REGULATORY REVIEW AND EVALUATION ACT:

EVALUATION REPORTS — APRIL 1, 2016

Subtitle 10 LABORATORIES

Subtitle 11 MATERNAL AND CHILD HEALTH

Subtitle 12 ADULT HEALTH

Subtitle 13 DRUGS

Subtitle 14 CANCER CONTROL

Subtitle 50 TISSUE BANKS

SUBMITTED BY:

Department of Health and Mental Hygiene Office of Regulation and Policy Coordination 201 W. Preston Street, Room 512 Baltimore, Maryland 21201

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EVALUATION REPORTS

<u>CHAPTERS AFFECTED</u> <u>ACTIONS NEEDED</u>

Subtitle 10 LABORATORIES

COMAR 10.10.10 Job-Related Alcohol and Controlled Dangerous Substances Testing

No Action

Subtitle 12 ADULT HEALTH

10.12.05 Breast Implantation No Action

Subtitle 13 DRUGS

10.13.05 AIDS Education Program for Persons Convicted of Drug/Sex-Related Crimes	Amendments
10.13.08 Sale of Needles and Syringes or Other Paraphernalia	No Action
10.13.11 Exemption to Allow Sale of Drugs by Vending Machines	No Action
10.13.12 Impoundment and Disposal of Drugs and Prescription Records	Amendment

Subtitle 14 CANCER CONTROL

10.14.03 Breast Cancer Treatment Methods	No Action
10.14.04 Breast Cancer Program	No Action
10.14.06 Cigarette Restitution Fund Program	Amendment

Subtitle 50 TISSUE BANKS

10.50.01 Tissue Banks Amendment

EXEMPTIONS REQUESTED

In accordance with State Government Article, §10-132-1, Annotated Code of Maryland, the Secretary of DHMH has certified to the Governor and the AELR Committee that a review of the following chapters would not be effective or cost-effective and therefore are exempt from the review process based on the fact that they were either initially adopted (IA), comprehensively amended (CA) during the preceding 8 years, or Federally mandated (FM):

Subtitle 10 LABORATORIES

10.10.01 General	CA 6-1-09
10.10.02 Medical Laboratories—General	CA 6-1-09
10.10.03 Medical Laboratories—Licenses	CA 6-1-09
10.10.04 Medical Laboratories—Fees	CA 6-1-09
10.10.05 Medical Laboratories—Proficiency Testing	CA 6-1-09
10.10.06 Medical Laboratories—Quality Assurance	CA 6-1-09
10.10.07 Medical Laboratories—Personnel	CA 6-1-09
10.10.08 Medical Laboratories—Sanctions	CA 6-1-09
10.10.09 Law Enforcement Laboratories—Personnel Cert. and Approval of Lab. Procedures	CA 11-11-13
10.10.11 Biological Agents Registry Program_	CA 1-23-12
10.10.12 Medical Laboratories—Public Health HIV Testing Programs_	CA 4-1-13
10.10.13 Medical Laboratories—Testing for Hereditary & Congenital Disorders in Newborn Infants	CA 3-23-09

Subtitle 11 MATERNAL AND CHILD HEALTH

10.11.01 Identification of Infants		CA 3-6-09
10.11.02 Program for Hearing-Impaired Infants		CA 6-22-15
10.11.03 Children's Medical Services Program		CA 1-14-08
10.11.04 Lead Poisoning Screening Program	(Amendments printed 1-8-16 Md.R.) A	Anticipated CA: 3-28-16
10.11.05 Child Death Review Case Reporting System		IA 4-6-09
10.11.06 Morbidity, Mortality, and Quality Review Comn	nittee—Pregnancy and Childhood	IA 9-21-09
10.11.07 Prohibition of Sale of Baby Bumper Pads		IA 11-26-12
Subtitle 12 ADULT HEALTH		

10.12.01 Surgical Abortion Facilities	IA 7-23-12
10.12.02 Rape and Sexual Offenses—Physician and Hospital Charges	CA 12-29-08
10.12.04 Day Care for the Elderly and Adults with a Medical Disability	CA 12-13-14

Subtitle 13 DRUGS

10.13.01 Dispensing of Prescription Drugs by a Licensee	CA 6-22-15
10.13.02 Purchase— and Distribution of Prescription Drugs and Devices	IA 8-22-11

Subtitle 14 CANCER CONTROL

10.14.01 Cancer Registry	CA 1-13-11
10.14.02 Reimbursement for Breast and Cervical Cancer Diagnosis and Treatment	CA 5-12-14
10.14.05 Maryland Cancer Fund	CA 5-12-14
10.14.07 Cord Blood Transplant Center Support Fund	IA 4-28-14

CHAPTERS THAT HAVE BEEN REPEALED

Subtitle 12 ADULT HEALTH

10.12.03 Expanded Maternity Plan -

Subtitle 13 DRUGS

- 10.13.03 Sale of Sodium Fluoride or Hydrofluoric Acid Preparations for Use as Insecticides -
- 10.13.04 Labeling of Prescriptions for Drugs (Other Than Narcotic Drugs)... Prescription_-
- 10.13.06 Acceptance of Oral Prescriptions for Certain Narcotic Drugs -
- 10.13.07 Sale of Dihydrocodeinone or any of its Salts
- 10.13.09 Sale of Nitrous Oxide_-
- 10.13.10 Prescribing, Administering, and Dispensing of Amphetamines and Methamphetamines_-

Chapter Codification: COMAR 10.10.10		COMAR 10.10.10			
Chapter N	Chapter Name: Job-Related Alcohol and Controlled Dangerous Substances Testing				
Authority	thority: Health – General Article § 17-214, Annotated Code of Maryland				
Date Orig	inally A	Adopted or	r Last Amended:	Last Amended: Effective July 22, 2002 (29:14 Md.R. 1074)	
Purpose:	COMAR 10.10.10 provides standards and procedures for applicants and employees who are required to undergo job-related alcohol and controlled dangerous substances testing. As provided in COMAR 10.10.10.01, this regulation is intended to "provide for the protection of employers, employees, and the public by setting fair and effective job-related alcohol and controlled dangerous substances testing standards to ensure accurate and reliable test results and to promote drug-free workplaces."			ontrolled dangerous substances testing. As provided in COMAR led to "provide for the protection of employers, employees, and the e job-related alcohol and controlled dangerous substances testing	
				§10-132(1)(i), Annotated Code of Maryland; COMAR 01.01.3002.20E) ry for the public interest? Yes X No	
				ed by statutory authority and judicial opinion? Yes X No Appropriate for amendment or repeal? Yes No X	
	(3) Are the regulations obsolete or otherwise appropriate for amendment or repeal? Yes No (4) Are the regulations effective in accomplishing their intended purpose? Yes No (5) No (6) No (7)				
B. Outre	ach an	d Researc	ch. (State Government	Article, §10-135(a)(2)(i)–(viii), Annotated Code of Maryland)	
		stakeholde w process.		e regulations and provide a summary of their participation in and input into	
	COMA for the	R 10.10.1	0, a Notice of Opportent of Health and Ment	h an opportunity to participate in the review and evaluation of unity for Public Inspection and Comment was posted on the websites al Hygiene and the DHMH Laboratories Administration. No	
			cted agencies that were I input into the review	e invited to review the regulations and provide a summary of their process.	
	Maryla of Dent	nd Board tal Practiti	of Pharmacy, Board or oners, Maryland Asso	Hygiene Health Professionals Boards and Commissions including the f Physicians, Board of Dental Practitioners, Board of Nursing, Board ciation of Counties, and the DHMH Office of Health Care Quality of COMAR 10.10.10. No comments were provided.	

- (3) Describe the process used to solicit public comment, including: (a) any notice published in the Maryland Register;

 - (b) any notice published in newspapers of general circulation;

- (c) any notice posted on the unit's website or on a Statewide website created for units to post notices of regulation review:
- (d) any mailing by the adopting authority; and
- (e) any public hearing held.

