Department of Legislative Services

Maryland General Assembly 2005 Session

FISCAL AND POLICY NOTE Revised

House Bill 1554 (Delegate Nathan-Pulliam, et al.)

Health and Government Operations

Finance

Maryland Medicaid Advisory Committee - Modifications

This bill modifies the composition of the Maryland Medicaid Advisory Committee. The bill specifies that some of the 25 members must be Medicaid recipients, hospice providers, licensed clinical social workers, and representatives from organizations that represent the interests of the following individuals: (1) individuals who are economically disadvantaged; (2) children; (3) seniors and the frail elderly; (4) individuals with mental illness; (5) individuals with developmental disabilities; (6) individuals with physical disabilities; (7) individuals with brain injuries; and (8) individuals in medical adult day care. In selecting these consumer representatives, the Secretary of Health and Mental Hygiene must seek recommendations from the State Protection and Advocacy System Organization, the Statewide Independent Living Council, the Developmental Disabilities Council, the Department of Disabilities, the Department of Aging, and the public at large. These consumer representatives may be selected to serve on the committee as a vacancy occurs. The Department of Health and Mental Hygiene (DHMH) must provide members with notice of a committee meeting at least one month in advance and a copy of the meeting agenda, including reports, background information, and other relevant material at least five days in advance.

Fiscal Summary

State Effect: The modification of committee membership could be handled with existing DHMH budgeted resources. No effect on revenues.

Local Effect: None.

Small Business Effect: None.

Analysis

Current Law: The Maryland Medicaid Advisory Committee is composed of no more than 25 members, the majority of whom must be enrollees or enrollee advocates. The committee members include: (1) current or former enrollees or the parents or guardians of current or former enrollees; (2) providers familiar with the medical needs of low-income groups; (3) hospital representatives; (4) advocates for the Medicaid population, including representatives of special needs populations; (5) two members of the Senate Finance Committee; (6) three members of the House of Delegates; and (7) three exofficio members. The committee must advise DHMH on the implementation, operation, and evaluation of Medicaid managed care programs, review and make recommendations on a variety of health care delivery and quality of care issues, and submit an annual report to the General Assembly.

Additional Information

Prior Introductions: None.

Cross File: None.

Information Source(s): Department of Health and Mental Hygiene (Medicaid),

Department of Legislative Services

Fiscal Note History: First Reader - March 21, 2005

mll/jr Revised - House Third Reader - April 9, 2005

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