

HOUSE BILL 1518

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By: **Delegate McKay**

Introduced and read first time: February 7, 2020

Assigned to: Health and Government Operations

A BILL ENTITLED

1 AN ACT concerning

2 **Opioid–Exposed Newborns and Parents Addicted to Opioids – Mobile**
3 **Application – Pilot Program**
4 **(I’m Alive Today App)**

5 FOR the purpose of requiring the Social Services Administration, in consultation with the
6 local departments of social services, to establish a pilot program in Allegany, Garrett,
7 and Washington counties to communicate with a certain opioid–addicted parent
8 through a mobile application; requiring the local departments of social services in
9 Allegany, Garrett, and Washington counties, if appropriate, to communicate with a
10 certain opioid–addicted parent through a certain mobile application under certain
11 circumstances; requiring certain local departments to assess the risk of harm to and
12 safety of a certain child under certain circumstances; requiring the Administration
13 to develop a certain mobile application; requiring a certain mobile application to
14 provide a method for a parent to communicate with the Administration; authorizing
15 the Administration to contract with a third party to develop a certain mobile
16 application; requiring the Administration to develop a certain evaluation process for
17 the mobile application pilot program; requiring the Administration to report to the
18 General Assembly on or before certain dates; exempting the development and
19 implementation of a certain mobile application from certain provisions of State
20 procurement law; providing for the termination of this Act; and generally relating to
21 a mobile application pilot program in Allegany, Garrett, and Washington counties.

22 BY repealing and reenacting, with amendments,
23 Article – Family Law
24 Section 5–704.2
25 Annotated Code of Maryland
26 (2019 Replacement Volume)

27 BY adding to
28 Article – Family Law

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



Section 5–704.5
Annotated Code of Maryland
(2019 Replacement Volume)

BY repealing and reenacting, with amendments,
Article – State Finance and Procurement
Section 11–203(a)(1)(xviii) and (xix)
Annotated Code of Maryland
(2015 Replacement Volume and 2019 Supplement)

BY adding to
Article – State Finance and Procurement
Section 11–203(a)(1)(xx)
Annotated Code of Maryland
(2015 Replacement Volume and 2019 Supplement)

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

Article – Family Law

5–704.2.

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

(2) “Controlled drug” means a controlled dangerous substance included in
Schedule I, Schedule II, Schedule III, Schedule IV, or Schedule V under Title 5, Subtitle 4
of the Criminal Law Article.

(3) “Health care practitioner” has the meaning stated in § 1–301 of the
Health Occupations Article.

(4) “Newborn” means a child under the age of 30 days who is born or who
receives care in the State.

(b) For purposes of this section, a newborn is “substance–exposed” if the newborn:

(1) displays a positive toxicology screen for a controlled drug as evidenced
by any appropriate test after birth;

(2) displays the effects of controlled drug use or symptoms of withdrawal
resulting from prenatal controlled drug exposure as determined by medical personnel; or

(3) displays the effects of a fetal alcohol spectrum disorder.

(c) Except as provided in subsection (e) of this section, a health care practitioner
involved in the delivery or care of a substance–exposed newborn shall:

1 (1) make an oral report to the local department as soon as possible; and

2 (2) make a written report to the local department not later than 48 hours
3 after the contact, examination, attention, treatment, or testing that prompted the report.

4 (d) In the case of a substance–exposed newborn in a hospital or birthing center, a
5 health care practitioner shall notify and provide the information required under this section
6 to the head of the institution or the designee of the head.

7 (e) A health care practitioner is not required to make a report under this section
8 if the health care practitioner:

9 (1) has knowledge that the head of an institution or the designee of the
10 head or another individual at that institution has made a report regarding the
11 substance–exposed newborn; or

12 (2) has verified that, at the time of delivery:

13 (i) the mother was using a controlled substance as currently
14 prescribed for the mother by a licensed health care practitioner;

15 (ii) the newborn does not display the effects of withdrawal from
16 controlled substance exposure as determined by medical personnel;

17 (iii) the newborn does not display the effects of fetal alcohol spectrum
18 disorder; and

19 (iv) the newborn is not affected by substance abuse.

20 (f) To the extent known, an individual who makes a report under this section
21 shall include in the report the following information:

22 (1) the name, date of birth, and home address of the newborn;

23 (2) the names and home addresses of the newborn’s parents;

24 (3) the nature and extent of the effects of the prenatal alcohol or drug
25 exposure on the newborn;

26 (4) the nature and extent of the impact of the prenatal alcohol or drug
27 exposure on the mother’s ability to provide proper care and attention to the newborn;

28 (5) the nature and extent of the risk of harm to the newborn; and

29 (6) any other information that would support a conclusion that the needs
30 of the newborn require a prompt assessment of risk and safety, the development of a plan

of safe care for the newborn, and referral of the family for appropriate services.