Notice of Opportunity for Public Inspection and Comment was posted on the websites for the Department of Health and Mental Hygiene and the DHMH Laboratories Administration.

- (4) Provide summaries of:
 - (a) all comments received from stakeholders, affected units, or the public; and
 - (b) the adopting authority's responses to those comments.

No comments were received.

(5) Describe any interunit conflict reviewed and the resolution or proposed resolution of that conflict.

None.

(6) Provide a summary of any relevant scientific data gathered.

Not applicable.

(7) Provide a summary of any relevant information gathered related to the regulations of other states or the federal government.

Federal regulatory provisions for job-related alcohol and controlled dangerous substances testing are codified under 49 CFR Part 382. This part regulates controlled substances and alcohol use testing for the Federal Motor Carrier Safety Administration. The regulations are designed to prevent accidents and injuries resulting from the misuse of alcohol or use of controlled substances by drivers of commercial motor vehicles. Similarly, Maryland and the surrounding states of Delaware, Virginia, West Virginia, North Carolina, Connecticut, New Jersey and Pennsylvania either require or provide public and/or private employers with the option of conducting some form of employee drug testing (if required and/or deemed necessary by the employer). The impetus of these state regulations is to provide parameters for pre-employment testing or protocols if there are reasonable indications that a prospective employee has a drug abuse problem.

(8) Provide a summary of any other relevant information gathered.

The specific regulatory provisions of COMAR 10.10.10 provides that employers may require applicants, contractors or employees to undergo job-related alcohol or controlled dangerous substances testing. However, such testing may only be conducted by a state certified laboratory. Moreover, any positive test result will afford employees an opportunity (at their own expense) to have an independent test performed to verify the results.

COMAR 10.10.10 does not pertain to the authorized use of medical marijuana and all tests received or produced as a result of job-related alcohol or controlled dangerous substances testing are confidential. Tests results may only be released by subpoena, court order or upon a signed authorization of the person tested or by his or her parent or legal guardian.

	Inder COMAR 01.01.2003.20E(3), does the agency have any existing policy statements, guidelines, or standards being pplied or enforced which should be promulgated as regulations, in accordance with the Administrative Procedure Act? Yes No X
	Has the agency promulgated all regulations required by recent legislati Yes X No Provide explanations of the above responses, as needed:
	Not applicable.
D. A	ctions Needed. (State Government Article, §10-135(a)(2)(ix) – (xi), Annotated Code of Maryland) (check all that apply) X no action amendment repeal repeal and adopt new regulations reorganization
Sumr	mary:
an co	OMAR 10.10.10 continues to be an essential and effective regulation for the protection of employers, employees d the public in the State of Maryland. By setting standards, protocols and procedures for job-related alcohol and entrolled dangerous substances testing, accurate and reliable test results are achieved and promotes drug-free porkplaces.
	Person performing review: Renee E. Scurry
	Title: Administrator for Regulatory and Administrative Programs

Chapter Codification: COMAR 10.12.05			COMAR 10.12.05	
Chapter Name: Breast Implantation			Implantation	
Authority: Health-General Article, §20-114, Annotated Code of Maryland				
Date Origin	nally A	dopted or	Last Amended: September 3, 1990	
 a) provide and distribute a standincluding the side effects, wa b) provide a statement acknowle c) provide a waiver form for the 2) Physicians to: a) provide the standardized writt b) obtain patient signature on the 			ment of Health and Mental Hygiene (the Department) to: e and distribute a standardized written summary of information about breast implantation ing the side effects, warnings, and cautions; e a statement acknowledging receipt of information for signature by patients; and e a waiver form for the time requirements for the summary distribution. o: e the standardized written summary to patients within a certain timeframe; patient signature on the acknowledgement form provided by the Department; and any waiver and the signed acknowledgement form in the patient's medical record.	
(1) Do (2) Do (3) Are (4) Are B. Outrea (1) List the	the registre the the review. The Depocal Break registre the registre t	ulations of ulations of ulations of ulations of ulations of ulations. Research artment in the unit of ulations of ulations. Partment in the ulation of ulations	Government Article, §10-132(1)(i), Annotated Code of Maryland; COMAR 01.01.3002.20E) continue to be necessary for the public interest? Continue to be supported by statutory authority and judicial opinion? Yes No Continue to be supported by statutory authority and judicial opinion? Yes No Anotated Code of Maryland Provide Government Article, §10-135(a)(2)(i)—(viii), Annotated Code of Maryland) The invited to review the regulations and provide a summary of their participation in and input into a summary of their participation in and input into the invited comments from: the general public (via notice posted to the Department's website), Cervical Cancer Program coordinators and other key contacts at the 24 local health include providers participating in the Breast and Cervical Cancer Diagnosis and Treatment is of the Maryland State Council on Cancer Control, members of the Breast Cancer of Committee, members of the Maryland Cancer Collaborative, and other key stakeholders represent patients and health care providers.	

(2) List any other affected agencies that were invited to review the regulations and provide a summary of their

No other agencies are affected by these regulations; therefore no other agencies were invited to review the

participation in and input into the review process.

regulations.

- (3) Describe the process used to solicit public comment, including:
 - (a) any notice published in the Maryland Register;
 - (b) any notice published in newspapers of general circulation;
 - (c) any notice posted on the unit's website or on a Statewide website created for units to post notices of regulation review:
 - (d) any mailing by the adopting authority; and
 - (e) any public hearing held.

The Department solicited comments by:

- posting a notice to the Department's website;
- sending email messages to Breast and Cervical Cancer Program coordinators and other key contacts at the local health departments;
- mailing letters to the providers participating in the Breast and Cervical Cancer Diagnosis and Treatment Program;
- emailing members of the Maryland State Council on Cancer Control and announcement at the May 15, 2015 meeting;
- emailing members of the Breast Cancer Medical Advisory Committee; and
- emailing members of the Maryland Cancer Collaborative, which includes key stakeholders and groups that represent patients and health care providers.
- (4) Provide summaries of:
 - (a) all comments received from stakeholders, affected units, or the public; and
 - (b) the adopting authority's responses to those comments.

No comments were received.

(5) Describe any interunit conflict reviewed and the resolution or proposed resolution of that conflict.

No inter-unit conflicts identified.

(6) Provide a summary of any relevant scientific data gathered.

An internet search of scientific data related to breast implantation summary information was conducted. No scientific information was available.

(7) Provide a summary of any relevant information gathered related to the regulations of other states or the federal government.

A national scan of existing state statutes and regulations pertaining to breast implantation summary information was conducted using internet searches and historical CDC documents as points of reference. In general, statutes and regulations relating to breast implantation summary information are similar from state to state and were enacted generally starting in the early 1990's through the early 2000's with minimal revisions since enactment. There is evidence that some states had similar statutes that were repealed, but information about the justification for any such repeal was not available. In general, no evidence was found to substantiate revisions to Maryland COMAR or statute for breast implantation summary information.

(8) Provide a summary of any other relevant information gathered.

No other relevant information was gathered.

