SENATE BILL 28

O3, J1 2lr1201 CF HB 80 (PRE-FILED) By: Senators Kelley, Augustine, Beidle, and Feldman Benson, Feldman, and Klausmeier Requested: November 1, 2021 Introduced and read first time: January 12, 2022 Assigned to: Finance Committee Report: Favorable with amendments Senate action: Adopted Read second time: February 17, 2022 CHAPTER AN ACT concerning Home- and Community-Based Services Waiver - Participation and Applications FOR the purpose of altering the required contents of the home- and community-based services waiver submitted by the Maryland Department of Health to the Centers for Medicare and Medicaid Services; requiring the Department to send an application to a certain number of individuals each month, if the Department maintains a waiting list or registry for the waiver; requiring the Department to apply to the Centers for Medicare and Medicaid Services for an amendment to the home- and community-based services waiver; and generally relating to the home- and community-based services waiver. BY repealing and reenacting, with amendments, Article – Health – General Section 15–132 Annotated Code of Maryland (2019 Replacement Volume and 2021 Supplement) SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

<u>Underlining</u> indicates amendments to bill.

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15–132.

Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.

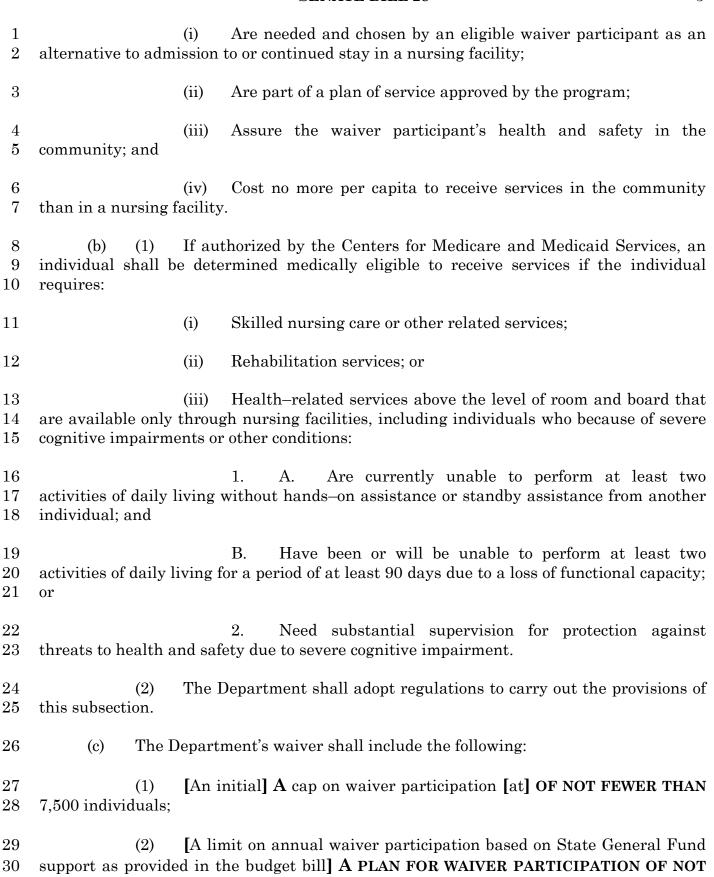
Article - Health - General



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that:

In this section the following terms have the meanings indicated. 1 (a) (1) "Assisted living program" has the meaning stated in § 19–1801 of this 2 (2) 3 article. 4 "Assisted living services" means services provided by an assisted living program as defined in regulations adopted by the Department. 5 6 "Case management services" means services that assist waiver eligible **(4)** individuals in gaining access to needed waiver services and other needed medical, social, 7 8 housing, and other supportive services. 9 "Health related care and services" includes: (5)24-hour supervision and observation by a licensed care provider; 10 (i) 11 (ii) Medication administration; 12(iii) Inhalation therapy; 13 Bladder and catheter management; (iv) 14 Assistance with suctioning; or (v) 15 Assistance with treatment of skin disorders and dressings. (vi) "Home health care services" means those services defined in § 19-401 16 of this article and in 42 C.F.R. 440.70. 17 18 "Medically and functionally impaired" means an individual who is 19 assessed by the Department to require services provided by a nursing facility as defined in 20 this section, and who, but for the receipt of these services, would require admission to a nursing facility within 30 days. 2122"Nursing facility" means a facility that provides skilled nursing care 23and related services, rehabilitation services, and health related care and services above the 24level of room and board needed on a regular basis in accordance with § 1919 of the federal 25 Social Security Act. 26 "Waiver" means a home- and community-based services waiver under § 1915(c) of the federal Social Security Act, submitted by the Department to the Centers for 2728 Medicare and Medicaid Services. 29 "Waiver services" means the services covered under an approved waiver (10)



