HOUSE BILL 113

J1, O2 9lr0883

By: Delegates Hubbard and Hammen, Hammen, and Oaks

Introduced and read first time: January 22, 2009 Assigned to: Health and Government Operations

Committee Report: Favorable with amendments

House action: Adopted

Read second time: March 24, 2009

CHAPTER ____

1 AN ACT concerning

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Interagency Committee on Aging Services - Modifications

Department of Health and Mental Hygiene - Long-Term Care Supports and

Services - Report

FOR the purpose of altering the membership of the Interagency Committee on Aging 5 6 Services: requiring the Interagency Committee to report on certain 7 recommendations to the General Assembly on or before a certain date; requiring 8 the Interagency Committee to create certain subcommittees, review certain 9 plans and reports, and identify certain service needs of seniors and adults with 10 disabilities in the State; altering the information to be included in a certain annual report; making technical changes; and generally relating to the 11 Interagency Committee on Aging Services requiring the Secretary of Health and 12 13 Mental Hygiene to submit certain reports to the General Assembly on or before certain dates; providing for the purpose of a certain program; requiring the 14 15 Secretary to convene a certain stakeholder group and provide for a certain 16 stakeholder process; providing for the membership of a certain stakeholder group; and generally relating to the Department of Health and Mental Hygiene 17 and a report on long-term care supports and services. 18

19 BY repealing and reenacting, without amendments,

Article - Human Services

21 Section 10-301 and 10-309

22 Annotated Code of Maryland

23 (2007 Volume and 2008 Supplement)

BY repealing and reenacting, with amendments,

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

<u>Underlining</u> indicates amendments to bill.

Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.

1	Article - Human Services				
$\overset{-}{2}$	Section 10 302, 10 303, 10 304, 10 306, and 10 310				
3	Annotated Code of Maryland				
4	(2007 Volume and 2008 Supplement)				
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5	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF				
6	MARYLAND, That:				
7	(a) The Secretary of Health and Mental Hygiene shall submit to the General				
8	Assembly an interim report on or before December 1, 2009, and a final report on or				
9	before December 1, 2010, in accordance with § 2–1246 of the State Government				
10	Article, on the feasibility of creating a coordinated care program to reform the				
11	provision of long-term care services under the Medical Assistance program and other				
12	State programs in a manner that improves and integrates the care of individuals,				
13	including health care services, designed as necessary to meet the differing needs of				
$\frac{13}{14}$	seniors and adults with disabilities in the State.				
14	semois and addits with disabilities in the State.				
15	(b) The purpose of the program created under subsection (a) of this section is				
16	to:				
	<u></u>				
17	(1) deliver high-quality long-term care supports and services in a				
18	coordinated and integrated manner;				
19	(2) <u>deliver long-term care supports and services in the most</u>				
20	appropriate care setting to meet the needs and preferences of eligible individuals;				
21	(3) remove systemic and individual barriers to receiving care in				
22	home- and community-based settings, as preferred by the individual; and				
23	(4) ensure that, if the State plans to manage long-term care through				
24	at-risk contracts, the carve-out of mental health services and hospice services are				
25	implemented as required by Chapter 4 of the Acts of the General Assembly of the 2004				
26	Special Session.				
27	(c) In developing the interim report required under subsection (a) of this				
28	section, the Secretary shall conduct a literature review of the items included in				
29	subsection (d)(2)(i) of this section and the process for convening the stakeholders				
30	required under subsection $(d)(1)$ of this section.				
01					
31	(d) In developing the final report required under subsection (a) of this				
32	section, the Secretary shall:				
33	(1) convene a group of stakeholders both public and private and				
34					
35	representatives of interested and affected parties as provided under subsection (e) of				
	this section, to evaluate and make recommendations consistent with the requirements				
36	of this Act; and				

$\begin{matrix} 1 \\ 2 \\ 3 \end{matrix}$	(2) provide for a stakeholder process to develop recommendations for a coordinated care program consistent with the purpose of this section that includes a review of:		
4 5 6 7 8 9 10 11	(i) long—term plans, consensus reports, experiences, and best practices of the State and other states, relating to the management and coordination of long—term care supports and services, including mental health and behavioral health supports and services for individuals outside of the public mental health system, under the Medical Assistance program and other State programs, including programs that have carved out nursing home services, programs or plans that are administered within a State agency or by an independent entity, and the Community Choice Advisory Group's consensus recommendations;		
12 13	(ii) the Department's plan for evaluating the existing homeand community-based services infrastructure, including:		
14 15 16	1. identifying the projected need and cost for additional services adequate to support the needs of the population, including strategies to encourage the development of the additional services;		
17 18	2. <u>utilizing funds from the American Recovery and Reinvestment Act of 2009, to the extent practicable;</u>		
19 20	3. considering whether to pursue a pilot or statewide program; and		
21 22 23 24	4. identifying any other areas in which the service needs of seniors and adults with disabilities in the State should be addressed, including streamlined electronic eligibility determinations and electronic billing components; and		
25 26	(iii) whether a federal waiver is necessary to create a coordinated care program and, if so, the type of waiver that should be sought.		
27 28			
29	(1) legislators;		
30	(2) affected State agencies;		
31 32	(3) providers with experience in dementia, geriatrics, end-of-life care, mental health, and disabilities in younger adults;		
33	(4) long-term care providers;		
34	(5) managed care organizations;		