Has the agency promulgated all regulations required by recent legislation? Yes X No Provide explanations of the above responses, as needed: No recent legislation has required promulgation of regulations. D. Actions Needed. (State Government Article, \$10-135(a)(2)(ix) – (xi), Annotated Code of Maryland) (check all that apply) X no action amendment repeal repeal and adopt new regulations reorganization Summary: Comments were solicited from stakeholders regarding COMAR 10.12.05; no comments were received. A natiscan of similar statutes and regulations revealed no evidence to suggest a need for revision or repeal of the exis regulations. It is recommended that no action be taken at this time. Person performing review: Sarah Conolly Hokenn Title: Deputy Director, Cente	ards being dure Act?
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Title: Deputy Director, Center	
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Deputy Director, Center	
Cancer Prevention and Control	

Chapter Codification: COMAR 10.13.05				
Chapter Name: AIDS Education Program for Persons Convicted of Drug/Sex-Related Crimes				
Authority:	Health-General Article, §18-339; Criminal Law Article, §5-906; Annotated Code of Maryland			
Date Origin	ally Ad	opted or Last Amended: Adopted October 12, 1992; last amended January 12, 2001		
Purpose:	Se: COMAR 10.13.05 AIDS Education Program for Persons Convicted of Drug/Sex-Related Crimes provides the requirements for the delivery of services by a Substance Abuse and Sexual Offender AIDS Education Program, and outlines the responsibilities of participating agencies, as well as program participants.			
(1) Do to (2) Do to (3) Are (4) Are (1) List the	the regulation the regulation the regulation that the regulation and the review of the regulation that the review of the regulation that the regul	lations continue to be necessary for the public int Yes X No		
de pe D Pr pa w de	epartme erson mecembe ublic Sa articipat ritten coepartme	nts were asked to review the current regulations. Each representative was asked during an inecting to make recommendations regarding additions or deletions to update the regulations. In r 2015, the Department of Health and Mental Hygiene (the Department) invited the Department of fety and Correctional Services (DPSCS) and staff from the 22 local health departments (LHDs) to e in a survey to assess the utility of the regulations. Feedback was received from the DPSCS, and omments were received via email from Harford, Worcester, and Somerset County health		
	•	ner affected agencies that were invited to review the regulations and provide a summary of their n in and input into the review process.		
In	put was	not solicited from any other agencies.		

- (3) Describe the process used to solicit public comment, including:
 - (a) any notice published in the Maryland Register;
 - (b) any notice published in newspapers of general circulation;
 - (c) any notice posted on the unit's website or on a Statewide website created for units to post notices of regulation review;

	The Department posted a notice for public comment on it's website for two weeks. No comments were received as a result of the notice.
(4)	Provide summaries of: (a) all comments received from stakeholders, affected units, or the public; and (b) the adopting authority's responses to those comments.
	LHD staff from Charles, Anne Arundel, Frederick, Baltimore, Harford, Worcester, and Somerset Counties participated in the stakeholder review of COMAR 10.13.05. The general consensus was to amend the regulations due to the lack of available funding to support administrative duties of the program. The Department agreed with LHDs that language could be added to the regulations to specify that program implementation is dependent on available funding. The DPSCS also participated in the review of these regulations and expressed no objections to amending the regulations to reflect that program implementation is contingent upon available funding.
(5)	Describe any inter-unit conflict reviewed and the resolution or proposed resolution of that conflict.
	None identified.
(6)	Provide a summary of any relevant scientific data gathered.
	The last available data for similar programs offered in other States is from the CDC in 1992. There is no current scientific data that would speak to the efficacy of this type of intervention.
(7)	Provide a summary of any relevant information gathered related to the regulations of other states or the federal government.
	This program is a state-specific program; therefore, information is not available from other states or the federal government.
(8)	Provide a summary of any other relevant information gathered.
	Over the past decade, the Centers for Disease Control and Prevention have gradually eliminated the funding needed to support the administrative duties of the AIDS Education Program for Persons Convicted of Drug/Sex-Related Crimes. There is no current scientific data that would speak to the efficacy of this type of intervention. CDC funds were critical to maintaining operations of this program. While enabling statute permits the Department to charge a fee for this program, the nominal fees that would be affordable to those required to attend could not cover the substantial administrative and financial burden (e.g. tracking, paperwork, scheduling, and presentation of course material) of implementing this program. As a result the Department will add language to the regulations that specifies that program implementation is dependent on available funding.
	ler COMAR 01.01.2003.20E(3), does the agency have any existing policy statements, guidelines, or standards by the lied or enforced which should be promulgated as regulations, in accordance with the Administrative Procedure $\frac{1}{2}$ Yes $\frac{1}{2}$ No $\frac{1}{2}$
app	

D. Actions Needed. (State Government Article, §10-135(a)(2)(ix) – (xi), Annotated Code of Maryland) (check all that apply)

no action

X amendment

repeal

repeal and adopt new regulations

reorganization

Summary:

The Department recommends that language be added to COMAR 10.13.05 - AIDS Education Program for Persons Convicted of Drug/Sex-Related Crimes to indicate that this program will be implemented if funding is available. Therefore the following regulations should be amended to include:

- 1. 10.13.05.03 As funding allows, the Department shall:
- 2. 10.13.05.04 As funding allows, the local health department shall:
- 3. 10.13.05.05 As funding allows, the contractor shall:
- 4. 10.13.05.06 An individual attending an SASOE educational session, when funding is made available, shall:

Person performing review:

Jenna McCall, MPH

Title:

Deputy Center Chief

$\begin{array}{c} \textbf{Regulatory Review and Evaluation Act} \\ \textbf{Evaluation Report Form} \\ \textbf{2012}-\textbf{2020} \end{array}$

Chapter Codification: 10.13.08			10.13.08				
Chapter Na	ime:	Sale of	Needles and Syringer	s or Other Paraphernalia			
Authority:	uthority: Health-General Article, §2-104(b), Annotated Code of Maryland						
Date Origii	nally Ad	opted or	Last Amended:	March 6, 2000			
Purpose:	•	•	•				
(1) Do (2) Do (3) Are (4) Are B. Outrea (1) Lis the On S sherry ; eliza DHM Shawi ; mich ; peter DHM DHM	The purpose of this chapter is to allow the sale of needles and syringes or other paraphermalia by a pharmacist only in good faith to patients showing proper identification and indication of need. A. Review Criteria. (State Government Article, \$10-132(1)(i), Annotated Code of Maryland; COMAR 01.01.3002.20E) (1) Do the regulations continue to be necessary for the public interest? Yes x No (2) Do the regulations continue to be supported by statutory authority and judicial opinion? Ye s No (3) Are the regulations obsolete or otherwise appropriate for amendment or repeal? Yes No (4) Are the regulations effective in accomplishing their intended purpose? Yes No 3. Outreach and Research. (State Government Article, \$10-135(a)(2)(i)—(viii), Annotated Code of Maryland) (1) List any stakeholders invited to review the regulations and provide a summary of their participation in and input into the review process. On September 8, 2015 the following stakeholders were emailed regarding the review of COMAR 10.13.08.01: sherry adams@maryland.gov; Paul Ballard -DHMH-; elizabeth.barnard@maryland.gov; alice.bauman@maryland.gov; irma.bevans@maryland.gov; Rianna P. Brown - DHMH-; brownt@ocmemd.org; lbucher@dhmh.state.md.us;erin.butler@maryland.gov; hannah.byron@maryland.gov; Shawn Cain -DHMH-; Sara Cherico -DHMH-; Michael Cimmino -DHMH-; Audrey Clark -DHMH-; michael.conti@maryland.gov; Cheryl B. Cooper -DHMH-; Leon Carlton -DHMH-; Lisa Ellis -DHMH-; Barbara Fagan DHMH-; lisa fassettl@maryland.gov; Rachael Faulkner -DHMH-; david.fowler@maryland.gov; Mary Kay Goetter -						
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; shelly.mintz@maryland.gov; elizabeth.trimble@maryland.gov; jbutler@maryland.gov; rschaefe@miemss.org;tracie.wat kinsrhodes@maryland.gov; lisa.eutsler@maryland.gov; ccoble@nmwda.org; maryjo.childs@maryland.gov; ghhall@dpsc s.state.md.us; loretta.scofield@maryland.gov; sheila.mcdonald@maryland.gov;thomas.vondersmith@maryland.gov; nwol fe@mdot.state.md.us; kwohlgemuth@treasurer.state.md.us; alackington@wcc.state.md.us; marie.razulis@mlis.state.md.us; mdlaw.library@courts.state.md.us; libr@mlis.state.md.us

(2) List any other affected agencies that were invited to review the regulations and provide a summary of their participation in and input into the review process.

