

LeadingAge Maryland - 2022 - SB 636 - Waivers - Fi

Uploaded by: Aaron Greenfield

Position: FAV



576 Johnsville Road
Sykesville, MD 21784

TO: Budget and Taxation Committee
FROM: LeadingAge Maryland
SUBJECT: Senate Bill 636, Maryland Department of Health - Waiver Programs - Waitlist Reduction (End the Wait Act)
DATE: March 2, 2022
POSITION: **Favorable**

LeadingAge Maryland supports Senate Bill 636, Maryland Department of Health - Waiver Programs - Waitlist Reduction (End the Wait Act).

LeadingAge Maryland is a community of more than 135 not-for-profit aging services organizations serving residents and clients through continuing care retirement communities, affordable senior housing, assisted living, nursing homes and home and community-based services. Our mission is to expand the world of possibilities for aging in Maryland. We partner with consumers, caregivers, researchers, public agencies, faith communities and others who care about aging in Maryland.

This legislation requires the Maryland Department of Health (MDH) to develop a plan to reduce the waitlists for several waiver programs by 50%, including the home and community based option waiver, beginning in fiscal year 2024. The MDH plan must address measures to recruit and retain providers for each waiver program, any changes in reimbursement rates for services provided under the waiver programs, the expected time frame for reducing the waitlist for each waiver program by 50% and the projected cost of the measures to be implemented under the plan. Beginning in fiscal year 2024, the Governor must include in the annual budget bill sufficient funds to carry out this section.

For some time, LeadingAge Maryland has urged expanded access to the Home and Community-Based Waiver which provides community services and supports to enable older adults and people with disabilities to live in their own homes. Maryland residents age 18 and over who need assistance with activities of daily living, such as bathing, grooming, dressing and mobility can apply.

There are both financial and health benefits of receiving care in the community. In fact, a 2013 study examined the impacts the length of home and community-based services wait lists on a variety of factors. The study notes that older applicants in general were disproportionately impacted by longer wait list times, and that “those with short wait times (versus long) had a 48 percent lower risk of having a long-term nursing home stay in the three years after application and had lower average Medicaid spending on long-term stays of \$111 per person per month”. (2013, [ASPE](#)). According to the Kaiser Family Foundation, in the US, individuals on these wait lists wait an average of 30 months before gaining access to services and supports, although there is significant variation based on the type of care or support an individual is seeking – some waiting more than 66 months (2019, [Kaiser Family Foundation](#)).

The Maryland Medicaid Home and Community Based Services Options Waiver (HCBOW) program can provide the needed services to Marylanders with disabilities at home. Maryland has permission from the federal government to grant 6,348 waivers for home and community-based services, but it only enrolls 4,286 residents. More than 25,000 residents sit on wait lists to be approved. In 2019, HCBOW served less than 5,700 individuals. When the MDH readjusts HCBOW program availability every few years, it does not count eligible people on the 8-year, 25,000-person waiting list. As long as Marylanders are unable to live at home and bypass the lengthy waiting list, their only option is entering a nursing home. This is costly and unnecessary. Senate Bill 636 ensures that the State is proactively addressing the significant needs of individuals on the waitlist.

For these reasons, LeadingAge Maryland respectfully requests a favorable report for Senate Bill 636.

For additional information, please contact Aaron J. Greenfield, 410.446.1992

SB636 Childrens Guild Favorable.pdf

Uploaded by: Abby Brandt

Position: FAV



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410.444.3800 | CHILDRENSGUILD.ORG

The Honorable Guy Guzzone
Chair, Senate Budget and Taxation Committee
3 East, Miller Senate Office Building
Annapolis, Maryland 21401

March 2, 2022

**Senate Bill 636 – Maryland Department of Health - Waiver Programs -
Waitlist Reduction (End the Wait Act)- FAVORABLE**

Dear Chair Guzzone, Vice-Chair Rosapepe and members of the committee,

I am writing as the Chief Legal Officer of The Children's Guild to express our strong support of SB636 Waitlist Reduction (End the Wait Act). The Children's Guild is a leading Mid-Atlantic nonprofit organization serving children, families, and child-serving organizations dedicated to transforming the way America cares for and educates its children through education, career services, and behavioral health.

Since our inception in 1953, The Children's Guild has been a leader and pioneer in special education. We have seen firsthand that a lack of needed services has a drastic impact on the entire family, due to the demanding physical, emotional, and financial costs associated with providing for a special needs child without support. Further, we have clear evidence that *early intervention is critical* for these children – yet Maryland's current waitlist for services is a major barrier to providing resources during the most important years of a child's development. By way of example, one child that we serve was waitlisted in preschool, did not become eligible for services until eighth

grade, and is still waiting on services to begin. A 12-year-old child was denied services because questions regarding his independence originally answered at age 5 were no longer accurate. These tremendous gaps in services also deprived families of respite care and the children of after-care opportunities that would assist their development and social skills.

Additionally, even after the wait is over and a child has been accepted to receive services, their services may be minimal due to the limited programs available. This bill will allow more funding for programs offering services and hopefully preventing children from getting off one wait list and then put onto another. Proper funding to provide necessary services for training, after school programs, and transportation are vital to give individuals with special needs opportunities to participate in the community and extra-curricular activities that they may not be able to access through traditional community resources.

Maryland must do better. Reducing the wait for access to needed services is integral to succeeding in taking care of Maryland's children and families.

Sincerely,

A handwritten signature in black ink that reads "Kimberly Neal". The signature is written in a cursive, flowing style.

Kimberly H. Neal, Esquire
Chief Legal Officer

SB636_The Arc Maryland_Support.pdf

Uploaded by: Ande Kolp

Position: FAV



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Senate Budget and Taxation Committee
March 2, 2022

**SB 636: Maryland Department of Health - Waiver Programs - Waitlist Reduction Act
(End the Wait Act)**

Position: Support

The Arc Maryland is the largest statewide advocacy organization dedicated to protecting and advancing the rights and quality of life of people with intellectual and developmental disabilities. The Arc Maryland supports SB 636, which requires the Department of Health to develop plans to reduce the waitlists for waiver programs by 50%, and beginning in FY 2024, requires the Governor to include sufficient funds to carry out the plans in the annual budget.

Background on waiver services: People with intellectual and developmental disabilities often need some degree of home and community based services (HCBS) which provides them with assistance to eat, to dress, for personal hygiene, and for managing health care or finances. For people with limited incomes, these services can only be obtained through Medicaid. Unfortunately, in Maryland the Medicaid HCBS programs currently have long waiting lists.

