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By: Senators Hollinger, Teitelbaum, Forehand, Middleton, Collins, Astle, Kelley, and Hoffman

Introduced and read first time: February 5, 1999 Assigned to: Finance

Committee Report: Favorable with amendments Senate action: Adopted Read second time: March 26, 1999

CHAPTER_____

1 AN ACT concerning

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Home and Community Based Services for Impaired Individuals - Medicaid Waiver

4 FOR the purpose of requiring the Department of Health and Mental Hygiene to apply

- 5 to the United States Department of Health and Human Services, Health Care
- 6 Financing Administration for an amendment to the existing home and
- 7 community based waiver program under the federal Social Security Act;
- 8 providing for home and community based services to eligible medically and
- 9 functionally impaired individuals; specifying the elements of a waiver
- 10 application to be submitted by the Department of Health and Mental Hygiene;
- 11 requiring the Department of Health and Mental Hygiene to request federal
- 12 matching funds for certain waiver services; requiring the Department of Health
- 13 and Human Services, in consultation with the Department of Aging and the
- 14 Department of Human Resources, to adopt regulations; requiring the
- 15 Department of Health and Mental Hygiene to make certain reports to the
- 16 General Assembly; requiring the Department of Health and Mental Hygiene to
- 17 work with the Maryland Health Resource and Planning Commission to try to
- 18 assure that a certain percentage of assisted living program waiver beds are
- 19 <u>nursing facility beds that have been converted to assisted living beds; defining</u>
- 20 <u>certain terms</u>; and generally relating to <u>home and community based</u> services for
- 21 impaired individuals provided by the Department of Health and Mental
- 22 Hygiene.

23 BY adding to

- 24 Article Health General
- 25 Section 15-132
- 26 Annotated Code of Maryland

2 SENATE BILL 593						
1 (1994 Replacement Volume and 1998 Supplement)						
2 Preamble						
3 WHEREAS, The number of persons requiring long-term care services is 4 growing exponentially and will continue to grow into the next millennium; and						
5 WHEREAS, The number of persons requiring assisted living services is also 6 growing and the corresponding need for financial assistance is increasing due to the 7 high cost of these services; and						
8 WHEREAS, The ability to receive needed services is currently only available 9 in an institutional setting <u>a nursing facility</u> ; now, therefore,						
10 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY C 11 MARYLAND, That the Laws of Maryland read as follows:	ΟF					
12 Article - Health - General						
13 15-132.						
14 (A) (1) IN THIS SECTION THE FOLLOWING TERMS H 15 INDICATED.	AVE THE MEANINGS					
16 (2) "ASSISTED LIVING PROGRAM" HAS THE MEA 17 19-1801 OF THIS ARTICLE.	ANING STATED IN §					
 18 (3) "ASSISTED LIVING SERVICES" MEANS SERVI 19 ASSISTED LIVING PROGRAM AS DEFINED IN REGULATIONS AD 20 DEPARTMENT. 						
 21 (4) "CASE MANAGEMENT SERVICES" MEANS SE 22 WAIVER ELIGIBLE INDIVIDUALS IN GAINING ACCESS TO NEED 23 AND OTHER NEEDED MEDICAL, SOCIAL, HOUSING, AND OTHER 24 SERVICES. 	DED WAIVER SERVICES					
 25 (5) "DURABLE MEDICAL EQUIPMENT" HAS THE 26 REGULATIONS ADOPTED BY THE DEPARTMENT AND INCLUDE 27 OR APPLIANCES THAT ENABLE INDIVIDUALS TO INCREASE TH 28 PERFORM ACTIVITIES OF DAILY LIVING OR TO PERCEIVE CONT 29 COMMUNICATE WITH THE ENVIRONMENT IN WHICH THEY LIV 	S DEVICES, CONTROLS, I EIR ABILITIES TO TROL OR					
 30 (6) (5) "ENVIRONMENTAL MODIFICATIONS" 31 STATED IN REGULATIONS ADOPTED BY THE DEPARTMENT AN 32 PHYSICAL ADAPTATIONS TO THE HOME OR RESIDENCE WHICH 33 ENSURE THE HEALTH, WELFARE, AND SAFETY OF THE INDIVID 34 ENABLE THE INDIVIDUAL TO FUNCTION WITH GREATER INDED 35 WITHOUT WHICH, THE INDIVIDUAL WOULD REQUIRE INSTITUTION 36 ADMISSION TO OR CONTINUED STAY IN A NURSING FACILITY. 	D INCLUDES THOSE I ARE NECESSARY TO DUAL OR WHICH PENDENCE AND TIONALIZATION					