No comments from the following agencies:

OHCQ, Board of Physicians, Board of Nursing, Division of Drug Control, DHMH, OAG, University of Maryland.

- (3) Describe the process used to solicit public comment, including:
 - (a) any notice published in the Maryland Register;
 - (b) any notice published in newspapers of general circulation;
 - (c) any notice posted on the unit's website or on a Statewide website created for units to post notices of regulation review;
 - (d) any mailing by the adopting authority; and
 - (e) any public hearing held.
 - (a) A notice was published in the Md R. on June 12, 2015 and July 10, 2015.
 - (b) An article was published in the Spring/Summer 2015 Maryland Board of Pharmacy News.
 - (c) A notice was posted on the Board's website from June 1 August 1, 2015.
- (4) Provide summaries of:
 - (a) all comments received from stakeholders, affected units, or the public; and
 - (b) the adopting authority's responses to those comments.

One comment received. The Board's response is below.

Laurie G. Kuiper Sr. Director, Government Relations Kaiser Foundation Health Plan of Mid-Atlantic States, Inc. 2010 East Jefferson Street Rockville, MD 20852

Dear Ms. Kuiper:

Thank you for submitting comments to the Maryland Board of Pharmacy (the "Board") regarding COMAR 10.13.08 Sale of Needles and Syringes or Other Paraphernalia. The Board is currently reviewing and evaluating COMAR 10.13.08 in accordance with the Regulatory Review and Evaluation Act, State Government Article, §§10-130—10-139, Annotated Code of Maryland.

In your comment you noted that the law in California allows pharmacists to sell an unlimited number of syringes to adults without a prescription. The California law also requires participating pharmacists to meet uniform requirements for the provision of informational materials about safe syringe disposal, drug treatment access and options for testing and treating HIV and Hepatitis. You suggested that the Board perform a study to determine if a law similar to California would increase access to syringes and decrease the sharing of syringes by intravenous drug users, which would decrease the overall risks to public health.

The Board agrees with your comments and concern for the public health of Marylanders. The Board does not see the necessity to perform a study of existing data with respect to syringe access and public health outcomes because existing Maryland law allows the same access to syringes as the California law. The Board has long held that selling syringes to the public in good faith and a showing of indication of need includes the prevention of transmission of disease.

Additionally, the selling or providing of syringes in Maryland is not limited to pharmacists. Other persons may provide syringes to the public such as the Baltimore City Needle Exchange Program.

The Board would like to thank you again for submitting comments regarding COMAR 10.13.08 Sale of Needles and Syringes or Other Paraphernalia, pursuant to the Regulatory Review and Evaluation Act. Should you have questions or additional concerns, please feel free to contact Anna D. Jeffers, Legislation and Regulations Manager at (410) 764-4794.

(5)	Describe a	ny interun	it conflict	t reviewed	and the	resolution	or proposed	d resolution	of that	conflict.

None

(6) Provide a summary of any relevant scientific data gathered.

NA

(7) Provide a summary of any relevant information gathered related to the regulations of other states or the federal government. Below is a synopsis of a memorandum on the law of syringes in other states researched and prepared by Jason Lau, Board of Pharmacy Leg/Reg Intern:

ISSUE

In comparison to Maryland state laws and statutes, how do other state laws regulate the transactions of syringes, needles, and other paraphernalia (collectively "syringes")?

SALE

The Maryland state laws regarding the sale of syringes mandates that the pharmacist ask for proper identification from the patient, inquire into the patient's need, and conduct *bona fides* sales transaction. Other states have imposed higher levels of

restrictions.

California requires purchasers be "18 years of age." Cal. Bus. & Prof. Code § 4145.5 (West). Purchasers must also show that the needle is "solely" for personal use and not just a need. *Id*.

Similarly, Kentucky requires a record of sales of all syringes and such records must include the purchaser's name, address, quantity purchased, date of sale, and the "planned use of such syringes." Ky. Rev. Stat. Ann. § 217.177 (West).

Connecticut imposes a quantity limit, allowing up a maximum of ten syringes to be sold without a prescription. Conn. Gen. Stat. Ann. § 21a65 (West).

Then, there are states where additional materials must be provided or made known upon sale of syringes. This must be done in either written or verbal consultation, which imposes another duty upon the pharmacists to ensure that nonprescription customers must be, under certain circumstances, be counseled.

Hawaii, for example, says that a pharmacist "shall provide written educational material" about how to safely dispose of hazardous waste, like syringes. Haw. Rev. Stat. § 32521 (West).

New Jersey, too, mandates that pharmacists, upon sales of syringes, "shall also be required" make available proper disposal methods for syringes or make known such disposal method programs with extra educational material. N.J. Stat. Ann. § 2C:366.2 (West).

Further, states with relatively simple guidelines for the sale and disposal of syringes, similar to Maryland, offer some guidelines on disposal. New Hampshire, as an example, states clearly how hazardous waste must be stored. Otherwise, they allow for very broad interpretations on all other issues. N.H. Rev. Stat. Ann. § 318:52b.

Thus far, Maryland is one of the few states where there is no mention of disposal within the same statute that covers the sales of syringes.

DISPOSAL

Most states often require pharmacists to provide disposal services to purchasers, offer or make known such disposal services through consultation or notice, or both. New York law expressly states that syringes which are no longer "useable" shall be "crushed, broken, or otherwise rendered inoperable," and while no specific method is outlined,

power is reserved to the state department of health to determine how best to destroy syringes. N.Y. Pub. Health Law § 3381a (McKinney).

North Dakota is similar to New York insofar that it remains simple to allow for broad interpretation but still incorporates a clear destruction clause requiring used syringes to be destroyed. N.D. Cent. Code Ann. § 1903.126 (West)

California pharmacists have discretion in choosing whether to establish a syringe disposal program or "make available...sharps [containers]" to purchasers in addition to providing "written or verbal" consultation to purchasers regarding safe disposal of syringes. Cal. Bus. & Prof. Code § 4145.5 (West).

Hawaii and New Jersey both require extra materials to be made available to purchasers upon sale of syringes. Both states hold their respective health departments responsible for producing extra written educational materials, but in both states, the pharmacist is held responsible for making those materials known to the customer. Haw. Rev. Stat. § 32521 (West); *see also* N.J. Stat. Ann. § 2C:366.2 (West). In both pamphlets by both states, emphasize placing used syringes into a puncture proof, sealable container, and the New Jersey pamphlet goes further by listing several known locations where there is a syringe disposal program. State of Hawaii Department of Health, *Proper Disposal of Home Health Care Waste* (July 2000), *available at*

http://health.hawaii.gov/shwb/files/2013/06/medwaste1.pdf; see also State of New Jersey Department of Health, Safe Syringe Disposal Guide for Home Generated Medical Waste (2008), available at http://www.nj.gov/health/eoh/phss/syringe.pdf. Therefore, there are many states where the purchaser of syringes is made aware of either the proper disposal procedure or of where to acquire and learn of such a procedure.

(8) Provide a summary of any other relevant information gathered.

The Maryland Pharmacy Act does not address disposal of needles and syringes. Other regulations promulgated by the Department of Health and Mental Hygiene (DHMH) indicate that a person shall handle special medical waste in accordance with the requirements of:

A. 29 CFR §1910.1030(d)(4)(iii)(A) and (B), which is incorporated by reference at COMAR 09.12.31; and

- B. COMAR 26.13.12.05 and 26.13.13.
- C. COMAR 10.06.06.03.

