

Department of Legislative Services
Maryland General Assembly
2009 Session

FISCAL AND POLICY NOTE
Revised

House Bill 462

(Delegate Hubbard, *et al.*)

Health and Government Operations

Finance

Medicaid State Plan and Medical Assistance Program - Amendments and
Waiver Applications

This bill requires the Department of Health and Mental Hygiene (DHMH) to provide notice of an amendment to the State Medicaid Plan by publication in the *Maryland Register* and submission to the Medicaid Advisory Committee (MAC) for discussion at a MAC meeting. An opportunity for public comment on the amendments must also be provided.

Fiscal Summary

State Effect: The bill's requirements can be handled with existing DHMH budgeted resources.

Local Effect: None.

Small Business Effect: None.

Analysis

Current Law: If DHMH submits an amendment to the Medicaid State Plan or the Medicaid program to the federal Centers for Medicare or Medicaid Services (CMS), DHMH must provide a copy of the amendment to MAC members within five days. DHMH is not required to publish the amendments in the *Maryland Register* and there is no requirement that amendments be discussed at a MAC meeting.

If DHMH applies for a Medicaid waiver or modifies or amends an existing Medicaid waiver, the department must give notice of the application by (1) publication in the *Maryland Register*; and (2) submission of the application or amendment to MAC for discussion at a MAC meeting. For 30 days following publication in the *Maryland Register*, DHMH must make the waiver application available to the public during business hours and provide an opportunity to receive public comments.

Background: The State Medicaid Plan is the document that defines how Maryland operates its Medicaid program. State plans address State program administration, Medicaid eligibility criteria, service coverage, and provider reimbursement. State plans (and amendments) are submitted to CMS for review and approval and provide a public record of the rules that operate under each state's program. While some State plan amendments make significant changes, many amendments are routine and do not impact enrollees. Federal law also allows states to apply to CMS for waivers from certain Medicaid and Maryland Children's Health Program requirements. State Plan amendments and waiver applications submitted to CMS and any resulting regulations submitted to the Joint Committee on Administrative, Executive, and Legislative Review (AELR) contain a projected fiscal impact, the projected impact on program enrollees and providers, and the process for obtaining stakeholder input.

Over the past three fiscal years, Medicaid has submitted an average of 10 State Plan amendments and 30 new or amended regulations to alter the Medicaid program annually. According to DHMH, submission can be an administratively burdensome process and completion of current statutory requirements in a timely manner has been difficult due to limited personnel.

MAC is composed of up to 25 members, the majority of whom must be enrollees or enrollee advocates. MAC meets monthly to 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: As introduced, HB 1574 of 2006 (Chapter 501 of 2006) would have required public notice of Medicaid State Plan or Medicaid program amendments. This language was removed via amendment by the House Health and Government Operations Committee.

Cross File: None.

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

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