J3, O2 9lr2309

By: Delegates Love, Cardin, Costa, Kipke, Lafferty, Montgomery, Simmons, and Stein

Introduced and read first time: February 11, 2009 Assigned to: Health and Government Operations

A BILL ENTITLED

1	AN ACT concerning									
 Continuing Care Retirement Communities – Subscriber Complaints a Investigations 										
4 5 6 7 8 9 10 11	community's internal grievance procedure; shortening the time frame within which certain subscribers have the right to meet with management of a provider; authorizing subscribers to submit a certain request to the Long-Term Care Ombudsman under certain circumstances; requiring the Long-Term Care Ombudsman to provide certain written conclusions to certain individuals and to the Department of Aging; and generally relating to continuing care retirement									
12 13 14 15 16	BY repealing and reenacting, with amendments, Article – Human Services Section 10–428 Annotated Code of Maryland (2007 Volume and 2008 Supplement)									
17 18 19 20 21	BY adding to Article – Human Services Section 10–430 Annotated Code of Maryland (2007 Volume and 2008 Supplement)									
22 23	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:									
24	Article - Human Services									
25	10–428.									

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.



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1	(a)	A provider	shall	establish	an	internal	grievance	procedure	to	address	a
2	subscriber's	grievance.									

- (b) The internal grievance procedure shall **AT LEAST**:
- 4 (1) allow a subscriber **OR GROUP OF SUBSCRIBERS** to submit a written grievance to the provider **IN ANY FORM**;
- 6 (2) ALLOW FOR THE ESTABLISHMENT OF A PANEL CONSISTING OF
 7 AT LEAST THREE SUBSCRIBERS TO REVIEW AND PRESENT GRIEVANCES TO
 8 MANAGEMENT ON BEHALF OF A GRIEVANT WITHOUT FEAR OF REPRISAL;
- 9 [(2)](3) require the provider to send a written acknowledgment to the subscriber within 5 days after receipt of the written grievance;
- 11 (4) REQUIRE THE PROVIDER TO ASSIGN PERSONNEL TO 12 INVESTIGATE THE GRIEVANCE AND ITS CAUSE IN A PROMPT MANNER;
- [(3)](5) give a subscriber who files a written grievance the right to meet with management of the provider within [45] **30** days after receipt of the written grievance to present the subscriber's grievance; and
- 16 [(4)](6) require the provider to respond within 45 days after receipt 17 of the written grievance regarding the investigation and resolution of the grievance.
- 18 **10–430.**
- 19 (A) If A SUBSCRIBER IS NOT SATISFIED WITH THE RESOLUTION OF A
 20 GRIEVANCE AS DECIDED BY A PROVIDER UNDER § 10–428 OF THIS SUBTITLE,
 21 THE SUBSCRIBER MAY SUBMIT A REQUEST TO THE LONG-TERM CARE
 22 OMBUDSMAN TO INVESTIGATE AND REVIEW THE COMPLAINT.
- 23 (B) THE LONG-TERM CARE OMBUDSMAN SHALL PROVIDE WRITTEN
 24 CONCLUSIONS RELATED TO THE INVESTIGATION AND REVIEW OF THE
 25 COMPLAINT TO THE GRIEVANT, THE MANAGEMENT OF THE RELEVANT
 26 CONTINUING CARE RETIREMENT COMMUNITY, AND THE DEPARTMENT.
- SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2009.