Medicaid is technically an institutional insurance. It is used for nursing homes and other long-term care services. The Medicaid waiver services in Maryland (meaning that the requirement that these services must be provided in an institutional setting has been “waived”) support people to receive these services in the community (HCBS). **While the institutionally-based services are provided as they are needed by a person--there are no waiting lists--there ARE waiting lists for the HCBS services.** That is because in Medicaid, HCBS services are considered “optional.” This is what we term the “institutional bias” of Medicaid that The Arc and others have advocated for seven decades to change.

This institutional bias persists even though it is shown in study after study that HCBS services are more cost effective than institutionally-based services, and promote the best quality of life.

The majority of The Arc members are people with developmental disabilities, parents or family members of people with developmental disabilities, and providers of The Arc across the state who collectively support more than 30% of people with IDD who receive services funded by through the Autism Waiver and the Maryland Developmental Disabilities Administration. Thousands more Marylanders access The Arc’s education, training, and information and referral services. These individuals and/or their families want and need services and supports to live, learn, work, and play alongside Marylanders without disabilities, but are waiting in long lines for these services. The wait and lack of services and supports impacts the ability of people with disabilities and their families tremendously.

Close to 4,000 people are on the Developmental Disabilities Community Pathways Waiting List with some waiting for decades to access needed services. Over 6,000 children and their families are waiting on the Autism Waiver Registry, some for as many as 10 years.



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When the Autism Waiver Program was created in 2001 it was intended to be a program of Early Intervention, designed to provide children and families to access services early, thus preventing lifetime reliance on more extensive, and expensive state services and supports. Unfortunately, the funding for this waiver has not kept pace with the need and many who enter the waiver registry as a child wait so long for services they age out of eligibility before their “number” even comes up.

It is clear that Maryland needs to do more to prioritize the availability of services and supports for children and adults with disabilities and their families. We believe SB 636 will accomplish that.

The clarifying amendments presented for this bill are important to ensure the plans created by the department examine existing and needed capacity of providers in Maryland, and rates for services to ensure they are sufficient to provide quality services and supports. The COVID-19 pandemic has exacerbated the professional caregiver (Direct Support Professional) workforce crisis. Direct support professionals play a critical role in people’s lives and plans for expansion of services must include measures to build the capacity of providers, measures to recruit and retain providers and direct support professionals, and changes to reimbursement rates.

The Arc Maryland supports SB636 and urges the Committee to return a favorable report.

Please contact: Ande Kolp, Executive Director of The Arc Maryland
akolp@thearcmd.org

SB636.pdf

Uploaded by: Beth Wiseman

Position: FAV

TESTIMONY IN IN FAVOR OF S.B. 636

Maryland Department of Health – Waiver Programs – Waitlist Reduction

(End the Wait Act)

As an advocate for seniors and people with a disability, I was very pleased to see this Bill.

There is not much to say, except these wait lists have gone on for too many years.

I, therefore, say “Me too” as we would have said in previous, in person testimonies before the Pandemic.

Thank you.

Beth Wiseman

1216 Glenback Avenue

Pikesville, Maryland 21208

410-484-6866

SB0636_FAV_LifeSpan, MAADS, MNCHA_MDH - Waiver Pro

Uploaded by: Danna Kauffman

Position: FAV



Managed by LifeSpan



TO: The Honorable Guy Guzzone, Chair
Members, Senate Budget and Taxation Committee
The Honorable Craig J. Zucker

FROM: Danna L. Kauffman
Pamela Metz Kasemeyer

DATE: March 2, 2022

RE: **SUPPORT** – Senate Bill 636 – *Maryland Department of Health – Waiver Programs – Waitlist Reduction (End the Wait Act)*

On behalf of the LifeSpan Network, the Maryland Association of Adult Day Services, and the Maryland-National Capital Homecare Association, we respectfully **support** Senate Bill 636. Senate Bill 636 requires the Maryland Department of Health (MDH) to develop a plan to reduce the waitlists for eight specified waiver programs by 50%, beginning in fiscal 2024. The plan must include (1) measures to recruit and retain providers; (2) any changes in reimbursement rates for services under the waiver programs; (3) the expected timeframe for reducing the waitlist for each waiver program by 50%; and (4) the projected cost of the measures to be implemented under the plan.

The provisions required under this bill are long overdue. Despite actions taken by the Maryland General Assembly to address these issues, MDH has not taken necessary actions. As a result of House Bill 1696 (Ch. 798 of the Acts of 2018), MDH, through the Hilltop Institute, conducted two reports on the differential between the cost to provide care and the reimbursement by Medicaid. The reports clearly demonstrated that the level of reimbursement did not come close to the cost to provide care. It is important to note that the reports affected all Medicaid home-and-community based programs. The following year, MDH (through budget language) was instructed to develop a 5-year plan for closing the differential gap. Again, MDH failed to develop this plan. Rather, it simply said that it needed more information and was going to issue an RFP to acquire that information. MDH never took any steps to “acquire” the additional information and then COVID hit. By increasing reimbursement rates, it will likely have the effect of increasing provider participation. For example, in the Community Options Waiver, the reimbursement rate is so low that many assisted living programs have dropped out of the program because the rate is so disproportionate to the cost to provide care.

Therefore, we support Senate Bill 636 and hope that MDH will put forward a meaningful plan. Individuals desire to age-in-place and when our waiver programs are inadequate it curtails their ability to do so. We urge a favorable vote.

For more information call:

Danna L. Kauffman
Pamela Metz Kasemeyer
410-244-7000

SB636_Waitlist_KennedyKrieger_Support.pdf

Uploaded by: Emily Arneson

Position: FAV



DATE: March 2, 2022 **COMMITTEE:** Budget and Taxation
BILL NO: Senate Bill 636
BILL TITLE: MDH – Waiver Programs – Waitlist Reduction (End the Wait Act)
POSITION: Support

Kennedy Krieger Institute supports Senate bill 636 – Maryland Department of Health – Waiver Programs – Waitlist Reduction (End the Wait Act)

Bill Summary:

Requiring the Maryland Department of Health to develop a plan to reduce the waitlist for certain waiver programs by 50% beginning in fiscal year 2024

Background:

Kennedy Krieger's Neurodiversity at Work program takes a multi-faceted approach to hiring and retaining individuals of all abilities as part of the workforce. Neurodiversity at Work is a collective impact initiative designed to create and support gainful employment for individuals with disabilities, providing economic benefit for businesses and the larger community. The Neurodiversity at Work program fosters integrated workplace settings where all individuals can experience success and independence. Currently the program includes several specialty initiatives Project SEARCH, CORE Foundations, HR pathways hiring program, training and education services, legislative efforts, research, transition consultation services, and planning for a national conference and on-going events.