Additionally, at the April 18, 2007 Public Board Meeting the Board advised that prevention of transmission of disease is an

acceptable indication of need for the sa	le of needles and syringes.	
), does the agency have any existing policy statem be promulgated as regulations, in accordance with No x	
Has the agency promulgated all reg	gulations required by recent legislation? Yes	x No
Provide explanations of the above	responses, as needed:	
NA		
D. Actions Needed. (State Governme (check all that apply)	ent Article, §10-135(a)(2)(ix) – (xi), Annotated Co	ode of Maryland)
(eneck an that apply)	$\sqrt{\text{no action}}$	
	amendment	
	repeal	
	repeal and adopt new regulations	
	reorganization	
Summary:		
The Board recommended no change	es to COMAR 10.13.08 at the October 21, 2015 F	Public Board Meeting.
	Person performing review:	Anna D. Jeffers
	Title:	Legislation Regulations Manager, Maryland Board of Pharmacy

Chapter Codifi	cation: COMAR 10.13.11					
Chapter Name:	Exemption to Allow Sale of Drugs by Vending Machines					
Authority: Health – General Article §21-1111(c), Annotated Code of Maryland						
Date Originally	Adopted or Last Amended:					
Original	ly adopted on September 15, 1994; Effective Date: October 10, 1994 (21:20 Md.R. 1732)					
Purpose: COMAR 10.13.11 allows the vending machine sale of non-prescription pain relievers by providing exemption to the State's prohibition on the sale of any drug by use of a vending machine under Heat General Article §21-111(b). The authority for the exemption is Health – General Article §21-111 which allows the Secretary of Health and Mental Hygiene by regulation to exempt from the prohibit any commodity if the Secretary finds that the commodity may be dispensed by vending machine with danger to the public health.						
	iteria. (State Government Article, §10-132(1)(i), Annotated Code of Maryland; COMAR 01.01.3002.20E) regulations continue to be necessary for the public interest? Yes X No					
(2) Do the regulations continue to be supported by statutory authority and judicial opinion? Yes X No						
	regulations obsolete or otherwise appropriate for amendment or repeal? Yes No X regulations effective in accomplishing their intended purpose? Yes X No					
	and Research. (State Government Article, §10-135(a)(2)(i)–(viii), Annotated Code of Maryland)					
	y stakeholders invited to review the regulations and provide a summary of their participation in and input in iew process.					
Proto	Coast Vending Supply, Deltona, FL 32725: Anita Przybysz, Owner, 866-544-1976 col, Inc., St. Paul, MN: Doug Lang, Owner, 800-227-5336 f Services, Inc., Maryland: Don Reckerman, Owner, 410-398-7800					
	ager of Arundel Mills Mall, 7000 Arundel Mills Circle, Hanover, MD 21076, 410-540-5110: Condon, General Manager, 410-540-5101					
	y other affected agencies that were invited to review the regulations and provide a summary of their pation in and input into the review process.					
10.13 defir	Maryland Board of Pharmacy ("Board") was invited to participate in the review of COMAR 3.11. The Board reviewed this chapter and recommended that the Secretary provide a nition for "vending machines." This definition should be provided to distinguish "vending nines" from "automated pharmacy kiosks" which are used to accept refill requests and provide					

after-hours prescription pick-up.

(3) Describe the process used to solicit public comment, including:

- (a) any notice published in the Maryland Register;
- (b) any notice published in newspapers of general circulation;
- (c) any notice posted on the unit's website or on a Statewide website created for units to post notices of regulation review;
- (d) any mailing by the adopting authority; and
- (e) any public hearing held.

In an effort to provide interested parties with an opportunity to participate in the review and evaluation of COMAR 10.13.11, a Notice of Opportunity for Public Inspection and Comment was posted on the websites for the Department of Health and Mental Hygiene and DHMH Laboratories Administration. In addition, the names and contact information for the businesses involved with the sale of non-prescription pain medication by vending machine (as noted in #2 above) were obtained from the 2008 regulatory review of 10.13.11 and were also researched and obtained from the internet.

- (4) Provide summaries of:
 - (a) all comments received from stakeholders, affected units, or the public; and
 - (b) the adopting authority's responses to those comments.

There was universal agreement from all stakeholders that the exemption provided by COMAR 10.13.11 regulation should be maintained. This exemption which allows the sale of non-prescription pain relievers by vending machines in single dose quantities (oral form) is useful for both the businesses that operate the vending machines and Maryland consumers.

Direct contact was made with three national companies: Protocol Inc. in Minnesota, East Coast Vending Supply in Florida, and Relief Services in Maryland. These vendors supply vending equipment to many states, including Maryland. A few of the vending machines provided by national distributors have been identified as Medic Aid Vendor, Protocol Medicine Cabinet and Medical Medicine Box. Direct contact was also made with Arundel Mills Mall in Hanover, Maryland where several vending machines containing non-prescription pain relievers are located. The General Manager of Arundel Mills Mall disclosed that medical vending machines throughout the facility sold traditional over-the-counter pain relievers, such as aspirin, Acetaminophen and Ibuprofen.

Overall, over-the-counter drug vending machines provide consumers and businesses alike, with convenient and affordable access to a variety of non-prescription pain medications.

(5)	5) Describe any interunit conflict reviewed and the resolution or proposed resolution of that conflict.							
	None							

(6) Provide a summary of any relevant scientific data gathered.

Not applicable.

(7) Provide a summary of any relevant information gathered related to the regulations of other states or the federal government.

The U.S. Food and Drug Administration, Compliance Policy Guide, Section 450.400 provides that there is no provision under the Federal Food, Drug and Cosmetic Act that prohibits the sale of over-the-counter drug

	(8)	Provide a summary of any other relevant information gathered.
		The sale of non-prescription pain medications by vending machine provides a variety of over-the-counter pain medications that are widely used by consumers, particularly non-steroidal anti-inflammatory drugs (Advil, Motrin, etc.), Aspirin and Acetaminophen.
		National distributors provide vending machines and equipment to local business owners in Maryland, which include shopping malls, grocery stores, hotels, convenience stores, gas stations and airports. The vending machines are both free-standing and/or wall mounted.
		As a result, local owners have been successful since vending machines are a convenient and readily available method for obtaining over-the-counter pain medications.
C.		er COMAR 01.01.2003.20E(3), does the agency have any existing policy statements, guidelines, or standards being lied or enforced which should be promulgated as regulations, in accordance with the Administrative Procedure Act? Yes No X
	Has	the agency promulgated all regulations required by recent legislation? Yes X No
	Prov	vide explanations of the above responses, as needed:
	N	Not applicable.
D.		ons Needed. (State Government Article, §10-135(a)(2)(ix) – (xi), Annotated Code of Maryland) check all that apply) X

reorganization	
Summary:	
COMAR 10.13.11 continues to be essential for the public interest by provide authorize the sale of over-the-counter pain medications through vending convenient method for consumers to obtain over-the-counter pain medication that operate the vending machines and the businesses where vending machines. As for the proposed amendment provided by the Board of Pharmacy to dedistinguish the sale of over-the-counter pain medications from "automated provided the comment and does not believe that there is any likelihood of continuous descriptions."	machines. Chapter .11 provides a s while benefiting both the businesses are located. efine the term "vending machines" to harmacy kiosks," the Department has
Person performing review:	Renee E. Scurry
Title:	Administrator for Regulatory and Administrative Programs