(g) Within 48 hours after receiving the notification pursuant to subsection (c) of this section, the local department shall:

(1) see the newborn in person;

(2) consult with a health care practitioner with knowledge of the newborn's condition and the effects of any prenatal alcohol or drug exposure; and

(3) attempt to interview the newborn's mother and any other individual responsible for care of the newborn.

(h) (1) Promptly after receiving a report under subsection (c) of this section, the local department shall assess the risk of harm to and the safety of the newborn to determine whether any further intervention is necessary.

(2) If the local department determines that further intervention is necessary, the local department shall:

(i) develop a plan of safe care for the newborn;

(ii) assess and refer the family for appropriate services, including alcohol or drug treatment; and

(iii) as necessary, develop a plan to monitor the safety of the newborn and the family's participation in appropriate services, **INCLUDING, IN ALLEGANY COUNTY, GARRETT COUNTY, AND WASHINGTON COUNTY, MONITORING, IF APPROPRIATE, AN OPIOID-EXPOSED NEWBORN THROUGH THE MOBILE APPLICATION PILOT PROGRAM UNDER § 5-704.5 OF THIS SUBTITLE.**

(i) A report made under this section does not create a presumption that a child has been or will be abused or neglected.

(j) The Secretary of Human Services shall adopt regulations to implement the provisions of this section.

5-704.5.

(A) THIS SECTION APPLIES ONLY IN ALLEGANY COUNTY, GARRETT COUNTY, AND WASHINGTON COUNTY.

(B) THE ADMINISTRATION, IN CONSULTATION WITH THE LOCAL DEPARTMENT, SHALL IMPLEMENT A PILOT PROGRAM TO COMMUNICATE WITH OPIOID-ADDICTED PARENTS OF OPIOID-EXPOSED NEWBORNS AND CHILDREN THROUGH A MOBILE APPLICATION.

(C) THE LOCAL DEPARTMENT SHALL ASSESS THE RISK OF HARM TO AND SAFETY OF AN OPIOID-EXPOSED NEWBORN AS REQUIRED UNDER THE PROVISIONS OF § 5-704.2 OF THIS SUBTITLE.

(D) (1) THE ADMINISTRATION SHALL DEVELOP A MOBILE APPLICATION TO BE USED BY PARENTS OF OPIOID-ADDICTED NEWBORNS OR WHO ARE DETERMINED BY THE ADMINISTRATION TO HAVE OPIOID ADDICTIONS THAT COULD RESULT IN HARM OR POTENTIAL HARM TO A CHILD.

(2) THE MOBILE APPLICATION DEVELOPED UNDER THIS SUBSECTION SHALL PROVIDE A METHOD FOR A PARENT TO COMMUNICATE PERIODICALLY IN ORDER TO SIGNAL THAT THE PARENT IS CONSCIOUS AND ABLE TO CARE FOR THE PARENT'S CHILDREN.

(3) THE ADMINISTRATION MAY CONTRACT WITH A THIRD PARTY TO DEVELOP THE MOBILE APPLICATION REQUIRED UNDER THIS SUBSECTION.

(E) THE ADMINISTRATION SHALL DEVELOP AN EVALUATION PROCESS FOR THE MOBILE APPLICATION PILOT PROGRAM TO DETERMINE THE EFFECTIVENESS OF THE PROGRAM.

Article – State Finance and Procurement

11-203.

(a) Except as provided in subsection (b) of this section, this Division II does not apply to:

(1) procurement by:

(xviii) the Department of Natural Resources, for negotiating or entering into grants, agreements, or partnerships with nonprofit entities related to conservation service opportunities; [and]

(xix) the State Archives for preservation, conservation, proper care, restoration, and transportation of fine art or decorative art that is:

1. in the custody of the Commission on Artistic Property; and

2. owned by or loaned to the State; AND

(XX) THE SOCIAL SERVICES ADMINISTRATION FOR THE DEVELOPMENT AND IMPLEMENTATION OF A MOBILE APPLICATION IN ACCORDANCE WITH § 5-704.5 OF THE FAMILY LAW ARTICLE.

1 SECTION 2. AND BE IT FURTHER ENACTED, That, on or before December 31,
2 2021, and December 31, 2022, the Social Services Administration shall report to the
3 General Assembly, in accordance with § 2-1257 of the State Government Article, on the
4 effectiveness of the pilot program established under this Act in monitoring opioid-exposed
5 newborns through a mobile application.

6 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect
7 October 1, 2020. It shall remain effective for a period of 2 years and 3 months and, at the
8 end of December 31, 2022, this Act, with no further action required by the General
9 Assembly, shall be abrogated and of no further force and effect.