CORE Foundations at Kennedy Krieger Institute provides person-centered services that foster personal growth, promote meaningful relationships, and empower people with disabilities to achieve independence at their home, workplace and community. CORE Foundations is a licensed Developmental Disabilities Administration adult services provider agency, serving both the central and southern region. CORE Foundations offers employment services, community development services, and behavioral support services.

Rationale:

Currently, 3,694 individuals with disabilities are on the waiting list for services through the Developmental Disabilities Administration (DDA). This number does not include individuals on the DDA "future request" list, a registry for those who have been found eligible for developmental disability services but are more than 3 years away from entering adult services. In addition, 6,221 school-age children are on the autism registry waiting to go through the eligibility determination process. These children, who are in need of services immediately, must wait years to have the possibility of receiving services. Clearly, far too many Marylanders with disabilities and their families are waiting for critical services and supports they need to live, work, and thrive in their communities.

The plan established under this legislation requires measures to recruit and retain providers for each waiver program. Kennedy Krieger recognizes that dedicated financial resources are needed to support: onboarding and training of new provider agencies, address the staff recruitment and retention crisis of the direct support professionals' workforce, and increase the capacity of current provider agencies by offering critical funds to expand service offerings and operational infrastructure.

To realize successfully a 50% reduction of the waitlist, measures need to be taken so that providers are able to offer a competitive wage to recruit, train, and retain qualified and skilled employees to support the complex needs of individuals with disabilities.

Kennedy Krieger Institute requests a favorable report on Senate Bill 636

Wait List testimony.docx.pdf

Uploaded by: Jillian Auldridge

Position: FAV

Senate Budget and Taxation Committee

SB 636

March 2nd, 2022

Position: Support

Imagine being the parent of a toddler newly diagnosed with autism. You're fatigued by months of worry about your child's development, and haunted by what this diagnosis may mean for your child. You are scared, unsure, and anxious about your child's future, but you push past the overwhelm, determined to find help.

You are told by multiple providers that your child needs 40+ hours per week of therapy and intervention. You are advised to start sooner rather than later because research tells us that early intervention is critical for patient outcomes. You are given the "First 100 Days of Autism Tool Kit", filled to the brim with calls to make and lists to join. The overwhelm creeps back in, but you push forward.

You call your insurance company to inquire about your coverage for things like speech therapy, physical therapy, occupational therapy, and Applied Behavioral Analysis (ABA). All therapies demonstrated as effective in addressing the key symptoms of autism. After several transfers and many minutes on the phone, a customer service rep tells you that unfortunately, your employer's plan does not cover ABA, and places visit limits on therapies like speech therapy, physical therapy, and occupational therapy. The 40 hours per week you were shooting for is now 1-2 hours per month if you are lucky.

You apply for medical assistance only to be told that your income doesn't meet the guidelines. You make too much money to qualify for assistance by not enough to pay the thousands of dollars needed to cover the amount of therapy required. You apply for DDA services and receive a rejection there too. You then call the Autism Waiver Registry number. They praise you for adding your child at a young age because it will be 8-10 years before your child will be called. They explain that the wait could be less or more depending on the need, and of course funding. Let me repeat that, 8-10 years before Maryland can provide assistance including health coverage to cover the therapies needed when a child is young. **Early intervention will happen a decade later than it should.**

You turn to the public school system and you are told that your child will receive speech therapy, occupational therapy and physical therapy twice per month for 30 minutes each, along with once per month special instruction. They use a parent training model when your child is preschool age which means that they teach parents how to provide intervention and then carry it through at home. This is nearly impossible for you because you work during the day and the visits occur while you are at your job. Your child enters school and the services continue during the school day but are a drop in the bucket compared to the level of intervention they actually need. Remember the 40 hours per week desired by your child's doctor?

In addition to the missing health coverage, you miss out on respite, in-home support, home modifications, and prescription drug coverage, to name a few of the supports accessible when on the waiver. You will need to wait 10 years for the coverage that a child could get on day one if they moved to Pennsylvania.

In 2015 my son was diagnosed with autism, and the number one piece of advice we were given was to move, and you can see why. We chose not to, and each year I make a phone call to the registry to see what year they are serving. I called last month, and they are serving those who were added to the list in

2013 and 2014. So I've got perhaps another year or two to go until my son can get the assistance he's been waiting for since he was two years old.

This is unacceptable and a failure for children across the state who need access to services and support. A failure to families who are burnt out and need a break. And a failure for all of those parents and caregivers who have continued to push past their overwhelm, make sacrifices, and rearrange their lives in order to provide the best possible care for their children. We need to support our families and cutting the wait will accomplish this.

Maryland can and should do better.

For more information, please contact Angie Auldridge, mother of a child with autism at AngieAuldridge@gmail.com 301-964-0612

Respectfully submitted.

Angie Auldridge

SB 636_MACS_FAV.pdf

Uploaded by: Lauren Kallins

Position: FAV

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EPIC

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Community Living

Jonathon Rondeau
The Arc Central Chesapeake Region

Laura Howell,
Executive Director

Senate Budget and Taxation Committee
Senate Finance Committee
SB 636: Maryland Department of Health – Waiver Programs – Waitlist Reduction Act (End the Wait Act)

Position: **Support**
March 2, 2022

The Maryland Association of Community Services (MACS) is a non-profit association of over 100 agencies across Maryland serving people with intellectual and developmental disabilities (IDD). MACS members provide residential, day and supported employment services to thousands of Marylanders, so that they can live, work and fully participate in their communities.

Over 18,000 Marylanders with developmental disabilities rely on services through Maryland's three DDA Medicaid waivers-- waivers that provide an array of supports that enable people with IDD to participate in community life—including residential personal, employment and other day supports. These supports are not only essential to people with IDD, but to their families who are reliant on these same services that enable them to continue to work and support their families, while their loved ones with developmental disabilities have access to the supports they need and want.