(7)(II) **"FACILITY SERVICES" MEANS SKILLED NURSING CARE AND** 1 2 RELATED SERVICES. REHABILITATION SERVICES. HEALTH RELATED CARE AND 3 SERVICES ABOVE THE LEVEL OF ROOM AND BOARD NEEDED ON A REGULAR BASIS IN 4 ACCORDANCE WITH \$ 1919 OF THE FEDERAL SOCIAL SECURITY ACT AND 42 C.F.R. 5 440.150. 6 (H)**"FACILITY SERVICES" INCLUDES SERVICES PROVIDED TO** 7 INDIVIDUALS CERTIFIED AS REQUIRING A MODERATE LEVEL OF CARE IN 8 CONFORMITY WITH THE APPLICABLE ASSISTED LIVING REGULATIONS. "HABILITATION SERVICES" HAS THE MEANING STATED IN 42 C.F.R. 9 (8)10 440.180 AND IN REGULATIONS ADOPTED BY THIS DEPARTMENT AND INCLUDES 11 THOSE SERVICES DESIGNED TO ASSIST INDIVIDUALS IN ACQUIRING, RETAINING AND 12 IMPROVING THE SELF-HELP SOCIALIZATION AND ADAPTIVE SKILLS NECESSARY TO 13 RESIDE SUCCESSFULLY IN HOME AND COMMUNITY BASED SETTINGS. 14 (9) "HOME HEALTH AGENCY" HAS THE MEANING STATED IN § 19 401 OF 15 THIS ARTICLE. "HEALTH RELATED CARE AND SERVICES", FOR PURPOSES OF 16 (6)17 PARAGRAPH (8) OF THIS SUBSECTION, INCLUDES: 18 24-HOUR SUPERVISION AND OBSERVATION BY A LICENSED (I) **19 CARE PROVIDER;** 20 MEDICATION ADMINISTRATION; (II) 21 <u>(III)</u> **INHALATION THERAPY;** 22 (IV) BLADDER AND CATHETER MANAGEMENT; 23 (V) ASSISTANCE WITH SUCTIONING; AND 24 (VI)ASSISTANCE WITH TREATMENT OF SKIN DISORDERS AND 25 DRESSINGS. (10)"HOME HEALTH CARE SERVICES" MEANS THOSE SERVICES 26 (7)27 DEFINED IN § 19-401 OF THIS ARTICLE AND IN 42 C.F.R. 440-70. "INTERMEDIATE LEVEL OF CARE", FOR PURPOSES OF PARAGRAPH 28 (8) 29 (10)(II) OF THIS SUBSECTION, INCLUDES HEALTH RELATED CARE AND SERVICES 30 PROVIDED TO INDIVIDUALS WHO DO NOT REQUIRE HOSPITAL OR A SKILLED LEVEL 31 OF NURSING FACILITY CARE BUT WHOSE MENTAL, PHYSICAL, FUNCTIONAL, OR 32 COGNITIVE CONDITION REQUIRES HEALTH SERVICES THAT: ARE ABOVE THE LEVEL OF ROOM AND BOARD; 33 (I) 34 (II) ARE PROVIDED ON A REGULAR BASIS; AND CAN BE MADE AVAILABLE TO THE INDIVIDUALS THROUGH 35 (III) **36 INSTITUTIONAL FACILITIES.**

1(11)(9)"MEDICALLY AND FUNCTIONALLY IMPAIRED" MEANS AN2INDIVIDUAL WHO IS ASSESSED BY THE DEPARTMENT TO REQUIRE FACILITY3SERVICES SERVICES PROVIDED BY A NURSING FACILITY AS DEFINED IN THIS4SECTION, AND WHO, BUT FOR THE RECEIPT OF THESE SERVICES, WOULD REQUIRE5INSTITUTIONALIZATION ADMISSION TO A NURSING FACILITY WITHIN 30 DAYS.

