A BILL ENTITLED

AN ACT concerning

Health – Maryland Commission on Autism

FOR the purpose of establishing the Maryland Commission on Autism; providing for
the membership of the Commission; requiring the membership of the
Commission to consist of broad representation of the State’s citizens;
designating the chair of the Commission; establishing a quorum requirement;
requiring the Commission to meet a certain number of times per year; requiring
the Commission to meet a certain number of times before a certain date;
authorizing the Commission to hold meetings in a certain manner; prohibiting a
member of the Commission from receiving compensation; authorizing a member
of the Commission to receive certain reimbursement; requiring a certain person
to designate certain staff for the Commission; requiring the Commission to
make certain recommendations; requiring the Commission to make certain
evaluations; requiring the Commission to award certain grants to be used for
certain purposes; requiring the Commission to carry out certain tasks in
preparing a certain plan; authorizing the Commission to undertake certain
responsibilities; requiring the Commission to report to the General Assembly on
or before certain dates; defining a certain term; providing for the termination of
this Act; and generally relating to autism awareness.

BY adding to

Article – Health – General

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.
[Brackets] indicate matter deleted from existing law.
Section 13–2801 through 13–2806 to be under the new subtitle “Subtitle 28. Maryland Commission on Autism”

Annotated Code of Maryland
(2005 Replacement Volume and 2008 Supplement)

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

Article – Health – General

SUBTITLE 28. MARYLAND COMMISSION ON AUTISM.

13–2801. THERE IS A MARYLAND COMMISSION ON AUTISM.

13–2802. IN THIS SUBTITLE, “COMMISSION” MEANS THE MARYLAND COMMISSION ON AUTISM.

13–2803. (A) THE COMMISSION CONSISTS OF:

(1) ONE MEMBER OF THE SENATE OF MARYLAND, APPOINTED BY THE PRESIDENT OF THE SENATE;

(2) ONE MEMBER OF THE HOUSE OF DELEGATES, APPOINTED BY THE SPEAKER OF THE HOUSE;

(3) THE DEPUTY SECRETARY OF BEHAVIORAL HEALTH AND DISABILITIES, OR THE DEPUTY SECRETARY’S DESIGNEE;

(4) THE STATE SUPERINTENDENT OF SCHOOLS, OR THE SUPERINTENDENT’S DESIGNEE;
(5) The Secretary of Human Resources, or the Secretary’s designee; and

(6) The following 17 members, to be appointed by the Governor:

(i) Two representatives from different institutions of higher learning located in the State;

(ii) An individual employed as a director of special education at a school district located in the State;

(iii) A speech–language pathologist;

(iv) A diagnostician;

(v) A mental health provider;

(vi) A primary care physician;

(vii) Three parents of individuals with autism spectrum disorders, including two parents of an individual under the age of 18 years and one parent of an individual at least 18 years old;

(viii) Two individuals with autism spectrum disorders;

(ix) A representative from an independent private provider or nonprofit provider;

(x) Three members of nonprofit organizations in the State who provide services to individuals or families living with autism spectrum disorders; and

(xi) A representative from the Maryland Hospital Association.
(B) Members of the Commission shall consist of a broad representation of Maryland citizens, both urban and rural, who are concerned with the health and quality of life for individuals with autism spectrum disorders.

(C) The Deputy Secretary of Behavioral Health and Disabilities or the Deputy Secretary’s designee shall be the chair of the Commission.

13–2804.

(A) A majority of the members serving on the Commission is a quorum.

(B) The Commission shall meet at least four times a year, including at least two times before June 1, 2010.

(C) The Commission may hold meetings in person or by telephone or video conference.

(D) A member of the Commission:

(1) May not receive compensation as a member of the Commission; but

(2) Is entitled to reimbursement for expenses under the Standard State Travel Regulations, as provided in the State budget.

(E) The Deputy Secretary of Behavioral Health and Disabilities shall designate the staff necessary to carry out this subtitle.

13–2805.

(A) The Commission shall:
(1) Advise and make recommendations to the Governor, General Assembly, and relevant state agencies regarding matters concerning services for individuals with autism spectrum disorders at all state levels, including health care, education, and other adult and adolescent services;

(2) Develop a comprehensive statewide plan for an integrated system of training, treatment, and services for individuals of all ages with autism spectrum disorders;

(3) Evaluate whether a specially designed registration plate should be issued by the Motor Vehicle Administration to promote autism awareness and raise money for autism-related projects;

(4) Evaluate whether April should be declared Autism Awareness Month; and

(5) Award grants to be used for:

   (i) Purchasing communication tools to be used in schools with students with autism spectrum disorders;

   (ii) Training individuals who work with individuals with autism spectrum disorders; and

   (iii) Enhancing diagnoses and treatment provided by nonprofit organizations that serve individuals and families of individuals with autism spectrum disorders.

(b) In developing the statewide plan under subsection (a)(2) of this section, the Commission shall:

   (1) Study and report on the means for developing a comprehensive, coordinated system of care delivery across the state and ensuring that resources are created, well-utilized, and appropriately distributed across the state;
(2) **Determine the need for the creation of services in designated areas of the State;**

(3) **Plan for effectively evaluating regional service areas throughout the State and the capacity of the areas, including outlining personnel and skills that exist within the service area, other capabilities that exist, and resource needs that may be unmet;**

(4) **Assess the need for additional behavioral intervention capabilities and, as necessary, the means for expanding those capabilities in a regional service area;**

(5) **Develop recommendations for expanding services in conjunction with hospitals after considering the resources that exist in terms of specialty clinics, hospitals, and hospital inpatient care;**

(6) **Conduct an assessment of the need for coordinated, enhanced, and targeted special education within each region of the State; and**

(7) **Develop a recommendation for enlisting appropriate universities and colleges to ensure support and collaboration in developing certification or degree programs for students specializing in autism spectrum disorder intervention.**

(C) **The Commission may:**

(1) **Provide recommendations regarding training programs and the content of training programs being developed;**

(2) **Recommend individuals to participate in a committee of major stakeholders charged with developing screening, diagnostic, assessment, and treatment standards for the State;**

(3) **Participate in recommending a panel of qualified professionals and experts to review existing models of**
EVIDENCE-BASED EDUCATIONAL PRACTICES FOR ADAPTATION SPECIFIC TO THE STATE; AND

(4) EXAMINE THE BARRIERS TO ACCURATE INFORMATION OF THE PREVALENCE OF INDIVIDUALS WITH AUTISM SPECTRUM DISORDERS ACROSS THE STATE AND RECOMMEND A PROCESS FOR ACCURATE REPORTING OF DEMOGRAPHIC DATA.

13–2806.

THE COMMISSION SHALL ISSUE A REPORT TO THE GENERAL ASSEMBLY IN ACCORDANCE WITH § 2–1246 OF THE STATE GOVERNMENT ARTICLE:

(1) ON OR BEFORE JUNE 1, 2011, ON THE COMMISSION’S PRELIMINARY FINDINGS AND RECOMMENDATIONS REGARDING THE DEVELOPMENT OF A COMPREHENSIVE STATEWIDE PLAN UNDER § 13–2805 OF THIS SUBTITLE; AND

(2) ON OR BEFORE SEPTEMBER 30, 2012, ON THE COMMISSION’S FINAL FINDINGS AND RECOMMENDATIONS REGARDING THE DEVELOPMENT OF A COMPREHENSIVE STATEWIDE PLAN UNDER § 13–2805 OF THIS SUBTITLE.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2009. It shall remain effective for a period of 3 years and, at the end of September 30, 2012, with no further action required by the General Assembly, this Act shall be abrogated and of no further force and effect.