THIS ARTICLE SHALL ATTEST IN THE**  
12 **APPLICATION THAT THE APPLICANT HAS COMPLETED AN IMPLICIT BIAS TRAINING**  
13 **PROGRAM APPROVED BY THE CULTURAL AND LINGUISTIC HEALTH CARE**  
14 **PROFESSIONAL COMPETENCY PROGRAM UNDER § 20-1306 OF THE HEALTH –**  
15 **GENERAL ARTICLE IF THE APPLICATION FOR RENEWAL IS THE FIRST APPLICATION**  
16 **FOR RENEWAL SUBMITTED BY THE APPLICANT AFTER OCTOBER 1, 2021.**

17               **SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect**  
18 **October 1, 2021.**