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1	<u>(</u>	<u>(6)</u>	acute care providers;
2	<u>)</u>	<u>(7)</u>	lay care providers;
3 4	services; and	<u>(8)</u>	advocates for individuals receiving long-term care or community
5	<u>(</u>	<u>(9)</u>	consumers.
6 7 8 9 10	subsection (a) that would en) of the	Department shall include, in the final report required under his section, draft legislation for approval by the General Assembly he consensus recommendations developed through the stakeholder is section and a timeframe for submitting a federal waiver, in
11 12	22011	- ·	1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF the Laws of Maryland read as follows:
13			Article - Human Services
14	10-301.		
15 16	There- Department.	is a ı	n Interagency Committee on Aging Services in the Executive
17	10-302.		
18	(a)	Fhe I1	nteragency Committee consists of the following members:
19	€	(1)	the Secretary of Aging;
20	((2)	the Secretary of Disabilities;
21	•	(3)	the Secretary of Health and Mental Hygiene;
22	((4)	the Secretary of Housing and Community Development;
23	•	(5)	the Secretary of Human Resources;
24	•	(6)	the Secretary of Labor, Licensing, and Regulation;
25	•	(7)	the Secretary of Transportation;
26 27	DEVELOPME	(8)	THE SECRETARY OF BUSINESS AND ECONOMIC

1	(9) THE SECRETARY OF HIGHER EDUCATION	N;
2	(10) THE SECRETARY OF BUDGET AND MANA	AGEMENT;
3 4 5	Governor from a list submitted by the Maryland Association	
6	[(9)] (12) a member of the public appointed by	the Governor.
7 8	(iv) (=) ==== ============================	vernor under subsection
9 10 11	(9)] (A)(11) OR (12) of this section may not be reappointed for	
12	10-303.	
13 14	7	
15	10-304.	
16 17		e principal staff of the
18	(2) The Executive Director shall be an employe	ee of the Department.
19 20 21	through [(7)] (10) of this subtitle shall designate an emplo	
22	(1) implement policies of the Interagency Com	mittee; and
23	(2) monitor the expenditure of funds to serve s	eniors.
24	10–306.	
25 26 27 28	plan for providing coordinated health services, social services, and employment services to seniors in the State consistent with	transportation, housing,
29 30	· · ·	ittee cannot agree on a

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1 2 3	(b) Annually on or before a date that the Governor sets, the Interagence Committee shall develop and present to the Governor and the General Assembly consolidated operating budget for services to seniors that:
4 5	(1) sets forth the relevant portions of the operating budget of any unresponsible for services to seniors; and
6 7	(2) is consistent with the plan developed under subsection (a) of this section.
8 9	(c) The Interagency Committee shall establish interagency agreements an adopt regulations to:
10 11	(1) implement and coordinate services to seniors consistent with the plan developed under subsection (a) of this section;
12 13	(2) maximize the sharing of resources among units of Stategovernment for services to seniors;
14 15	(3) consolidate planning and evaluation efforts at the State and localevels; and
16 17	(4) coordinate and expedite the delivery of services to seniors b providing technical assistance to local agencies.
18 19	(d) (1) The Interagency Committee shall assist county agencies testablish local interagency committees composed of:
20 21	(i) the directors of the local health department, local department of social services, and area agency; and
22 23	(ii) officials from housing, transportation, mental health employment, and economic development agencies.
24 25	(2) Local interagency committees shall coordinate and expedite the delivery of services to seniors at the local level.
26 27 28 29 30 31	(E) (1) ON OR BEFORE JANUARY 1, 2010, THE INTERAGENCE COMMITTEE SHALL REPORT TO THE GENERAL ASSEMBLY, IN ACCORDANCE WITH § 2-1246 OF THE STATE GOVERNMENT ARTICLE, ON CONSENSU RECOMMENDATIONS TO REFORM THE PROVISION OF MEDICAL ASSISTANCE PROGRAM LONG-TERM CARE SERVICES, INCLUDING HEALTH SERVICES DESIGNED AS NECESSARY TO MEET THE DIFFERING NEEDS OF SENIORS AND
32	ADULTS WITH DISABILITIES IN THE STATE.

