

## Article - Health - General

### §13–806. IN EFFECT

- (a) The Commission shall assess:
- (1) The extent and amount of uncompensated care delivered by providers;
  - (2) The level of and changes in wages paid by providers to direct support workers, including the source of revenue for wages paid by providers;
  - (3) The ability of providers to operate on a solvent basis in the delivery of effective and efficient services that are in the public interest;
  - (4) The incentives and disincentives:
    - (i) Incorporated in the rate setting methodologies utilized and proposed by the Behavioral Health Administration and the Developmental Disabilities Administration; and
    - (ii) In alternative methodologies;
  - (5) How incentives to provide quality care can be built into a rate setting methodology; and
  - (6) The impact of changes in regulations that impact on the costs of providers and whether the rates have been adjusted to provide for any increased costs associated with the regulatory changes.
- (b) The Commission shall:
- (1) Determine a weighted average cost structure of providers by:
    - (i) Studying the categories of costs used by the Department of Budget and Management in the budgets of units of State government; and
    - (ii) Assessing the average cost structure of providers using the categories of costs used by the Department of Budget and Management for units of State government;
  - (2) With respect to the Developmental Disabilities Administration, review the data reported in the Developmental Disabilities Administration annual cost reports and use the data to develop relative performance measures of providers; and
  - (3) Evaluate proposed regulatory changes by the Department, the Developmental Disabilities Administration, and the Behavioral Health Administration that affect the rates paid or the rate structure.

13–806. // EFFECTIVE JUNE 30, 2016 PER CHAPTERS 497 AND 498 OF 2010 //

// EFFECTIVE UNTIL SEPTEMBER 30, 2016 PER CHAPTER 94 OF 2011 //

- (a) The Commission shall assess:
- (1) The extent and amount of uncompensated care delivered by providers;
  - (2) The level of and changes in wages paid by providers to direct support workers, including the source of revenue for wages paid by providers;
  - (3) The ability of providers to operate on a solvent basis in the delivery of effective and efficient services that are in the public interest;
  - (4) The incentives and disincentives:
    - (i) Incorporated in the rate setting methodologies utilized and proposed by the Behavioral Health Administration and the Developmental Disabilities Administration; and
    - (ii) In alternative methodologies;
  - (5) How incentives to provide quality care can be built into a rate setting methodology; and
  - (6) The impact of changes in regulations that impact on the costs of providers and whether the rates have been adjusted to provide for any increased costs associated with the regulatory changes.
- (b) The Commission shall:
- (1) Develop or refine methodologies for calculating rate update factors for rates paid by the Developmental Disabilities Administration and the Behavioral Health Administration and recommend annual rate update factors that use the methodologies that are developed;
  - (2) With respect to the Developmental Disabilities Administration, review the data reported in the Developmental Disabilities Administration annual cost reports and use the data to develop relative performance measures of providers; and
  - (3) Evaluate proposed regulatory changes by the Department, the Developmental Disabilities Administration, and the Behavioral Health Administration that affect the rates paid or the rate structure.