The direct support workforce is the backbone of DDA-funded supports. Without adequate staffing, the nearly 3700 Marylanders on the DDA waiting list today will remain on the list potentially for years. MACS members would welcome the opportunity to expand and support more Marylanders with IDD who want and are eligible for supports. However, the pandemic exacerbated long-standing DD workforce shortages due to historic under-funding. Without the resources to sustain a qualified workforce, it will not be possible to significantly reduce the DDA waiting list. Increased funding is *essential* to enabling providers to recruit, train and retain new staff in order to support new people. For this reason, **the plan envisioned by the bill must include measures and resources needed to build the capacity of existing providers, identify and fund measures to recruit and retain direct support professionals, assess whether there is a need to recruit new providers, and include changes to reimbursement rates needed to ensure provider capacity.**

MACS looks forward to a time when every Marylander who wants and needs DDA-funded supports will be able to access those supports when needed. Senate bill 636 is an important step in that direction and we urge a favorable report.

Respectfully submitted:

Lauren Kallins
Director of Government Relations
LKallins@macsonline.org

Testimony in favor of SB 636.pdf

Uploaded by: Meagan Andrade

Position: FAV

Testimony in favor of SB 636
MDH – Waiver Programs – Waitlist Reduction
(End the Wait Act)

Written and submitted by Meagan Andrade
Resident of district 42A
Mother of 5 including 3 adults with developmental disabilities who live in
districts 42A, 10, and 47A
Workforce Development Specialist at The Arc Baltimore
losandrade@gmail.com
410-924-0549

Thank you committee members for taking the time to consider this testimony in support of legislation to reduce the waitlist for waivers which support Marylanders with developmental disabilities. Over 9,200 Marylanders are currently waiting for the Community Pathways and Autism waivers alone. The Autism Waiver Registry has a current wait time of 9 years, which has steadily increased over the years. Nine years ago, children who had been on the list for 7 years were finally becoming eligible for services. Now the children wait for at least 9 years. I want to point out what these waivers provide and how receiving services actually impacts people.

The waivers grant access to therapeutic programs, respite, housing, nursing and medical oversight, access to Medicaid, and most importantly direct support professionals who do everything from job coaching, facilitating participation in the community, and supporting daily activities of living. In the simplest terms – there are Marylanders who need direct support in order to eat, bathe, dress, manage medications, access their banks, doctors, churches, schools, community businesses, to gain and maintain a job. When people sit on the waiting list it means no access to these services. It means no direct support. No direct support means we have Marylanders capable of work who are sitting at home unemployed – people with disabilities who can and want to work, and their parents and grandparents who need to work but can't because they are home caring for their loved ones with a disability. No waiver services means Marylanders aren't getting to the doctor. They aren't getting to their places of worship. Marylanders aren't eating at their locally owned restaurants or supporting local shops because they don't have direct support

in getting out of the house safely and participating. They aren't working to support our industries and they aren't spending money in Maryland – and they want to! They simply need support. Direct support is essential for all Marylanders to participate in the economy and culture of our state.

Society tends to have an idea of people with developmental disabilities as being special and cute, even rare. People with developmental disabilities are not novelties or burdens and they certainly aren't rare. We lack exposure to this diverse group of people – largely because they are at home without support services, they are not included in the workforce, and they are still fighting not to be 'othered'. As Maryland residents – legislators, business owners, and neighbors – it is our responsibility to include all Marylanders in our society. People deserve to work. They deserve to be seen and heard and included. Reducing the waitlists gives Marylanders access to our state. Reducing the waitlists is a long term fiscally responsible decision because a diverse workforce is proven to strengthen the market. Reducing the waitlist will allow more Marylanders to enjoy good health, to shop in their neighborhoods, to speak up for themselves, and to be included as part of our great state.

Not working to reduce these waiver waitlists keeps a group of Marylanders hidden, forgotten, and oppressed through lack of access. I believe that we all know creating access and equity for people with disabilities is the right thing to do. Now we take on the task of doing it. I ask each of you to consider how access to waiver services is a human rights issue and one that needs to be addressed immediately. Please give weight to this issue as you consider a supplementary budget as well. Our state can be a leader on this human rights issue.

SB636.DD Council.Support.pdf

Uploaded by: Rachel London

Position: FAV



Maryland Developmental Disabilities Council

CREATING CHANGE • IMPROVING LIVES

Senate Budget and Taxation Committee
Senate Finance Committee

March 2, 2022

SB 636: Maryland Department of Health – Waiver Programs – Waitlist Reduction Act (End the Wait Act)
Position: Support

The Maryland Developmental Disabilities Council creates change to make it possible for people with developmental disabilities to live the lives they want with the support they need. SB 636 is a critical step to making this a reality. ***The majority of our Council members are people with developmental disabilities and parents or family members of people with developmental disabilities.*** Our Council members, and thousands of other Marylanders all need and want services and supports to live, learn, work, and play alongside Marylanders without disabilities. A variety of waiver programs help provide those services and supports, yet thousands more Marylanders are waiting for services. **SB 636 will help address that, there for the Council strongly supports.**

WHAT does this bill do?

- Requires the Department of Health to develop a plan to reduce the waitlists for waiver programs by 50%, beginning in FY 2024.
- Requires the Governor to include sufficient funds to carry out the plan in the annual budget.

WHY is this important?

- **Home and Community Based Services (HCBS) Waiver programs provide people with disabilities the support they need and want to live in their communities** instead of large, institutional settings.
- Over 42,000 people receive long term services and supports through Medicaid in Maryland. Yet, we know that many more are waiting for services. In fact, 11% of Marylanders have a disability that may qualify them for long term services and supports.¹ **SB 636 creates more opportunity and access for Marylanders to get the services and supports they need and want.**
- **Over 16,000 Marylanders with developmental disabilities rely ON services through the DDA Medicaid waivers, the community providers that provide those services, and the Department of Health, for the vital supports that enable them to live and work in their communities.** Their families are also reliant on DDA-funded services so that they can continue to work and support their families, while their loved ones with developmental disabilities have access to the supports they need and want.
- **There are long waits (many years) from the date an individual gets on a waiting list for waiver services until they are able to receive the service from the state.**

THE NEED: Almost 4,000 people stuck on the Developmental Disabilities Waiting List

- **There are currently 3,694 people on the waiting list for DDA services. Those people need services now.**
- **There are over 4,000 additional people on the DDA “future request” list.** The “future request” list is for people who may not need services or supports now, but may need them in the future.
- The COVID-19 pandemic has exacerbated any already existing workforce crisis. **Direct support professionals play a critical role in people’s lives.** As a result, service providers will not be able to provide the critical ongoing services and supports to Marylanders with developmental disabilities and their families. **The plan must include measures to build the capacity of providers, measures to recruit and retain providers and direct support professionals, and changes to reimbursement rates.** The clarifying sponsor amendments ensure this happens.