Chapter (Codifica	tion:	10.13.12				
Chapter N	Name:	Impou	undment and Disposal of Drugs and Prescription Records				
Authority	uthority: Health-General Article, §21-1113, Annotated Code of Maryland						
Date Orig	ginally A	Adopted or	r Last Amended: Effective Date: June 24, 2002 (29:12 Md. R. 927)				
Purpose: Allows the Department (DHMH) to impound drugs and prescription records from authorized prescribers and Board permit holders in accordance with Health-General Article, §21:1113, Annotated Code of Maryland.							
A. Review Criteria. (State Government Article, §10-132(1)(i), Annotated Code of Maryland; COMAR 01.01.3002.20 (1) Do the regulations continue to be necessary for the public intere (2) Do the regulations continue to be supported by statutory authority and judicial opinion? Yes X No (3) Are the regulations obsolete or otherwise appropriate for amendment or repeal? Yes No (4) Are the regulations effective in accomplishing their intended purpose? Yes X No B. Outreach and Research. (State Government Article, §10-135(a)(2)(i)–(viii), Annotated Code of Maryland) (1) List any stakeholders invited to review the regulations and provide a summary of their participation in and input the review process. Maryland Board of Physicians Maryland Board of Veterinary Medical Examiners Maryland Board of Podiatric Medical Examiners Maryland Board of Nursing							
	List any other affected agencies that were invited to review the regulations and provide a summary of their participation in and input into the review process.						
	None.						
(; (l) (i)	a) any n b) any n c) any n revie d) any n e) any p	otice publicative publication posteriors, and in the public hearing by ublic hearing to the public hearing by					
	and Me Pharma	ental Hygicacy, Board	the Maryland Register, the Division of Drug Control's website, the Department of Health ene's website and notice submitted to the Board of Physicians, Board of Dentistry, Board of I of Podiatric Medical Examiners, Board of Nursing and Board of Veterinary Medical osting on their websites.				

(4) Provide summaries of:

			stakeholders, affected units, or the public; and ponses to those comments.						
	no longer issue manufa	cturer'	equested the deleting of "manufacturer's permit" from 10.13.12.01B(6), as they is permits. Board of Pharmacy's comment.						
(5)	(5) Describe any interunit conflict reviewed and the resolution or proposed resolution of that conflict reviewed and the resolution or proposed resolution of that conflict reviewed and the resolution or proposed resolution of that conflict reviewed and the resolution or proposed resolution of that conflict reviewed and the resolution or proposed resolution of that conflict reviewed and the resolution or proposed resolution of that conflict reviewed and the resolution or proposed resolution of that conflict reviewed and the resolution or proposed resolution of that conflict reviewed and the resolution or proposed resolution of that conflict reviewed and the resolution of the reviewed and the resolution of the reviewed and the reviewed and the resolution of the reviewed and the reviewed								
	None.								
(6)	Provide a summary of ar	ny rele	vant scientific data gathered.						
	Not applicable.	Not applicable.							
(7)	Provide a summary of ar government.	ny rele	vant information gathered related to the regulations of other states or the federal						
	None.								
(8)	Provide a summary of ar	ny othe	er relevant information gathered.						
	None.								
Has		Ye all reg	ulations required by recent legislation? Yes X No						
	N/A								
	ions Needed. (State Gov check all that apply)	rernme	nt Article, §10-135(a)(2)(ix) – (xi), Annotated Code of Maryland) no action						
		X	amendment						
			repeal						
			repeal and adopt new regulations						
			reorganization						
Summa	ry:								
	only amendment would b 0.13.12.01B(6)(a).	e the r	emoval of "manufacturer's permit" from the definition of permit holder as stated						

Person performing review: Audrey P.

Audrey P. Clark, Chief James W. Polek, Deputy Chief

T 1ft	

Chief and Deputy Chief

Chapter Codification:			COMAR 10.14.03		
Chapter Name: Breas			Cancer Treatment Methods		
Authority:	Неа	alth-Gen	eral Article, §20-113, Annotated Code of Maryland		
Date Origii	nally Ac	lopted or	Last Amended: January 20, 1992		
d) provide and distribute a standard treatment methods including the with each method; and e) provide a statement acknowledg 2) Physicians to: a) provide the standardized written methods to patients within a cert b) obtain patient signature on the act the patient's medical record.		e Departi provide treatm with e provide vsicians te provide metho obtain the par	e a statement acknowledging receipt of information for signature by patients. o: e the standardized written summary of information about breast cancer treatment ds to patients within a certain timeframe; and patient signature on the acknowledgement form provided by the Department to be kept in		
(1) Do (2) Do (3) Are	the regulation the regulation the regulation that the regulation t	ulations of	e Government Article, §10-132(1)(i), Annotated Code of Maryland; COMAR 01.01.3002.20E) continue to be necessary for the public interest? Yes X No continue to be supported by statutory authority and judicial opinion? Yes X No cobsolete or otherwise appropriate for amendment or repeal? Yes No X effective in accomplishing their intended purpose? Yes X No Company N		
B. Outreach and Research. (State Government Article, §10-135(a)(2)(i)–(viii), Annotated Code of Maryland) (1) List any stakeholders invited to review the regulations and provide a summary of their participation in and input the review process. The Department invited comments from: the general public (via notice posted to the Department's website), local Breast and Cervical Cancer Program coordinators and other key contacts at the 24 local health departments, clinical providers participating in the Breast and Cervical Cancer Diagnosis and Treatment Program, members of the Maryland State Council on Cancer Control, members of the Breast Cancer Medical Advisory Committee, members of the Maryland Cancer Collaborative, and other key stakeholders and groups that represent patients and health care providers.					

No other agencies are affected by these regulations, therefore no other agencies were invited to review the

(2) List any other affected agencies that were invited to review the regulations and provide a summary of their

participation in and input into the review process.

- (3) Describe the process used to solicit public comment, including:
 - (a) any notice published in the Maryland Register;
 - (b) any notice published in newspapers of general circulation;
 - (c) any notice posted on the unit's website or on a Statewide website created for units to post notices of regulation review;
 - (d) any mailing by the adopting authority; and
 - (e) any public hearing held.

The Department solicited comments by:

- posting a notice to the Department's website;
- sending email messages to Breast and Cervical Cancer Program coordinators and other key contacts at the local health departments;
- mailing letters to the providers participating in the Breast and Cervical Cancer Diagnosis and Treatment Program;
- emailing members of the Maryland State Council on Cancer Control and announcement at the May 15, 2015 meeting;
- emailing members of the Breast Cancer Medical Advisory Committee; and
- emailing members of the Maryland Cancer Collaborative, which includes key stakeholders and groups that represent patients and health care providers.
- (4) Provide summaries of:
 - (a) all comments received from stakeholders, affected units, or the public; and
 - (b) the adopting authority's responses to those comments.

No comments were received.

(5) Describe any interunit conflict reviewed and the resolution or proposed resolution of that conflict.

No inter-unit conflicts identified.

(6) Provide a summary of any relevant scientific data gathered.

The breast cancer treatment methods summary information provided by the Department includes a booklet created by the National Cancer Institute (NCI) titled "What You Need To Know About Breast Cancer" (http://www.cancer.gov/publications/patient-education/WYNTK_breast.pdf). The booklet covers: basics about breast anatomy and breast cancer; treatments for breast cancer, including taking part in cancer treatment research studies; and reconstruction after mastectomy. The booklet refers to the NCI website for additional information (http://www.cancer.gov/types/breast). NCI is the U.S. government's principal agency for cancer research, and is mandated by U.S. law to disseminate information about cancer and cancer research.

(7) Provide a summary of any relevant information gathered related to the regulations of other states or the federal government.