6(10)(I)"NURSING FACILITY" MEANS A FACILITY THAT PROVIDES7SKILLED NURSING CARE AND RELATED SERVICES, REHABILITATION SERVICES, AND8HEALTH RELATED CARE AND SERVICES ABOVE THE LEVEL OF ROOM AND BOARD9NEEDED ON A REGULAR BASIS IN ACCORDANCE WITH § 1919 OF THE FEDERAL10SOCIAL SECURITY ACT.

 11
 (II)
 "NURSING FACILITY" INCLUDES A FACILITY THAT PROVIDES

 12
 SERVICES TO INDIVIDUALS CERTIFIED AS REQUIRING AN INTERMEDIATE LEVEL OF

 13
 CARE.

14(12)(11)"PERSONAL CARE SERVICES" MEANS THOSE SERVICES AS15DEFINED IN ACCORDANCE WITH 42 C.F.R. 440.167 AND IN REGULATIONS ADOPTED BY16THE DEPARTMENT.

17(13)"RESIDENTIAL SERVICES AGENCIES" MEANS THOSE SERVICE18AGENCIES AS DEFINED IN REGULATIONS ADOPTED BY THE DEPARTMENT.

19(14)(12)"RESPITE CARE SERVICES" HAS THE MEANING STATED IN20REGULATIONS ADOPTED BY THE DEPARTMENT AND INCLUDES THOSE SERVICES21PROVIDED TO INDIVIDUALS UNABLE TO CARE FOR THEMSELVES FURNISHED ON A22SHORT-TERM BASIS BECAUSE OF THE ABSENCE OR NEED FOR RELIEF OF THOSE23PERSONS NORMALLY PROVIDING THE CARE.

24 (15) (13) "WAIVER" MEANS A HOME AND COMMUNITY BASED SERVICES
25 WAIVER UNDER § 1915(C) OF THE FEDERAL SOCIAL SECURITY ACT, SUBMITTED BY
26 THE DEPARTMENT TO THE HEALTH CARE FINANCING ADMINISTRATION, AS
27 REQUIRED BY SUBSECTIONS (B) AND (C) OF THIS SECTION.

28 (16) (14) "WAIVER SERVICES" MEANS THE SERVICES COVERED UNDER 29 AN APPROVED WAIVER THAT:

30 (I) ARE NEEDED AND CHOSEN BY AN ELIGIBLE WAIVER
 31 PARTICIPANT AS AN ALTERNATIVE TO INSTITUTIONALIZATION ADMISSION TO OR
 32 CONTINUED STAY IN A NURSING FACILITY; AND

33

(II) ARE PART OF A PLAN OF CARE APPROVED BY THE PROGRAM;

34 (II) (III) ASSURE THE WAIVER PARTICIPANT'S HEALTH AND 35 SAFETY IN THE COMMUNITY; AND

36(III)(IV)COST NO MORE PER CAPITA TO RECEIVE SERVICES IN THE37COMMUNITY THAN IN AN INSTITUTIONAL SETTING A NURSING FACILITY.

(B) ON OR BEFORE AUGUST 1, 1999, THE DEPARTMENT SHALL APPLY TO THE
 HEALTH CARE FINANCING ADMINISTRATION OF THE UNITED STATES DEPARTMENT
 OF HEALTH AND HUMAN SERVICES FOR AN AMENDMENT TO THE EXISTING HOME
 AND COMMUNITY BASED SERVICES WAIVER (CONTROL NUMBER 0265.90) UNDER §
 1915(C) OF THE FEDERAL SOCIAL SECURITY ACT TO RECEIVE FEDERAL MATCHING
 FUNDS FOR WAIVER SERVICES RECEIVED BY ELIGIBLE MEDICALLY AND
 FUNCTIONALLY IMPAIRED INDIVIDUALS PARTICIPATING IN THE WAIVER.