217 E. Redwood Street, Suite 1300 • Baltimore, MD 21202 • 410.767.3670 • md-council.org

Kalani Brown, *Chairperson* • Rachel London, Esq., *Executive Director*

THE NEED: Over 6,000 children and their families are waiting on the Autism Waiver Registry

- **Approximately 6,000 children are on the registry waiting for services.**
- **Almost 10,800 students in Maryland are identified as having an autism spectrum disorder.ⁱⁱ**
- Even though research clearly shows early intervention is critical, children may spend years on the registry waiting to receive services. **Many children wait for more than 10 years and may age out before they ever receive services.**

The Autism Waiver Program began in 2001 and is administered by the Maryland State Department of Education (MSDE). The Waiver provides families access to Medicaid, in addition to service coordination, respite care, in-home supports, behavioral supports, parent training, home modifications, and other services, based upon the child's need. Last year, the Autism Waiver program was increased by 100 slots so that 1,300 children and their families are now supported through the Waiver. The proposed FY2023 budget includes another increase of 100 slots. **But that is not enough.**

The Council strongly supports SB 636 because it will help address the critical need for services and have a positive impact on thousands of Marylanders with developmental disabilities and their families.

Contact: Rachel London, Executive Director; RLondon@md-council.org

ⁱ American Community Survey estimates.

ⁱⁱ MSDE, Division of Special Education/Early Intervention Services Census Data, October 1, 2015.

SB636_DRM_FAV.pdf

Uploaded by: Randi Ames

Position: FAV



Empowerment. Integration. Equality.

1500 Union Ave., Suite 2000, Baltimore, MD 21211

Phone: 410-727-6352 | Fax: 410-727-6389

www.DisabilityRightsMD.org

**SENATE BUDGET AND TAXATION COMMITTEE
SENATE BILL 636: MARYLAND DEPARTMENT OF HEALTH - WAIVER
PROGRAMS - WAITLIST REDUCTION (END THE WAIT ACT)**

MARCH 02, 2022

POSITION: SUPPORT

Thank you, Mister Chair Guzzone and Committee Members, for the opportunity to provide testimony on Senate Bill 636: Maryland Department of Health - Waiver Programs - Waitlist Reduction (End the Wait Act). Disability Rights Maryland (DRM – formerly Maryland Disability Law Center) is the federally designated Protection and Advocacy agency in Maryland, mandated to advance the civil rights of people with disabilities. DRM works to increase opportunities for Marylanders with disabilities to be integrated in their communities and live independently in their homes through access to high-quality health care and supports.

Maryland’s Medicaid Waivers offer a wide array of home-based care to people with disabilities of all ages and varying needs. These programs also provide opportunities for people with disabilities to avoid having to be institutionalized, such as at a nursing facility, Maryland’s State Residential Centers, or imprisoned at a correctional facility. Maryland’s Medicaid Waivers also support families that are caring for their loved ones with disabilities and people with disabilities are able to stay in their family home or community.

However, tens of thousands of Marylanders are currently on varying waiting lists to access the care they need under a Medicaid Waiver program.¹ SB 636 will require the Maryland Department of Health to develop a plan to reduce the waiting list for each of its waiver programs by 50%. This plan would be due by January 2023. It also requires the Governor to include enough funding in the Fiscal Year 2024 budget to reduce the waiting lists by 50%.

SB 636 will have the following impact:

- Improve Maryland’s Home and Community- Based Services (HCBS) system by reducing the administrative costs and operations associated with maintaining such large waiting lists, and thus freeing up more resources for program participants.
- Furthers Maryland’s goals of and compliance with the *Olmstead* decision and the community integration mandate of the Americans with Disabilities Act (ADA).²
- Significantly reduce wait times for accessing Waiver services.
- Ensure future Waiver applicants are more efficiently screened and directed to the appropriate Waiver program that will meet their needs.

Health care is a critical public service, especially given the current COVID-19 Pandemic. People with intellectual and developmental disabilities are three times more likely to become infected

¹ See: https://mgaleg.maryland.gov/2022RS/fnotes/bil_0006/sb0636.pdf; The Home- and Community-Based Options Waiver alone has approximately 21,238 people on its waitlist.

² *Olmstead v. L.C.*, 527 U.S. 581 (1999); 42 U.S.C. § 12101.

with COVID-19 and die than those without disabilities.³ The pandemic has further highlighted the dangers of unnecessary institutionalization, with 33-75% of COVID-19 deaths occurring in congregate settings, such as nursing facilities, in some states.⁴

Furthermore, the American Rescue Plan Act (ARPA) was signed into law on March 11, 2021, and provides a 10% increase in funding for HCBS, that must supplement and not supplant programs and services. Maryland is expected to receive approximately \$234,418,000 in additional federal funding for HCBS. Maryland should take advantage of this additional federal funding to meet the high demand for its Waivers.

For these reasons, DRM strongly supports Senate Bill 636.

Respectfully,

Randi A. Ames, Esq.
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RandiA@DisabilityRightsmd.org

³ Risk Factors for COVID-19 Mortality among Privately Insured Patients, A FAIR Health White Paper in Collaboration with the West Health Institute and Marty Makary, MD, MPH, from Johns Hopkins University School of Medicine, November 11, 2020.

⁴ Chidambaram, P. (2020, March 13). Data note: How might Coronavirus affect residents in nursing facilities?. Kaiser Family Foundation. <https://www.kff.org/coronavirus-covid-19/issue-brief/data-note-how-mightcoronavirus-affect-residents-in-nursing-facilities/>.

2022 The Coordinating Center SB 636 Senate Side.pd

Uploaded by: Robyn Elliott

Position: FAV



THE COORDINATING CENTER
INSPIRED SOLUTIONS

Committee: Senate Budget and Taxation Committee

Bill Number: Senate Bill 636 – Maryland Department of Health - Waiver Programs - Waitlist Reduction (End the Wait Act)

Hearing Date: March 2, 2022

Position: Support

The Coordinating Center strongly supports *Senate Bill 636 – Maryland Department of Health – Waiver Programs – Waitlist – Reduction (End the Wait Act)*. The legislation would require the Maryland Department of Health to reduce the waitlist for waiver programs by 50% with an implementation plan due in 2023. We understand that this bill is a significant investment, yet we know that waiver programs save monies by allowing people with serious, complex illnesses or disabilities live at home and avoid more costly settings. Most importantly, waiver programs allow people to live with dignity with a higher quality of life. Marylanders who meet waiver requirements should not have to wait years to obtain services.

