

Department of Legislative Services
Maryland General Assembly
2002 Session

FISCAL NOTE
Revised

House Bill 752

(Delegate Hubbard)

Environmental Matters

Education, Health, and Environmental Affairs

Health - Nursing Facilities - Information About Home-Based and Community-
Based Services

This bill requires a nursing facility to provide to its residents certain information on long-term care services available in the community.

Fiscal Summary

State Effect: Potential minimal Medicaid expenditure reduction, beginning in FY 2003. No effect on revenues.

Local Effect: None.

Small Business Effect: Potential minimal. To the extent nursing facility residents access community-based services, income for small businesses that provide these services could increase.

Analysis

Bill Summary: A nursing facility must, through a social worker, provide to a resident a one-page information sheet that: (1) explains the availability of services under home- or community-based waiver programs that could enable the resident to live in the community; (2) explains that if the resident's care is partially or fully reimbursed by Medicaid, the resident may be able to receive long-term care services in the community instead of in the nursing facility; (3) provides information regarding referrals to residents that may provide additional information, case management services, or evaluation

services related to home- and community-based waiver programs; and (4) is in large, easily legible type and in formats accessible to the resident.

The Department of Health and Mental Hygiene (DHMH), in consultation with the State agencies that implement the home- and community-based services programs, must prepare, distribute, and update as necessary the one-page information sheet required by the bill.

If a resident cannot contact outside entities without assistance, or if a resident requests assistance, the social workers must refer the resident to persons who can provide information or case management services that enable the resident to learn about receiving long-term care services in the community.

The long-term care case manager at a local department of social services must: (1) provide assistance to residents and make referrals to persons that may help provide additional information, case management services, or evaluation services related to Medicaid waiver programs or other options for receiving long-term care services in the community; (2) provide the same information to the resident's health care representative or legal guardian; and (3) ensure that a copy of the information provided is kept in a resident's client file.

When a resident indicates an interest in receiving long-term care services in the community, the long-term care case manager must refer the resident within ten days to persons who will provide information or case management services that enable the resident to consider the available options and apply for benefits.

A nursing facility that receives Medicaid reimbursement must provide employees or representatives of protection agencies, advocacy agencies, and centers for independent living reasonable and unaccompanied access to nursing facility residents for the purpose of providing information, training, and referral to programs and services addressing the needs of people with disabilities, including participation in programs that would enable individuals with disabilities to live outside the nursing facility.

Current Law: The Department of Health and Mental Hygiene (DHMH) and the Maryland Department of Aging (MDoA) implemented the Senior Assisted Housing Waiver in 1993. The waiver gives eligible low-income adults a choice of receiving long-term care services in a community-based setting, rather than in a nursing facility. In 1999 the waiver was expanded to cover services in all types of licensed assisted living facilities, as well as supportive services for individuals living at home. The expanded waiver, renamed the Waiver for Older Adults, was implemented in April 2001.

State Fiscal Effect: To the extent that Medicaid-eligible residents in nursing facilities transfer from the facilities to less expensive home- and community-based services, Medicaid expenditures could decrease, beginning in fiscal 2003. Medicaid expenditures assume a fund mix of 50% general and 50% federal funds. The distribution of the one-page information sheet to nursing facilities could be handled with existing DHMH resources. Revenues would not be affected.

Additional Information

Prior Introductions: None.

Cross File: None.

Information Source(s): Department of Health and Mental Hygiene (Medicaid, Office of Health Care Quality, Boards and Commissions), Department of Legislative Services

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