8 (C) THE DEPARTMENT'S WAIVER APPLICATION SHALL INCLUDE THE 9 FOLLOWING:

10(1)AN INITIAL CAP ON WAIVER PARTICIPATION AT 7,500 INDIVIDUALS,11INCLUDING NO LESS THAN 2,500 ASSISTED LIVING PROGRAM BEDS, 20% OF WHICH12SHALL BE RESERVED FOR BEDS IN NURSING HOMES THAT HAVE BEEN CONVERTED13TO ASSISTED LIVING BEDS;

14(2)A LIMIT ON ANNUAL WAIVER PARTICIPATION BASED ON STATE15GENERAL FUND SUPPORT AS PROVIDED IN THE BUDGET BILL;

16 (2) (3) ELIMINATION OF THE CURRENT REQUIREMENTS THAT WAIVER
17 APPLICANTS BE AT LEAST 62 YEARS OLD AND BE ELIGIBLE FOR OR ALREADY
18 RECEIVE A SUBSIDY FOR THE SENIOR ASSISTED HOUSING PROGRAM;

19 (3) (4) FINANCIAL ELIGIBILITY CRITERIA WHICH INCLUDE:

(I) THE CURRENT FEDERAL AND STATE MEDICAL ASSISTANCE
 LONG-TERM CARE RULES FOR USING FACILITY SERVICES SERVICES PROVIDED BY A
 <u>NURSING FACILITY</u>, PER §§ 1902, 1919, AND 1924 OF THE FEDERAL SOCIAL SECURITY
 ACT, AND APPLICABLE REGULATIONS ADOPTED BY THE DEPARTMENT;

(II) MEDICALLY NEEDY INDIVIDUALS USING FACILITY SERVICES
 SERVICES PROVIDED BY A NURSING FACILITY UNDER THE CURRENT FEDERAL AND
 STATE MEDICAL ASSISTANCE ELIGIBILITY CRITERIA GOVERNED BY REGULATIONS
 ADOPTED BY THE DEPARTMENT AND § 1919 OF THE FEDERAL SOCIAL SECURITY ACT;

28 (III) CATEGORICALLY NEEDY INDIVIDUALS WITH INCOME UP TO
29 300% OF THE APPLICABLE PAYMENT RATE FOR SUPPLEMENTAL SECURITY INCOME;
30 AND

31	(4)	<u>(5)</u>	WAIVER SERVICES THAT INCLUDE AT LEAST THE FOLLOWING:
32		(I)	ASSISTED LIVING SERVICES;
33		(II)	CASE MANAGEMENT SERVICES;
34		(III)	PERSONAL CARE SERVICES AND HOMEMAKER SERVICES;
35		(IV)	HOMEMAKER/HOME HOME HEALTH AIDE CARE SERVICES;
36		(V)	RESPITE CARE <u>SERVICES;</u>

6			SENATE BILL 593		
1	(VI)	HABILI	TATION CARE ASSISTIVE TECHNOLOGY;		
2	(VII)	DURAE	BLE MEDICAL EQUIPMENT;		
3	(VIII)	<u>(VII)</u>	ENVIRONMENTAL MODIFICATION MODIFICATIONS;		
 4 (IX) MEDICALLY NECESSARY SUPPLIES, INCLUDING COMPRESSION 5 HOSIERY, WHEELCHAIR PADS AND CUSHIONS, WATERPROOF MATTRESS COVERS, 6 AND FOAM RUBBER WEDGES AND OTHER FOAM RUBBER BEDDING SUPPLIES FOR 7 INDIVIDUALS RECEIVING ASSISTED LIVING SERVICES OR HOME HEALTH CARE 8 SERVICES; 					
 SHAMPOOS, SHA DISINFECTANT S SUPPLIES, AND C PERSONAL HYGI 	VING SU PRAYS, OTHER R ENE, PE	IPTION P IPPLIES, DISPOSA EASONA RSONAL	NAL HYGIENE AND PERSONAL CARE SUPPLIES, POWDERS, OINTMENTS, CREAMS, LOTIONS, TOOTHPASTE, MOUTHWASH, DENTURE CLEANERS, BLE BED PADS, DISPOSABLE INCONTINENCE BLE AND NECESSARY ITEMS RELATING TO THE CARE, GROOMING, OR COMFORT OF INDIVIDUALS RVICES OR HOME HEALTH CARE SERVICES;		
16 17 RECEIVING HOM	(XI) E HEAL		CLEANING AND LAUNDRY SUPPLIES FOR INDIVIDUALS SERVICES; AND		
18 19 <u>ORDERED BY A I</u>	(VIII) PHYSICL		ALLY NECESSARY OVER-THE-COUNTER SUPPLIES NOT OTHERWISE COVERED BY THE PROGRAM;		
20	<u>(IX)</u>	ENVIR	ONMENTAL ASSESSMENTS;		
21	<u>(X)</u>	FAMIL	Y/CONSUMER TRAINING;		
22	<u>(XI)</u>	PERSO	NAL EMERGENCY RESPONSE SYSTEMS;		
23 24 <u>SERVICES; AND</u>	<u>(XII)</u>	HOME	DELIVERED MEALS AND DIETITIAN/NUTRITION		
 27 SERVICES FOR B 28 FACILITIES FOR 2 29 CARE. 30 (D) THE E 	EING TR MEDICA DEPARTM	3 ASSIST ANSPOR L DIAGN <u>1ENT SH</u>	AMBULANCE OR OTHER TRANSPORTATION SERVICES FOR ED LIVING SERVICES OR HOME HEALTH CARE TED TO AND FROM HEALTH CARE PROVIDERS AND IOSIS OR MEDICALLY NECESSARY TREATMENT OR		
 31 <u>RESOURCE PLANNING COMMISSION TO TRY TO ASSURE THAT 20% OF ASSISTED</u> 32 <u>LIVING PROGRAM WAIVER BEDS ARE NURSING FACILITY BEDS THAT HAVE BEEN</u> 33 <u>CONVERTED TO ASSISTED LIVING BEDS.</u> 					

