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By: **Senators Teitelbaum and Kelley**  
Introduced and read first time: February 4, 2005  
Assigned to: Finance

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Committee Report: Favorable with amendments  
Senate action: Adopted  
Read second time: March 29, 2005

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CHAPTER\_\_\_\_\_

1 AN ACT concerning

2 **Developmental Disabilities Administration - Prioritization System for**  
3 **Investigations**

4 FOR the purpose of requiring the Developmental Disabilities Administration, in  
5 conjunction with the Office of Health Care Quality, to adopt regulations  
6 establishing a certain prioritization system for responding to and investigating  
7 certain incidents; requiring the Administration to seek input from certain  
8 individuals in developing the regulations; and generally relating to a  
9 prioritization system for investigations of licensees of the Developmental  
10 Disabilities Administration.

11 BY repealing and reenacting, with amendments,  
12 Article - Health - General  
13 Section 7-909  
14 Annotated Code of Maryland  
15 (2000 Replacement Volume and 2004 Supplement)

16 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF  
17 MARYLAND, That the Laws of Maryland read as follows:

18 **Article - Health - General**

19 7-909.

20 (a) In this section, the word "licensee" means a person who is licensed by the  
21 Administration under this title to provide services.

1 (b) The Administration or its agent shall inspect each site or office operated by  
 2 a licensee at least once annually and at any other time that the Administration  
 3 considers necessary.

4 (c) The Administration shall keep a report of each inspection.

5 (d) The Administration shall bring any deficiencies to the attention of:

6 (1) The executive officer of the licensee; or

7 (2) In the case of an intermediate care facility-mental retardation, the  
 8 State Planning Council and the State-designated protection and advocacy agency.

9 (E) (1) THE ADMINISTRATION, IN CONJUNCTION WITH THE OFFICE OF  
 10 HEALTH CARE QUALITY, SHALL ADOPT REGULATIONS THAT ESTABLISH A SYSTEM OF  
 11 PRIORITIZATION TO RESPOND TO AND INVESTIGATE SERIOUS REPORTABLE  
 12 INCIDENTS, AS DEFINED BY THE ADMINISTRATION, IN THE AREAS OF ABUSE,  
 13 NEGLECT, SERIOUS INJURY, AND MEDICATION ERRORS THAT THREATEN THE  
 14 HEALTH, SAFETY, AND WELL-BEING OF INDIVIDUALS RECEIVING SERVICES FUNDED  
 15 BY THE ADMINISTRATION IN STATE-OPERATED AND COMMUNITY PROGRAMS  
 16 LICENSED BY THE ADMINISTRATION.

17 (2) THE ADMINISTRATION SHALL SEEK INPUT FROM INDIVIDUALS WITH  
 18 DISABILITIES AND THEIR FAMILIES, LICENSEES, AND ADVOCACY ORGANIZATIONS IN  
 19 DEVELOPING THE REGULATIONS, PRIOR TO PUBLISHING THE REGULATIONS IN THE  
 20 MARYLAND REGISTER FOR PUBLIC COMMENT.

21 (3) THE REGULATIONS SHALL DEFINE AND ADDRESS:

22 (I) THE PROCEDURES AND TIMELINES THAT PROVIDERS MUST  
 23 FOLLOW WHEN REPORTING SERIOUS REPORTABLE INCIDENTS AND DEATHS TO THE  
 24 ADMINISTRATION AND THE OFFICE OF HEALTH CARE QUALITY;

25 ~~(II) THE SYSTEM OF PRIORITIZATION FOR INVESTIGATION OF~~  
 26 ~~SERIOUS REPORTABLE INCIDENTS AND DEATHS; THE DEPARTMENT'S PROTOCOL TO~~  
 27 DETERMINE THE NECESSITY TO INVESTIGATE A SERIOUS REPORTABLE INCIDENT  
 28 THAT TAKES INTO ACCOUNT;

29 1. THE SEVERITY OF THE INCIDENT;

30 2. THE QUALITY OF THE LICENSEE'S INTERNAL  
 31 INVESTIGATION; AND

32 3. THE NUMBER AND FREQUENCY OF SERIOUS REPORTABLE  
 33 INCIDENTS REPORTED BY THE LICENSEE TO THE DEPARTMENT;

34 ~~(III) THE SPECIFIC ROLES AND RESPONSIBILITIES OF EACH~~  
 35 GOVERNMENTAL UNIT INVOLVED IN INVESTIGATING LICENSEES ANY FOLLOW-UP  
 36 INVESTIGATIONS THAT MAY OCCUR DUE TO A LICENSEE'S REPORT OF A SERIOUS  
 37 REPORTABLE INCIDENT OR DEATH;

1 ~~(III)~~ (IV) METHODS OF INVESTIGATIONS, INCLUDING ON-SITE  
2 INVESTIGATIONS;

3 ~~(IV)~~ (V) TIME LINES FOR RESPONSE TO SERIOUS REPORTABLE  
4 INCIDENTS AND DEATHS AND INVESTIGATION OF SERIOUS REPORTABLE INCIDENTS  
5 AND DEATHS;

6 ~~(V)~~ (VI) TIME LINES FOR ISSUING SPECIFIED REPORTS,  
7 INCLUDING CORRECTIVE ACTION PLANS, TO THE ADMINISTRATION, LICENSEE,  
8 MORTALITY REVIEW COMMITTEE, MEDICAID FRAUD UNIT, INDIVIDUALS RECEIVING  
9 SERVICES FROM THE LICENSEE INVOLVED IN THE INCIDENT AND THEIR GUARDIANS  
10 OR FAMILY MEMBERS, AND OTHERS; AND

11 (VII) FOLLOW-UP PROTOCOLS FOR THE OFFICE OF HEALTH CARE  
12 QUALITY AND THE ADMINISTRATION TO ENSURE THAT CORRECTIVE ACTION HAS  
13 BEEN IMPLEMENTED BY THE LICENSEE.

14 ~~(VI) FOLLOW UP MONITORING REQUIREMENTS AND TIME LINES~~  
15 ~~FOR THE OFFICE OF HEALTH CARE QUALITY AND THE ADMINISTRATION TO ENSURE~~  
16 ~~THAT CORRECTIVE ACTION HAS BEEN IMPLEMENTED BY THE LICENSEE; AND~~

17 ~~(VII) FOLLOW UP MONITORING METHODS IN THE CASE OF A~~  
18 ~~STATE OPERATED OR COMMUNITY LICENSEE THAT HAS NO DOCUMENTED SERIOUS~~  
19 ~~REPORTABLE INCIDENTS OF ABUSE OR NEGLECT WITHIN A CERTAIN PERIOD OF~~  
20 ~~TIME.~~

21 ~~(4) THE FOLLOW UP MONITORING MAY INCLUDE AN ON SITE REVIEW~~  
22 ~~TO DETERMINE THAT THERE ARE NO SERIOUS REPORTABLE INCIDENTS OF ABUSE~~  
23 ~~AND NEGLECT, MODIFIED SURVEY SCHEDULES FOR LICENSEES DEMONSTRATING~~  
24 ~~CERTAIN QUALITY STANDARDS OF COMPLIANCE, AND OTHER MEASURES TO ENSURE~~  
25 ~~THE HEALTH, SAFETY, AND WELL BEING OF INDIVIDUALS.~~

26 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect  
27 July 1, 2005.