(3) Financial eligibility criteria which include:

FEWER THAN 7,500 INDIVIDUALS;

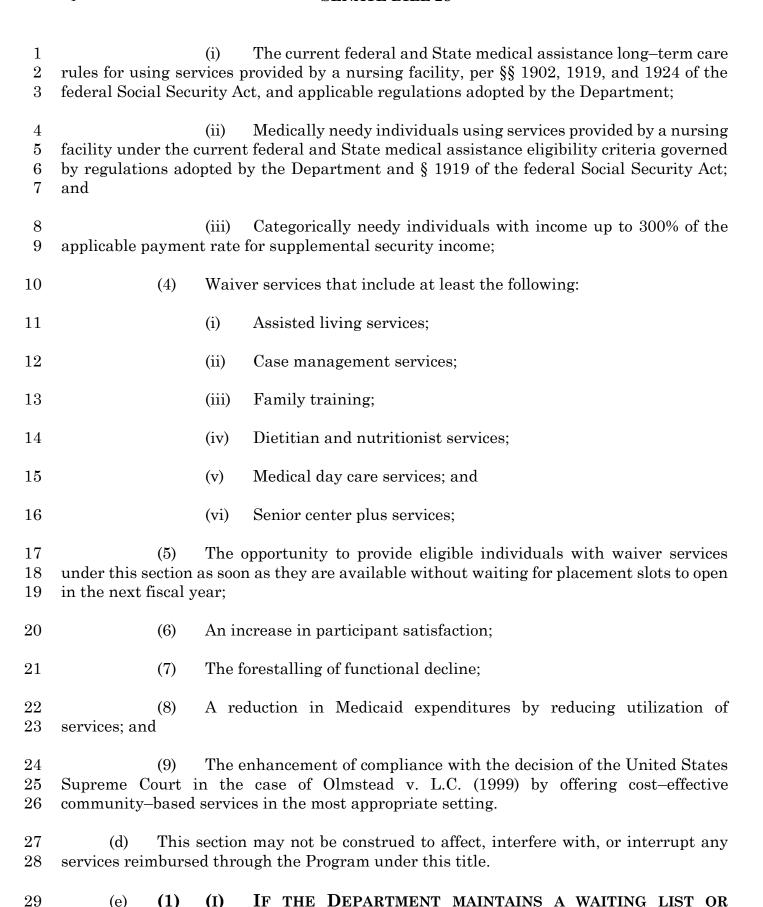
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(e)

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(I)



REGISTRY, EACH MONTH THE DEPARTMENT SHALL SEND A WAIVER APPLICATION:

1 2 3	1. If there are fewer than 600 individuals on the waiting list or registry, to all individuals on the waiting list or registry; and
4 5 6	2. If there are 600 or more individuals on the waiting list or registry, to at least 600 individuals on the waiting list or registry.
7 8	(II) A WAIVER APPLICATION SENT UNDER SUBPARAGRAPH (I) OF THIS PARAGRAPH SHALL STATE CLEARLY AND CONSPICUOUSLY THAT:
9 10	1. The applicant must submit the application within 6 weeks after receiving the application; and
11 12 13	2. THE APPLICANT IS REQUIRED TO MEET ALL OF THE ELIGIBILITY CRITERIA FOR PARTICIPATION IN THE WAIVER WITHIN 6 MONTHS AFTER SUBMITTING THE APPLICATION.
14 15 16	(2) If a person determined to be eligible to receive waiver services under this section desires to receive waiver services and an appropriate placement is available, the Department shall authorize the placement.
17 18 19	(f) The Department, in consultation with representatives of the affected industry and advocates for waiver candidates, and with the approval of the Department of Aging, shall adopt regulations to implement this section.
20 21 22 23 24	SECTION 2. AND BE IT FURTHER ENACTED, That on or before October 31, 2022, and thereafter as necessary, the Maryland Department of Health shall apply to the Centers for Medicare and Medicaid Services for an amendment to the home—and community—based waiver under § 1915(c) of the federal Social Security Act to increase the waiver cap size to be consistent with Section 1 of this Act.
25 26	SECTION $\stackrel{2}{=}$ 3. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2022.