A national scan of existing state statutes and regulations pertaining to breast cancer treatment methods summary information was conducted using internet searches and historical CDC documents as points of

(8)	Provide a summary of any other relevant information gathered.
	No other relevant information was gathered.
	er COMAR 01.01.2003.20E(3), does the agency have any existing policy statements, guidelines, or standards being lied or enforced which should be promulgated as regulations, in accordance with the Administrative Procedure Active Yes No X
	the agency promulgated all regulations required by recent legislation? Yes X No Vide explanations of the above responses, as needed:
N	No recent legislation has required promulgation of regulations.
	ons Needed. (State Government Article, §10-135(a)(2)(ix) – (xi), Annotated Code of Maryland) check all that apply) X no action
	repeal
	repeal and adopt new regulations
	reorganization
Summar	y:
scan	ments were solicited from stakeholders regarding COMAR 10.14.03; no comments were received. A national of similar statutes and regulations revealed no evidence to suggest a need for revision or repeal of the existing ations. It is recommended that no action be taken at this time.
	Person performing review: Sarah Conolly Hokenmaier
	Title:

Deputy Director, Center for Cancer Prevention and

Control

Chapter Codification: COMAR 10.14.04
Chapter Name: Breast Cancer Program
Authority: Health-General Article, §20-116, Annotated Code of Maryland
Date Originally Adopted or Last Amended: November 10, 2003
Purpose: To establish the requirements for participating medical providers; set criteria for applicant eligibility; outline services covered; and delineate the responsibilities of the Department and local health departments for breast cancer screening, diagnosis, and treatment services under the Breast Cancer Program.
A. Review Criteria. (State Government Article, §10-132(1)(i), Annotated Code of Maryland; COMAR 01.01.3002.20E) (1) Do the regulations continue to be necessary for the public interest? Yes X No (2) Do the regulations continue to be supported by statutory authority and judicial opinion? Yes X No (3) Are the regulations obsolete or otherwise appropriate for amendment or repeal? Yes No (4) Are the regulations effective in accomplishing their intended purpose? Yes X No B. Outreach and Research. (State Government Article, §10-135(a)(2)(i)—(viii), Annotated Code of Maryland) (1) List any stakeholders invited to review the regulations and provide a summary of their participation in and input in the review process.
The Department invited comments from: the general public (via notice posted to the Department's website), local Breast and Cervical Cancer Program coordinators and other key contacts at the 24 local health departments, clinical providers participating in the Breast and Cervical Cancer Diagnosis and Treatment Program, members of the Maryland State Council on Cancer Control, members of the Breast Cancer Medical Advisory Committee, members of the Maryland Cancer Collaborative, and other key stakeholders and groups that represent patients and health care providers.
(2) List any other affected agencies that were invited to review the regulations and provide a summary of their participation in and input into the review process.
No other agencies are affected by these regulations; therefore no other agencies were invited to review the regulations.

- (3) Describe the process used to solicit public comment, including:
 - (a) any notice published in the Maryland Register;
 - (b) any notice published in newspapers of general circulation;

- (c) any notice posted on the unit's website or on a Statewide website created for units to post notices of regulation review:
- (d) any mailing by the adopting authority; and
- (e) any public hearing held.

The Department solicited comments by:

- posting a notice to the Department's website;
- sending email messages to Breast and Cervical Cancer Program coordinators and other key contacts at the local health departments;
- mailing letters to the providers participating in the Breast and Cervical Cancer Diagnosis and Treatment Program;
- emailing members of the Maryland State Council on Cancer Control and announcement at the May 15, 2015 meeting;
- emailing members of the Breast Cancer Medical Advisory Committee; and
- emailing members of the Maryland Cancer Collaborative, which includes key stakeholders and groups that represent patients and health care providers.
- (4) Provide summaries of:
 - (a) all comments received from stakeholders, affected units, or the public; and
 - (b) the adopting authority's responses to those comments.

No comments were received.

(5) Describe any interunit conflict reviewed and the resolution or proposed resolution of that conflict.

No inter-unit conflicts identified.

(6) Provide a summary of any relevant scientific data gathered.

An internet scan of relevant scientific data related to statewide breast cancer programs was conducted. Many recent scientific articles have been published regarding the benefits and successes of the National Breast and Cervical Cancer Early Detection Program, the federal Centers for Disease Control and Prevention Program which provides funding to the Maryland Breast Cancer Program defined in COMAR 10.14.04. One recent article (available at:

<u>file:///P:/Regulations%208%20Year%20Review/National%20Breast%20and%20Cervical%20Cancer%20Early%20Detection%20Program%20in%20the%20Era%20of%20Health%20Reform.html</u>) specifically outlines the continued need for the Program in the era of health care reform. In general, no evidence was found to substantiate revisions to Maryland COMAR or statute for breast cancer programs.

(7) Provide a summary of any relevant information gathered related to the regulations of other states or the federal government.

A national scan of existing state statutes and regulations pertaining to breast cancer programs was conducted using internet searches and historical CDC documents as points of reference. In general, statutes and regulations relating to breast cancer programs are similar from state to state and were enacted starting in the early 1990's through the early 2000's with minimal revisions since enactment. In general, no evidence was found to substantiate revisions to Maryland COMAR or statute for breast cancer programs.

(8) Provide a summary of any other relevant information gathered.

No other relevant information was gathered.

C. Under COMAR 01.01.2003.20E(3), does the agency have any existing policy statem applied or enforced which should be promulgated as regulations, in accordance with Yes No X	
Has the agency promulgated all regulations required by recent legislation? Yes	X No
Provide explanations of the above responses, as needed:	
No recent legislation has required promulgation of regulations.	
 D. Actions Needed. (State Government Article, §10-135(a)(2)(ix) – (xi), Annotated Co (check all that apply) X no action 	de of Maryland)
amendment	
repeal	
repeal and adopt new regulations	
reorganization	
Summary:	
Comments were solicited from stakeholders regarding COMAR 10.14.04; no comment scan of scientific data and similar statutes and regulations revealed no evidence to sugg repeal of the existing regulations. It is recommended that no action be taken at this time.	est a need for revision or
Person performing review:	Sarah Conolly Hokenmaier
Title:	Deputy Director, Center for Cancer Prevention and Control

Chapter Co	dification	on:	COMAR 10.14.06
Chapter Na	me:	Cig	arette Restitution Fund Program
Authority:	Star	te Go	vernment Article, §10-130—10-139, Annotated Code of Maryland
Date Origin	nally Ad	lopted	or Last Amended: January 15, 2007
Purpose:			the financial eligibility for individuals to receive cancer treatment services and tobacco oducts under the Cigarette Restitution Fund Program.
(1) Do (2) Do	the regu	ılatior ılatior	ate Government Article, §10-132(1)(i), Annotated Code of Maryland; COMAR 01.01.3002.20E) as continue to be necessary for the public interest? Yes X No secontinue to be supported by statutory authority and judicial opinion? Yes X No second no obsolete or otherwise appropriate for amendment or repeal? Yes X No Second no obsolete or otherwise appropriate for amendment or repeal?
			ns effective in accomplishing their intended purpose? Yes X No Arch. (State Government Article, §10-135(a)(2)(i)–(viii), Annotated Code of Maryland)
	t any sta review		lders invited to review the regulations and provide a summary of their participation in and input into ss.
D	epartm	ent's	nt invited comments from: the general public (the Department posted a notice to the website), Health Officers, Local Health Department and Baltimore City Academic Local Cigarette Restitution Fund Programs.
	•		fected agencies that were invited to review the regulations and provide a summary of their and input into the review process.
tł		ette R	cies were invited to review the regulations since the regulations impact the implementation of estitution Fund Program by the Local Health Departments and Baltimore City Academic lealth.
(a)	any not	ice pu	cess used to solicit public comment, including: ablished in the Maryland Register; ablished in newspapers of general circulation;

(c) any notice posted on the unit's website or on a Statewide website created for units to post notices of regulation

- (d) any mailing by the adopting authority; and
- (e) any public hearing held.

review;

The Department solicited comments by:

- posting a notice to the Department website;
- publishing in the Maryland Register;
- sending an email message to Local Health Officers on July 15, 2015;
- sending an email message (on July 15, 2015) to Local Health Department and Baltimore City Academic Local Public Health Cigarette Restitution Fund Program coordinators and contractors; and
- making an announcement on the June 18, 2015 Local Health Department Cigarette Restitution Fund Program teleconference.
- (4) Provide summaries of:
 - (a) all comments received from stakeholders, affected units, or the public; and
 - (b) the adopting authority's responses to those comments.