34 (D) (E) THIS SECTION MAY NOT BE CONSTRUED TO AFFECT, INTERFERE
 35 WITH, OR INTERRUPT ANY SERVICES REIMBURSED THROUGH THE MARYLAND
 36 MEDICAL ASSISTANCE STATE PROGRAM UNDER THIS TITLE.

1 (E) ANY SAVINGS INITIALLY REALIZED IN THE MARYLAND MEDICAL

2 ASSISTANCE LONG-TERM CARE PROGRAM FROM THE AMENDED WAIVER SHALL BE 3 USED:

4 (1) IN THE FIRST FISCAL YEAR, TO INCREASE THE MEDICAL ASSISTANCE 5 REIMBURSEMENT RATE FOR NURSING HOMES; AND

6(2)EACH FISCAL YEAR THEREAFTER, IN EQUAL PARTS, TO INCREASE7THE MEDICAL ASSISTANCE REIMBURSEMENT RATE FOR NURSING HOMES AND TO8INCREASE WAIVER PARTICIPATION.

9 (F) IF A PERSON DETERMINED TO BE ELIGIBLE TO RECEIVE WAIVER
10 SERVICES UNDER THIS SECTION DESIRES TO RECEIVE WAIVER SERVICES AND AN
11 APPROPRIATE PLACEMENT IS AVAILABLE, THE DEPARTMENT SHALL AUTHORIZE
12 THE PLACEMENT.

13 (G) AN INDIVIDUAL ELIGIBLE UNDER THE WAIVER MAY NOT BE EXCLUDED
 14 FROM ELIGIBILITY FOR OTHER TYPES OF WAIVER SERVICES.

15 (H) (G) WAIVER SERVICES SHALL BE JOINTLY ADMINISTERED BY THE
16 DEPARTMENTS OF AGING, HUMAN RESOURCES, AND HEALTH AND MENTAL
17 HYGIENE.

18(H)(H)THE DEPARTMENT, IN CONSULTATION WITH REPRESENTATIVES OF19THE AFFECTED INDUSTRY AND ADVOCATES FOR WAIVER CANDIDATES, AND WITH20THE APPROVAL OF THE DEPARTMENT OF AGING AND THE DEPARTMENT OF HUMAN21RESOURCES, SHALL ADOPT REGULATIONS TO IMPLEMENT THIS SECTION WITHIN 18022DAYS OF RECEIPT OF APPROVAL OF THE AMENDED WAIVER APPLICATION FROM THE23HEALTH CARE FINANCING ADMINISTRATION OF THE UNITED STATES DEPARTMENT24OF HEALTH AND HUMAN SERVICES.

25 (J) (I) SUBJECT TO § 2-1246 OF THE STATE GOVERNMENT ARTICLE, THE
26 DEPARTMENT SHALL REPORT TO THE GENERAL ASSEMBLY EVERY 6 MONTHS
27 CONCERNING THE STATUS OF THE DEPARTMENT'S APPLICATION UNDER
28 SUBSECTIONS (B) AND (C) OF THIS SECTION.

29 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take 30 effect July 1, 1999.