We ask for a favorable report. This legislation furthers the vision of The Coordinating Center that “People of all ages and abilities have equitable access to achieve optimal quality health, affordable housing and meaningful community life.” If we can provide any additional information to support consideration of this legislation, please contact Robyn Elliott at relliott@policypartners.net.

MD Senate End the Wait Act testimony.pdf

Uploaded by: Stuart Spielman

Position: FAV



TESTIMONY IN SUPPORT OF SENATE BILL 636, “END THE WAIT ACT”

Senate Budget and Taxation Committee

Testimony Provided by Stuart Spielman, Senior Vice President for Advocacy, Autism Speaks

March 2, 2022

Chair Guzzone, Vice-Chair Rosapepe, sponsor Zucker, members of the committee, thank you for affording me the opportunity to testify in support of Senate Bill 636, the “End the Wait Act,” on behalf of Autism Speaks and myself personally, as a resident of Montgomery County. I am Senior Vice President for Advocacy at Autism Speaks, which is dedicated to promoting solutions, across the spectrum and throughout the life span, for the needs of individuals with autism and their families. We do this through advocacy and support; increasing understanding and acceptance of people with autism; and advancing research into causes and better interventions for autism spectrum disorder and related conditions.

As you know, the End the Wait Act would require the Maryland Department of Health to develop a plan to reduce the waitlist for eight Maryland Medicaid home and community-based services waiver programs. I will limit my remarks to one of those waivers, the Waiver for Children with Autism Spectrum Disorder (Autism Waiver).

AUTISM PREVALENCE



Autism, or autism spectrum disorder (ASD), refers to a broad range of conditions characterized by challenges with social skills, repetitive behaviors, speech and nonverbal communication. According to the Centers for Disease Control, autism affects an estimated **1 in 49 children in Maryland** and **1 in 44 children nationwide**.

The principal goal of the Autism Waiver is to keep children safe at home and in the community. The waiver furthers this goal by providing intensive individual support, respite care, and other services to approximately 1350 children.

My older son, Zak, who is now 27 years old, was one of the first children in Montgomery County on the waiver. He was a young child back in 2001, when the waiver first became effective. He remained on the waiver until he turned 21, receiving services that enabled him to enjoy a fuller family and community life.

Zak was fortunate to receive services at an early age. The Autism Waiver was a first-in-the-nation Medicaid program, an effort to support children who met an institutional level of care and the families who looked after them. It was the vision of Delegate John Adams Hurson, who introduced the legislation that led to the development of the waiver, as well as Marjorie



Shulbank, June Cohen, Boyd Pusey, and other creative thinkers at the Maryland State Department of Education, to intervene early in the lives of children with autism so that they would have the best chance to reach their potential.

*6196 children in Maryland
are waiting on the
statewide registry. **

**As of February 1st*

Sadly, the dream of the visionaries is no longer being fulfilled. Newly enrolled Autism Waiver participants on average are in their teenage years. Children who today are first being served by the Autism Waiver have been waiting since February 2014. The number of affected Maryland children has exceeded the capacity of the waiver to serve them. And so, children wait, and continue to wait, in Montgomery County and Baltimore City,

Washington County and Talbot County, and places throughout our state. As of February 1st, 6196 children were on the statewide registry.

The End the Wait Act would reduce the appalling number of children who today are unserved by the Autism Waiver. We commend Senator Zucker for sponsoring the End the Wait Act and ask this committee to issue a favorable report on the legislation.

SB 636 Maryland Department of Health waitlist.pdf

Uploaded by: Tami Goldsmith

Position: FAV



Testimony in Support
SB 636 Maryland Department of Health
Waiver Programs-Waitlist
Reduction (End the Wait Act)
Budget and Taxation
March 2, 2022
By Ken Capone

Background: People On the Go Maryland builds community through diversity and inclusion. We respect the individuality of our members and are committed to making inclusion a priority so that everyone feels comfortable, valued, and heard. People On the Go remains distinct by maintaining a cross-disability strategy that focuses on effecting positive change in the lives of people with and without disabilities.

We are here to testify in support for SB 636 Maryland Department of Health - Waiver Programs - Waitlist Reduction (End the Wait Act)

I would like to stress to you how important it is to get the waiting lists fully funded because I was one of those people on the waiting list. I was on the waiting list for about 15 years with my elderly mother caring for me. To make a long story short, when I started receiving services my life changed dramatically. Having all of the waivers waiting lists reduced by 50% would give many people with disabilities the support and services they need to live a life of their choosing. Knowing the department is working on a plan to reduce the waiting list by 50% gives people who have been waiting hope of receiving services in a reasonable time.

I know people who are waiting for services and those services could help them tremendously but without any plan to reduce the waiting list they are just waiting and hoping for services. I have been in this field a long time advocating for people with disabilities and it hurts me knowing that there are people who's lives could be so much more meaningful if they had needed services. The time is now.

Thank you

HFAM Testimony SB 636.pdf

Uploaded by: Joseph DeMattos

Position: FWA



**TESTIMONY BEFORE THE
SENATE BUDGET AND TAXATION COMMITTEE**

March 2, 2022

Senate Bill 636: Maryland Department of Health - Waiver Programs - Waitlist Reduction (End the Wait Act)
Written Testimony Only

POSITION: FAVORABLE WITH AMENDMENT

On behalf of the members of the Health Facilities Association of Maryland (HFAM), we appreciate the opportunity to express our support with amendment for Senate Bill 636. HFAM represents over 170 skilled nursing centers and assisted living communities in Maryland, as well as nearly 80 associate businesses that offer products and services to healthcare providers. Our members provide services and employ individuals in nearly every jurisdiction of the state.

Senate Bill 636 will address concerns regarding current wait lists for waiver programs by requiring the Maryland Department of Health (MDH) to develop a plan to reduce the waitlists for eight specific waiver programs by 50% beginning in fiscal year 2024. The waivers that must be included in the plan are the Community Pathways Waiver, the Community Supports Waiver, the Family Supports Waiver, the Brain Injury Waiver, the Home- and Community-Based Options Waiver, the Medical Day Care Services Waiver, the Model Waiver for Medically Fragile Children, and the Autism Waiver.

We support the intent of this legislation, which is to move Marylanders off waiver wait lists and into safe and appropriate care settings. In our settings, the Home- and Community- Based Options Waiver provides community services to older adults and people with disabilities such as assisted living, medical day care, family training, senior center plus, and accessibility adaptations.