Comments received were not substantive and were supportive of the use of funds to pay for cancer treatment. It was also recommended that DHMH clarify in program implementation guidance that local health departments can use net income for eligibility as 10.14.06.05 regulation allows the choice. The Department responded that because the Department of Legislative Services audit requires consistent criteria for eligibility for all local health departments, only gross income will be used and the regulation will be amended accordingly.

(5) Describe any inter-unit conflict reviewed and the resolution or proposed resolution of that conflict.

No inter-unit conflicts identified.

(6) Provide a summary of any relevant scientific data gathered.

No relevant scientific data was identified or gathered.

(7) Provide a summary of any relevant information gathered related to the regulations of other states or the federal government.

No relevant information from other states or the federal government was gathered due to the Cigarette Restitution Fund Program being unique to Maryland.

(8) Provide a summary of any other relevant information gathered.

The Department gathered Department of Legislative Services audit findings/reports specifically related to financial eligibility for the Cigarette Restitution Fund Program. Additionally, the Department gathered all Health Officer communications (Health Officer Memos) relating to the Cigarette Restitution Fund Program financial eligibility for cancer treatment. Health Officer Memos are communications developed by the Department to provide guidance, clarification, and other information about specific aspects of the Cigarette Restitution Fund to Health Officers, Local Health Department Cigarette Restitution Fund Programs, and contractors. The Department also reviewed the 2015 Non-Chargeable List.

C. Under COMAR 01.01.2003.20E(3), does the agency have any existing policy statements, guidelines, or standards being applied or enforced which should be promulgated as regulations, in accordance with the Administrative Procedure Act?

Yes	No	
Has the agency promulgated all regulations	required by recent legislation? Yes	X No
Provide explanations of the above response	s, as needed:	
No recent legislation has required promu	algation of regulations.	
D. Actions Needed. (State Government Article (check all that apply)X	e, §10-135(a)(2)(ix) – (xi), Annotated Co no action amendment repeal repeal and adopt new regulations reorganization	de of Maryland)
Summary:		
COMAR 10.14.06 are relevant as they provi and tobacco cessation services to local Cigar Departments. The Department will be amen- was provided to the local Cigarette Restitution Legislative Services' audits of the Program.	ette Restitution Fund Programs implement ding the existing regulations to align them	ated through the Local Health with current practice, which
		Donna Gugel, MHS
	Person performing review:	Dollila Gugel, MHS
	Title:	Deputy Director, Prevention and Health Promotion Administration/Director, Cigarette Restitution Fund Program

Chapter Co	odificatio	on:	10.50.01	
Chapter Na	ame:	Tissue	Banks	
Authority:	Hea	ılth-Gen	eral Article, 17-304,	Annotated Code of Maryland
Date Origi	nally Ad	opted or	Last Amended:	January 9, 2012
Purpose:	docum 1) Star	nents: ndards fo	f this proposal is to a or Tissue Banking; an or Blood Banks and T	
				, §10-132(1)(i), Annotated Code of Maryland; COMAR 01.01.3002.20E) ary for the public interest? Yes X No
(2) Do	the regu	llations o	continue to be support	ted by statutory authority and judicial opinion? Yes X No appropriate for amendment or repeal? Yes X No shing their intended purpose? Yes X No
(1) Li		akeholde	ers invited to review t	the Article, §10-135(a)(2)(i)–(viii), Annotated Code of Maryland) the regulations and provide a summary of their participation in and input into
t	Administ his prop	ration, a	nd the Laboratory Aconged. The LAC incl	oposed regulations from OHCQ surveyors, the Laboratories dvisory Committee LAC) to assist in the development and review of uded representatives from various specialties: Pathology, Pharmacy, y, Consumer, Internal Medicine, and Family Practices.
	•		eted agencies that wer	re invited to review the regulations and provide a summary of their process.
t		sed regu		Laboratories Administration Committee (LAC) provided comments on the proposed regulations were discussed at the quarterly LAC
(a) (b) (c) (d)	any not) any not) any not review	ice publice publice poste;;	ished in the Maryland ished in newspapers of ed on the unit's websit the adopting authority	of general circulation; ite or on a Statewide website created for units to post notices of regulation

(a) N/A; (b) N/A; (c) N/A; (d) N/A; (e) N/A
The LAC's quarterly meeting facilitated by the Labs Administration was used as an informal means to solicit

(4) Provide summaries of:(a) all comments received from stakeholders, affected units, or the public; and(b) the adopting authority's responses to those comments.
(a) Updating the incorporation by reference documents was a consensus reached decision of the LAC. In addition to comments supporting the updating of the two reference documents, a commenter suggested amending the list of required tests to minimize disease transmission. Upon further review, the updated American Association of Blood Banks (AABB) approved reference documents matches the list referenced in COMAR 10.50.01.11A. The LAC members agreed that as the AABB updates the reference materials and standards, they will update the regulations accordingly.
 (b) OHCQ agreed with the submitted comment to update the reference documents and intends to amend COMAR 10.50.01.04. Dr Newby wanted 10.50.01.11 (A) to read "AATB Section D Required Infectious Disease Tests, current edition." Since we cannot amend the regs to "current" edition but are using specific editions in this case 13th edition. I reviewed the section and it is the same disease testing listed as our current regs. I think he was worried some new requirement would be added in the future and it would be missed. I think we can monitor for those changes if they occur and then amend the regulation accordingly. (5) Describe any interunit conflict reviewed and the resolution or proposed resolution of that conflict.
There were no inter-unit conflicts for the proposed regulation change. All parties were in agreement.
(6) Provide a summary of any relevant scientific data gathered.
No scientific data was gathered as the suggested change is to the incorporation by reference materials. All members agreed that the standards in the updated version were the standards that needed to be updated in the regulations.
(7) Provide a summary of any relevant information gathered related to the regulations of other states or the federal government.
The Tissue and Blood Bank regulations of New York and California were reviewed and discussed among the LAC. State standards, tissue types tested, and personnel qualifications were compared among the states. New York and California's regulations were comparable to Maryland and referenced the same standards.
(8) Provide a summary of any other relevant information gathered.
The expertise of the members of the LAC was utilized in addition to researching the regulations of other states.
Under COMAR 01.01.2003.20E(3), does the agency have any existing policy statements, guidelines, or standards bein applied or enforced which should be promulgated as regulations, in accordance with the Administrative Procedure Ac Yes No X
Has the agency promulgated all regulations required by recent legislation? Yes X No
Provide explanations of the above responses, as needed:
N/A

C.

(check all that apply)		ent Article, §10-135(a)(2)(ix) – (xi), Annotated Code of Maryland)
11 3/		no action
	<u>X</u>	amendment
		repeal
		repeal and adopt new regulations
		reorganization
Summary:		
.04 Incorporation by Refe	rence.	
G, H, J, K, L, and M1-8 on	nking (/	American Association of Tissue Banks, [2002] 13th Edition), Sections C, D, E, F,
B. Documents Incorporated (1) Standards for Tissue Ba G, H, J, K, L, and M1-8 on	nking (/	American Association of Tissue Banks, [2002] <i>13th</i> Edition), Sections C, D, E, F, Transfusion Services (American Association of Blood Banks, [2003] <i>29th</i>
B. Documents Incorporated (1) Standards for Tissue Ba G, H, J, K, L, and M1-8 on (2) Standards for Blood Bar	nking (/	
B. Documents Incorporated (1) Standards for Tissue Ba G, H, J, K, L, and M1-8 on (2) Standards for Blood Bar Edition);	nking (/	Transfusion Services (American Association of Blood Banks, [2003] 29th
B. Documents Incorporated (1) Standards for Tissue Ba G, H, J, K, L, and M1-8 on (2) Standards for Blood Bar Edition);	nking (/	