

MARYLAND REGISTER

Proposed Action on Regulations

Transmittal Sheet PROPOSED OR REPROPOSED Actions on Regulations	Date Filed with AELR Committee	TO BE COMPLETED BY DSD
	08/14/2015	Date Filed with Division of State Documents
		Document Number
		Date of Publication in MD Register

1. Desired date of publication in Maryland Register: 9/4/2015

2. COMAR Codification

Title Subtitle Chapter Regulation

10 37 10 10

3. Name of Promulgating Authority

Health Services Cost Review Commission

4. Name of Regulations Coordinator

Diana M Kemp

Telephone Number

410-764-2576

Mailing Address

4160 Patterson Avenue

City State Zip Code

Baltimore MD 21215

Email

dkemp@hscrc.state.md.us

5. Name of Person to Call About this Document

Diana Kemp

Telephone No.

410-764-2576

Email Address

diana.kemp@maryland.gov

6. Check applicable items:

- New Regulations
 - Amendments to Existing Regulations
 - Date when existing text was downloaded from COMAR online: 08-10-2015.
 - Repeal of Existing Regulations
 - Recodification
 - Incorporation by Reference of Documents Requiring DSD Approval
 - Reproposal of Substantively Different Text:
 - : Md. R
 - (vol.) (issue) (page nos) (date)
- Under Maryland Register docket no.: --P.

7. Is there emergency text which is identical to this proposal:

- Yes No

8. Incorporation by Reference

Check if applicable: Incorporation by Reference (IBR) approval form(s) attached and 18 copies of documents proposed for incorporation submitted to DSD. (Submit 18 paper copies of IBR document to DSD and one copy to AELR.)

9. Public Body - Open Meeting

- OPTIONAL - If promulgating authority is a public body, check to include a sentence in the Notice of Proposed Action that proposed action was considered at an open meeting held pursuant to State Government Article, §10-506(c), Annotated Code of Maryland.
- OPTIONAL - If promulgating authority is a public body, check to include a paragraph that final action will be considered at an open meeting.

10. Children's Environmental Health and Protection

Check if the system should send a copy of the proposal to the Children's Environmental Health and Protection Advisory Council.

11. Certificate of Authorized Officer

I certify that the attached document is in compliance with the Administrative Procedure Act. I also certify that the attached text has been approved for legality by Leslie C. Schulman, Assistant Attorney General, (telephone #410-764-2575) on 08-12-2015. A written copy of the approval is on file at this agency.

Name of Authorized Officer

John M. Colmers

Title

Chairman

Telephone No.

410-764-2605

Date

08-12-2015

Title 10
DEPARTMENT OF HEALTH AND MENTAL HYGIENE

Subtitle 37 HEALTH SERVICES COST REVIEW COMMISSION

10.37.10 Rate Application and Approval Procedures

Authority: Health-General Article, Sections 19-207, 19-219, and 19-222; Annotated
Code of Maryland

Notice of Proposed Action

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The Health Services Cost Review Commission proposes to amend Regulation .10 under COMAR 10.37.10.10 Rate Application and Approval Procedures. This action was considered and approved for promulgation by the Commission at a previously announced open meeting held on August 12, 2015, notice of which was given pursuant to General Provisions Article, Section 3-302(c), Annotated Code of Maryland. If adopted, the proposed amendments will become effective on or about November 23, 2015.

Statement of Purpose

The purpose of this action is to assure that rate applications are submitted in easily readable formats.

Comparison to Federal Standards

There is no corresponding federal standard to this proposed action.

Estimate of Economic Impact

The proposed action has no economic impact.

Economic Impact on Small Businesses

The proposed action has minimal or no economic impact on small businesses.

Impact on Individuals with Disabilities

The proposed action has no impact on individuals with disabilities.

Opportunity for Public Comment

Comments may be sent to Diana Kemp, Regulations Coordinator, Health Services Cost Review Commission, 4160 Patterson Avenue, Baltimore, MD 21215, or call 410-764-2576, or email to diana.kemp@maryland.gov, or fax to 410-358-6217. Comments will be accepted through October 5, 2015. A public hearing has not been scheduled.

Economic Impact Statement Part C

A. Fiscal Year in which regulations will become effective: FY 2016

B. Does the budget for the fiscal year in which regulations become effective contain funds to implement the regulations?

Yes

C. If 'yes', state whether general, special (exact name), or federal funds will be used:

Special - Hospital Assessments

D. If 'no', identify the source(s) of funds necessary for implementation of these regulations:

E. If these regulations have no economic impact under Part A, indicate reason briefly:

F. If these regulations have minimal or no economic impact on small businesses under Part B, indicate the reason and attach small business worksheet.

G. Small Business Worksheet:

Attached Document:

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.10 Docketing and Receipt.

A. —B. (text unchanged)

C. The hospital shall file an original and three copies of each rate application and its supporting documents, if any. *The Commission may prescribe the format to be used in the submission of rate applications and their supporting documents.* In addition, the hospital shall file with each rate application a certificate of service indicating that the application and supporting documents have been mailed or served upon all designated parties to that proceeding and upon the Commission at its offices.

JOHN M. COLMERS

Chairman

Health Services Cost Review Commission

