

~~management plan; authorizing the Council to accept certain funds; requiring the Department and the Council to submit the chronic care management plan to the Governor and the General Assembly on or before a certain date; providing for the termination of this Act; and generally relating to a chronic care management plan, establishing the Chronic Care and Prevention Program in the State; requiring the Secretary of Health and Mental Hygiene to develop and implement the Program in consultation with a certain task force; requiring the Secretary to seek to obtain certain waivers; authorizing the Secretary to accept certain grants and donations; establishing the Chronic Care and Prevention Program Fund; establishing the Task Force on Chronic Care and Prevention; establishing the composition and duties of the Task Force; establishing the duties of certain regional chronic care and prevention partnerships; authorizing the Secretary to transfer certain funds to the partnerships; authorizing the Secretary to establish a certain advisory council; defining certain terms; and generally relating to the establishment of the Chronic Care and Prevention Program in the State.~~

~~BY adding to~~

~~Article Health General~~

~~Section 13-2701 through 13-2708 to be under the new subtitle "Subtitle 27, State Chronic Care and Prevention Program"~~

~~Annotated Code of Maryland~~

~~(2005 Replacement Volume and 2007 Supplement)~~

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

(a) The Department of Health and Mental Hygiene and the Maryland Health Quality and Cost Council shall study chronic care management and develop a chronic care management plan to improve the quality and cost-effectiveness of care for individuals who have or are at risk for a chronic disease.

(b) The chronic care management plan shall include plans for:

- (1) patient self-management, in collaboration with a health care team;
- (2) incentives for provision of care consistent with evidence-based standards;
- (3) ways to engage communities to fight physical inactivity and obesity;
- (4) identification of information technology that supports care management;