IN DEVELOPING THE RECOMMENDATIONS REQUIRED UNDER

PARAGRAPH (1) OF THIS SUBSECTION, THE INTERAGENCY COMMITTEE SHALL:

1		(I) CREATE STAKEHOLDER SUBCOMMITTEES CONSISTING
2	OF PROVIDER	S, CONSUMERS, ADVOCATES, AND LOCAL INTERAGENCY
3	COMMITTEES T	O ASSIST IN THE DEVELOPMENT OF THE RECOMMENDATIONS;
4		(II) REVIEW LONG-TERM CARE PLANS AND CONSENSUS
5	REPORTS CRE	ATED IN THE STATE AND IN OTHER STATES RELATED TO
6		ARE, INCLUDING LONG-TERM CARE MANAGED CARE; AND
7		(HI) IDENTIFY AREAS IN WHICH THE SERVICE NEEDS OF
8	SENIORS AND	ADULTS WITH DISABILITIES IN THE STATE NEED TO BE
9	ADDRESSED.	
10	10-309.	
1	(a) (1)	The Interagency Committee shall:
12		(i) develop a system to provide services to frail or
13	health-impaired	seniors at risk of institutionalization; and
L 4		(ii) coordinate the system among the agencies represented on
L 5	the Interagency	
L6	(2)	The Department shall administer the system for the Interagency
L 7	Committee.	
18	(b) The	services shall include:
19	(1)	integrated screening and evaluation;
20	(<u>2)</u>	development of an individual plan of care;
21	(3)	in-home services such as minor home repair, shopping assistance,
22		rsonal care, meal delivery or preparation, supportive services to group
23	or shared living	arrangements, transportation services, and health services; and
24	(4)	community services such as day care, congregate meals, and other
25	programs to assi	st seniors or adult caregivers in providing care for seniors.
26	(c) To	be eligible to participate in the system, a county or counties shall
27		nunity-based plan that:
28	(1)	is developed by a local or regional committee composed of:
29		(i) the directors of the local health department, local
30	department of so	cial services, and area agency; and

1		(ii) officials of other relevant agencies, such as local housing,	
2	transportation, en	nployment, and economic development officials;	
3	(2)	is consistent with the plan developed under § 10-306(a) of this	
4	subtitle;	is consistent with the plan developed and 5 to 500(a) of this	
5	(3)	gnorifies administrative arrangements to evaluate and develop	
6	` '	specifies administrative arrangements to evaluate and develop l or health-impaired seniors;	
	P-00-10 -0		
7	(4)	encourages further coordination of service delivery;	
8	(5)	fosters individual contributions for services provided;	
9	(6)	fosters the development of innovative service delivery;	
10	(7)	fosters the development of services in conjunction with the private	
11	sector; and	·	
12	(8)	fosters community involvement through the use of volunteers.	
13	(d) The	Interescence Committee through the Department shall work with	
$\frac{13}{14}$	(d) The Interagency Committee, through the Department, shall work with local health departments, local departments of social services, area agencies, and local		
15		tation, economic development, and employment development officials	
16	to develop:	••••••••••••••••••••••••••••••••••••••	
	•		
17	(1)	a system to designate case managers to secure and manage	
18	necessary services	s for each frail or health-impaired senior in need; and	
19	(2)	guidelines to establish local or regional committees to coordinate	
20		m to implement this section.	
	v	•	
21	10-310.		
22	Subject to	§ 2-1246 of the State Government Article, the Interagency	
23		present a report before each legislative session to the General	
$\frac{24}{24}$	Assembly on:	Proposite of report position contains a constain	
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25	(1)	the plan developed under § 10-306(a) of this subtitle, INCLUDING	
26	A DESCRIPTION	OF ANY CHANGES AND UPDATES TO THE PLAN;	
27	(2)	THE STATUS OF THE SYSTEM DEVIS OPEN LINDER \$ 10, 200 OF	
28	` '	THE STATUS OF THE SYSTEM DEVELOPED UNDER § 10–309 OF	
20	THIS SUBTITLE;		
29	[(2)]	(3) the activities of the Interagency Committee; and	
30	[(3)]	(4) the status of services to seniors in the State.	

SECTION 2. AND BE IT FURTHER E July 1, 2009.	ENACTED, That this Act shall take effect
ouly 1, 2000.	
Approved:	
	Governor.
	Speaker of the House of Delegates.
	President of the Senate.