

**SB0790/593623/1**

BY: Finance Committee

AMENDMENTS TO SENATE BILL 790  
(First Reading File Bill)

AMENDMENT NO. 1

On page 1, strike beginning with “authorizing” in line 6 down through “funding;” in line 9; in line 20, after “Fund” insert “in a manner consistent with a certain agreement”; and in line 22, after “Board;” insert “requiring the Commission to establish a Community Benefits Modernization subcommittee; requiring the Maryland Department of Health to convene a certain workgroup;”.

AMENDMENT NO. 2

On page 4, in line 25, strike “(I)”; and strike in their entirety lines 27 through 30, inclusive.

On page 6, in line 17, after “STATE” insert “AS A REPRESENTATIVE OF A LOCAL HEALTH DEPARTMENT”.

On page 10, in line 10, strike “OVERSIGHT OVER” and substitute “GUIDANCE FOR”.

On page 12, in line 29, after “MAY” insert “, IN A MANNER CONSISTENT WITH THE AHEAD MODEL STATE AGREEMENT,”.

On page 15, after line 29, insert:

“SECTION 3. AND BE IT FURTHER ENACTED, That:

(a) (1) The Commission on Public Health, in consultation with the Maryland Department of Health and the Health Services Cost Review Commission, shall establish a community benefits modernization subcommittee.

(2)     The subcommittee may include members and nonmembers of the Commission.

(3)     To the extent practicable, the membership of the subcommittee shall reflect the racial, ethnic, and gender diversity of the State.

(b)     The subcommittee shall:

(1)     review federal and State requirements governing hospital community benefit activities, including community health needs assessments and implementation strategies, definitions of allowable activities, and reporting requirements;

(2)     analyze a landscape assessment of other states' community benefit spending requirements and policies, including those related to the development of the community health needs assessment and how implementation plans are operationalized;

(3)     evaluate the scope and impact of community benefit activities conducted by hospitals in the State, including the processes for local community health needs assessment, implementation plan development and deployment, and trends in spending per allowable category;

(4)     identify gaps that exist between community benefit investment and State and local health priority areas; and

(5)     develop recommendations to:

(i)     modernize the State's community benefit spending standards, policies, and reporting requirements while focusing on how to maximize community benefit investment to meet State health improvement priorities; and

(ii) ensure alignment of community benefit with State health improvement priorities, including statutory or regulatory changes, funding, and reporting requirements to modernize the community benefits in the State.

(c) The Chair of the Commission on Public Health shall provide staffing for the subcommittee.

(d) (1) On or before August 1, 2027, the subcommittee shall submit a report of its findings and recommendations to the Commission on Public Health.

(2) On or before September 1, 2027, the Commission on Public Health shall submit a report of the subcommittee's findings and recommendations to the Governor and, in accordance with § 2-1257 of the State Government Article, the Senate Budget and Taxation Committee, the Senate Finance Committee, the House Appropriations Committee, and the House Health Committee.

SECTION 4. AND BE IT FURTHER ENACTED, That the Maryland Department of Health shall convene a workgroup with representatives from the Department of Budget and Management and up to five representatives of local health officers to review local health department recruiting and classification processes and identify potential methods for increasing efficiencies related to the processes.”;

in line 30, strike “3.” and substitute “5.”; and in line 31, after “2026.” insert “Section 3 of this Act shall remain effective for a period of 1 year and 6 months and, at the end of December 31, 2027, Section 3 of this Act, with no further action required by the General Assembly, shall be abrogated and of no further force and effect.”.