## **Department of Legislative Services**

Maryland General Assembly 2017 Session

## FISCAL AND POLICY NOTE Third Reader

Senate Bill 240

(Senator Robinson, et al.)

Finance

Health and Government Operations

## Department of Health and Mental Hygiene - Abuser Registry Workgroup Recommendations - Report

This bill requires the Department of Health and Mental Hygiene (DHMH) to provide a progress report on the status of implementing the recommendations of the Abuser Registry Workgroup. DHMH must report on (1) the creation of a universal definition of abuse; (2) reducing incidences of abuse in health care settings through education about reporting requirements, awareness of abuse and neglect, and consistent enforcement of existing laws; (3) assessing the feasibility of establishing an employee database of direct access employees as part of either a Maryland Background Check Program or a separate and parallel system; and (4) establishing the Maryland Background Check Program as a tool to reduce abuse, neglect, and misappropriation of funds in long-term care facilities. The report must be delivered to the Governor and the General Assembly by September 1, 2017.

The bill takes effect June 1, 2017.

# **Fiscal Summary**

**State Effect:** The Office of Health Care Quality (OHCQ) can likely implement the bill's requirements with existing resources, as discussed below; otherwise, general fund expenditures may increase minimally in FY 2017 and 2018. Revenues are not affected.

Local Effect: None.

**Small Business Effect:** None.

#### **Analysis**

Current Law/Background: Background checks and databases of direct access employees have been active areas of discussion in recent years. As amended, Senate Bill 316 of 2012 would have required DHMH to convene a workgroup to examine issues relating to the creation of a health care facility abuser registry. Although that bill did not pass, OHCQ voluntarily convened an Abuser Registry Workgroup. The workgroup outlined its findings and conclusions in a letter dated January 14, 2013.

Subsequently, as required by Chapters 239 and 606 of 2013, the 2012 Abuser Registry Workgroup reconvened. In its report issued in March 2014, the workgroup recommended (1) considering creating a universal definition of abuse; (2) continuing to raise awareness of abuse and neglect among consumers and other stakeholders; (3) increasing educational opportunities regarding the identification and reporting of abuse for providers, direct access employees, first responders, prosecutors, and others; (4) promoting complete and consistent enforcement of current law and regulations; (5) reviewing and revising, as needed, regulations that provide consequences to employers who fail to report an employee suspected of or having committed abuse or neglect; (6) considering creating an employee database of direct access employees as part of either a Maryland background check program or a separate and parallel system; and (7) establishing a Maryland background check program to reduce abuse and neglect through a more comprehensive system to identify individuals with a criminal history prior to hiring, while ensuring due process. To date, none of the recommendations has been implemented by legislation.

**State Fiscal Effect:** DHMH advises that OHCQ would be responsible for preparing the required report. OHCQ indicates that the bill requires engaging representatives of 61 provider types potentially impacted by the bill to determine the feasibility of developing a universal definition of abuse. According to OHCQ, it has previously advised the legislature on the four topics addressed by the bill as recently as 2015. Ultimately, OHCQ advises that, in order to fulfill the bill's requirements, it needs to hire one full-time contractual employee for a period of three months to draft the report. The Department of Legislative Services (DLS) notes that the bill only requires DHMH to provide a progress report on the *status of implementing* the recommendations of the Abuser Registry Workgroup, not to assess the feasibility of implementing the recommendations, develop new assessments, or make its own recommendations. As a result, DLS advises that the bill's requirements can be handled with existing budgeted resources. Should additional personnel or resources be required to produce a more robust report, general fund expenditures increase minimally in fiscal 2017 and 2018.

### **Additional Information**

**Prior Introductions:** HB 279 of 2016 received an unfavorable report from the House Health and Government Operations Committee.

Cross File: None.

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

Legislative Services

**Fiscal Note History:** First Reader - January 30, 2017 md/ljm Third Reader - March 21, 2017

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