In order to qualify for this waiver, people must need support with activities of daily living and meet the level of care required to qualify for nursing facility services. Currently, there are approximately 21,000 individuals on the waitlist. It is important to address ongoing concerns surrounding the Home- and Community-Based Options Waiver so that Marylanders can receive care in the clinically-appropriate setting of their choice.

We respectfully request that this legislation be amended to add language stating that the Maryland Department of Health is prohibited from cutting rates or utilization in other Medicaid programs to fund home- and community-based care.

Long-term care Medicaid provides access to quality care for Marylanders facing multiple chronic conditions who would likely otherwise require care in a hospital at higher cost. Medicaid funding in long-term care remains underfunded and new or expanded programs cannot be funded at the expense of Marylanders receiving care in settings across the healthcare continuum.

HFAM has long advocated that Marylanders in need of post-acute and long-term care should receive that care in a clinically appropriate setting that meets both their medical and personal needs. HFAM has also long supported access to care and adequate funding across settings.

If a person can safely receive care support at home, then they should certainly have the opportunity to do so. However, the vast majority of people who receive care in Maryland's skilled nursing and rehabilitation centers are medically complex and require round-the-clock care. Therefore, they are unable to safely receive care at home.

Medicare and Medicaid rate structures are designed to support quality long-term and post-acute care in skilled nursing and rehabilitation centers for these medically complex people who cannot live or receive rehabilitation safely at home. Frankly, the current rate systems are not designed to sufficiently support the care of individuals with light medical needs.

We must continue to increase care capacity and adequate rates across multiple settings. We must also acknowledge that it is more expensive to provide 24-hour care for a medically complex patient with high acuity at home than in a skilled nursing and rehabilitation center. We do need to build home- and community-based care capacity, just as we need to increase capacity in long-term and post-acute care.

Again, in building capacity in any of these areas, we cannot cut rates in one setting at the expense of another, nor can we assume a reduction in the utilization of services in any particular setting. Ultimately our success in reducing utilization of long-term care services will come from our population health work to reach Marylanders at risk of chronic illness.

For these reasons and with an amendment stating that nursing home rates cannot be reduced to fund other Medicaid programs, we request a favorable report on Senate Bill 636.

Submitted by:

Joseph DeMattos, Jr.
President and CEO
(410) 290-5132

SB 636_MoCo_Frey_SWA.pdf

Uploaded by: Leslie Frey

Position: FWA



Montgomery County

Office of Intergovernmental Relations

ROCKVILLE: 240-777-6550

ANNAPOLIS: 240-777-8270

SB 636

DATE: March 2, 2022

SPONSOR: Senator Zucker, *et al.*

ASSIGNED TO: Budget & Taxation and Finance

CONTACT PERSON: Leslie Frey (leslie.frey@montgomerycountymd.gov)

POSITION: SUPPORT WITH AMENDMENT- Department of Health and Human Services

Maryland Department of Health - Waiver Programs - Waitlist Reduction (End the Wait Act)

Senate Bill 636 requires the Maryland Department of Health to develop a plan to reduce the waitlists for eight of the Department's Medicaid waivers, including its Home and Community Based Services waivers, by 50% beginning in Fiscal Year 2024.

Montgomery County Department of Health and Human Services (MCDHHS) supports increasing the number of individuals in the State served by HCBS. Maryland maintains one of the largest waiting lists for HCBS in the country¹, and MCDHHS wholeheartedly supports the intent of the bill to increase the number of Marylanders served by these waivers. However, the State struggles with staff shortages and backlogs with the current workload of waiver participants, which causes delays in individuals initiating services and gaining approval for annual recertification. MCDHHS has observed delays in processing waiver applications, obtaining nurse assessments, assigning cases to a Supports Planning Agency, and reviewal and approval of Plans of Services- all critical elements of an individual participating in HCBS programs.

Because of the current staffing issues, MCDHHS respectfully requests that Senate Bill 636 be amended to have the plan address existing barriers to HCBS waiver participation, including an analysis of the staffing shortages and backlogs, and a prospective course of action to implement the recommendations raised in the analysis. MCDHHS urges the committee to adopt this amendment and issue a favorable report on Senate Bill 636.

¹ <https://files.kff.org/attachment/Issue-Brief-Key-State-Policy-Choices-About-Medicaid-Home-and-Community-Based-Services>

SB 636 Maryland Department of Health Waiver Progra

Uploaded by: Melissa Rosenberg

Position: FWA



Senate Budget and Taxation Committee

Senate Finance Committee

March 2, 2022

**SB 636: Maryland Department of Health – Waiver Programs – Waitlist Reduction Act (End the Wait Act)
Position: Support**

The Howard County Autism Society serves individuals with Autism throughout the lifespan, their families and the community in Howard County and Central Maryland. Our organization supports SB636 which would require the Maryland Department of Health to develop a plan to reduce waitlists for waiver programs by 50%, and, beginning in FY2024, require the Governor to include sufficient funds to carry out the plan in the annual budget.

One of the first things we advise newly diagnosed families when they contact the Autism Society is to “Sign up for the Autism Waiver.” It is simple enough to register and can provide funding to support residential habilitation, respite, adult life planning, environmental accessibility adaptations, family consultation, intensive individual support service, therapeutic integration for individuals with autism ages 1-21.

The Autism Waiver provides supports in the home and community. Waiver services translate into hope for parents and families with:

- Therapy services that teach our children how to function, how to live and allow the potential we know they have not only to be realized, but to thrive.
- Respite services means that parents can get a needed break without worrying if their child is being watched by someone unqualified to care for them in their absence.
- Environmental adaptations mean making physical changes to homes to enable the child to function as normally as possible while staying safe.
- Medical services grant life-sustaining treatments that enrich the quality of life.

Today, over 6,000 children and their families are waiting on the Autism Waiver Registry, most for an average of 10 years for these essential services.

When the program was created in 2001 it was intended to be a program of Early Intervention, designed to provide children and families to access services early, thus preventing lifetime reliance on more extensive, and expensive state services and supports. Unfortunately, the funding for this waiver has not kept pace with the need and many who enter the waiver registry as a child wait so long for services that they age out of eligibility before their “number” comes up.

This bill, along with its amendments, will not only add more slots to the Autism Waiver, but is intended to dig into several waiver waiting lists to see what the actual numbers are and how lists can be cleaned up to serve more people. We believe that the waiting list for the Autism Waiver alone can be reduced simply by carefully reviewing the names on it. Many people will be found ineligible, may have moved out of state, or aged out when their number comes up.



