CHAPTER 694

(House Bill 843)

AN ACT concerning

Continuing Care Retirement Communities - Subscriber Complaints and Investigations Internal Grievance Procedure and Mediation

FOR the purpose of adding to the requirements for a continuing care retirement 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 providers to seek certain mediation services within a certain time after the conclusion of a certain internal grievance procedure; and generally relating to continuing care retirement communities and subscriber complaints and investigations internal grievance procedures and mediation.

BY repealing and reenacting, with amendments,

Article – Human Services Section 10–428 Annotated Code of Maryland (2007 Volume and 2008 Supplement)

BY adding to

Article - Human Services
Section 10-430
Annotated Code of Maryland
(2007 Volume and 2008 Supplement)

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

Article - Human Services

10-428.

- (a) A provider shall establish an internal grievance procedure to address a subscriber's grievance.
 - (b) The internal grievance procedure shall **AT LEAST**:

- (1) allow a subscriber **OR GROUP OF SUBSCRIBERS** <u>COLLECTIVELY</u> to submit a written grievance to the provider IN ANY FORM;
- (2) ALLOW FOR THE ESTABLISHMENT OF A PANEL CONSISTING OF AT LEAST THREE SUBSCRIBERS TO REVIEW AND PRESENT GRIEVANCES TO MANAGEMENT ON BEHALF OF A GRIEVANT WITHOUT FEAR OF REPRISAL:
- $\{(2)\}$ require the provider to send a written acknowledgment to the subscriber within 5 days after receipt of the written grievance;
- (4) (3) REQUIRE THE PROVIDER TO ASSIGN PERSONNEL TO INVESTIGATE THE GRIEVANCE AND ITS CAUSE IN A PROMPT MANNER;
- [(3)](5) (4) 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
- [(4)](6) (5) require the provider to respond within 45 days after receipt of the written grievance regarding the investigation and resolution of the grievance.
- (C) (1) WITHIN 30 DAYS AFTER THE CONCLUSION OF AN INTERNAL GRIEVANCE PROCEDURE ESTABLISHED UNDER THIS SECTION, A SUBSCRIBER OR PROVIDER MAY SEEK MEDIATION THROUGH ONE OF THE COMMUNITY MEDIATION CENTERS IN THE STATE OR ANOTHER MEDIATION PROVIDER.
- (2) If a provider or subscriber seeks mediation under paragraph (1) of this subsection:
 - (I) THE MEDIATION SHALL BE NONBINDING; AND
- (II) THE PROVIDER AND SUBSCRIBER MAY NOT BE REPRESENTED BY COUNSEL.

10-430.

- (A) If a subscriber is not satisfied with the resolution of a grievance as decided by a provider under § 10-428 of this subtitle, the subscriber may submit a request to the Long-Term Care Ombudsman to investigate and review the complaint.
- (B) THE LONG-TERM CARE OMBUDSMAN SHALL PROVIDE WRITTEN CONCLUSIONS RELATED TO THE INVESTIGATION AND REVIEW OF THE COMPLAINT TO THE GRIEVANT, THE MANAGEMENT OF THE RELEVANT CONTINUING CARE RETIREMENT COMMUNITY, AND THE DEPARTMENT.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2009.

Approved by the Governor, May 19, 2009.