In addition to the Autism Waiver, many of our community members benefit from other DDA Waiver Services to provide critical respite, personal and medical care, and to ensure their quality of life. They need these services and supports to live, learn, work and play along Marylanders without disabilities, but they are waiting in long lines for these services. The impact on persons with Autism and other disabilities and their families is profound. **Today, there are close to 4,000 persons stranded on the Developmental Disabilities Community Pathways Waiting List with some waiting decades to access needed services.**

It is not who we are as a state and Maryland needs to do much more to prioritize the availability of services and supports for all residents with disabilities and their families. We believe SB 636 will accomplish this.

Thank you.

Contact: Melissa Rosenberg, Executive Director
melissa.rosenberg@howard-autism.org or 410-290-3466

SB636_Zucker_fav.pdf

Uploaded by: Senator Craig Zucker

Position: FWA

CRAIG J. ZUCKER
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Budget and Taxation Committee
Chair, Capital Budget Subcommittee

Chair, Senate Democratic Caucus

THE SENATE OF MARYLAND
ANNAPOLIS, MARYLAND 21401

Testimony of Senator Craig J. Zucker
Senate Bill - 636- Maryland Department of Health - Waiver Programs - Waitlist
Reduction (End the Wait Act)
Senate Budget and Taxation Committee
March 2nd, 2022
1:00pm
Position: SUPPORT

Good afternoon Chairman Guzzone, Vice Chairman Rosapepe, and distinguished members of the committee. It is my pleasure to testify today in **support of Senate Bill - 636 - Maryland Department of Health - Waiver Programs - Waitlist Reduction (End the Wait Act)**.

Senate Bill 636 requires the Maryland Department of Health to develop a plan to reduce the waitlists for eight specified waiver programs by 50%. The plan must include measures to recruit and retain providers, any changes in reimbursement rates for services under the waiver programs, reduce the timeframe for the waitlist for each waiver program by 50%, and the projected cost of the measures be implemented under the plan. This legislation also requires the Governor to include sufficient funds to carry out the plan in the annual budget.

The eight waivers that must be included in the plan are:

1. The Community Pathways Waiver
2. The Community Supports Waiver
3. The Family Supports Waiver
4. The Brain Injury Waiver
5. The Home and Community Based Options Waiver
6. The Medical Day Care Services
7. The Model Waiver for Medically Fragile Children
8. The Autism Waiver

This legislation is critical to ensuring people with disabilities get the services we already have in place in a timely manner. Over 18,000 people in Maryland with disabilities rely

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Budget and Taxation Committee
Chair, Capital Budget Subcommittee

Chair, Senate Democratic Caucus

THE SENATE OF MARYLAND
ANNAPOLIS, MARYLAND 21401

on services through the Medicaid waivers. There are long waits from the date an individual gets on a waiting list for waiver services to the time they get service.

On The Maryland Department of Health's Brain Injury Waiver and the Medical Day Care Services Waiver, there are no current waitlists, and The Model Waiver for Medically Fragile Children is currently full with a waitlist of 161 individuals.

The Developmental Disabilities Administration (DDA) administers three Medicaid waivers that would be addressed by this bill: The Community Pathways Waiver; Community Supports Waiver; and Family Supports Waiver. The waitlist for these three waivers that assist with support services for children and their families is approximately 3,600 individuals.

The average wait for a person to get on the autism waiver is about 10 years, this leads to people aging out of the waitlist, which in turn leaves the person not receiving the services they deserve. These waiver programs provide people with disabilities the support they need. Currently, there are over 6,000 children on the autism waiver registry. Unfortunately, due to lengthy waitlist times many children end up aging out before any services are provided.

The waitlist with the most individuals is the Medicaid Home- and Community-based Services Waiver, which currently has 21,238 individuals on the waiver registry. This service supports older adults and people with disabilities community services to live in their own homes. This service includes assisted living, medical day care, family training, and more. We have these resources available and now is the time to make sure Marylander's get access to these programs that can make a huge difference in their everyday life.

For these reasons, I urge a favorable report on Senate Bill 636. Thank you for your kind consideration.

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15 - SB 636 - B&T - MDH - LOI.docx.pdf

Uploaded by: State of Maryland (MD)

Position: INFO



Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Secretary

March 2, 2022

The Honorable Guy Guzzone Chair
Senate Budget and Taxation Committee
3 West Miller Senate Office Building
Annapolis, MD 21401

**RE: SB 636 – Maryland Department of Health – Waiver Programs – Waitlist Reduction
(End the Wait Act) - Letter of Information**

Dear Chair Guzzone and Committee Members:

The Maryland Department of Health (MDH) respectfully submits this letter of information for Senate Bill (SB) 636 – Maryland Department of Health - Waiver Programs - Waitlist Reduction (End the Wait Act).

SB 636 requires MDH to develop a plan to reduce the waitlist for eight (8) waiver programs by 50% in Fiscal Year (FY) 2024. The plan should include measures to attract and retain providers, any needed changes to reimbursement rates, and an estimated implementation cost. MDH must submit the plan on or before January 1, 2023.

MDH anticipates expenditures to implement the plan required by the bill will exceed hundreds of millions of dollars due to enhanced staffing needs, increased administrative processing costs, and service-related costs driven by enhanced waiver enrollment. For example, in order to expand just one of the eight waiver programs specified in the bill, the Home- and Community-Based Services Waiver (HCBW), to 7,500 participants (which is less than 50% of the current wait list) the total projected cost for FY23 is \$77.9 million (\$38.9 million State general funds, \$38.9 million federal funds). Based on retention of existing enrollees and year over year annual growth of 576 new enrollees, costs will compound beginning in FY24. Expected costs for subsequent fiscal years are as follows:

- FY24: \$169.3 million (\$84.65 million State general funds, \$84.65 million federal funds)
- FY25: \$194.8 million (\$97.4 State general funds, \$97.4 million federal funds)
- FY26: \$220.4 million (\$110.2 State general funds, \$110.2 million federal funds)
- FY27: \$246 million (\$123 million State general funds, \$123 million federal funds)

The total cost of implementing SB 636 is indeterminate, however MDH projects it will cost hundreds of millions of dollars each year.

If you have any questions, please contact Heather Shek, Director of Governmental Affairs, at heather.shek@maryland.gov or (410) 260-3190.

Sincerely,

A handwritten signature in cursive script that reads "Dennis R. Schrader".

Dennis R. Schrader
Secretary