

**Department of Legislative Services**  
Maryland General Assembly  
2017 Session

**FISCAL AND POLICY NOTE**  
**Enrolled - Revised**

Senate Bill 47

(Chair, Finance Committee)(By Request - Departmental - Aging)

Finance

Health and Government Operations

**Reporting Abuse to the Long-Term Care Ombudsman Program and the Office of Health Care Quality**

This departmental bill alters State mandatory reporting requirements, for cases of alleged or suspected abuse of a vulnerable adult, to create an exception for the State Long-Term Care (LTC) Ombudsman or an individual designated as an ombudsman. Under the exception, an ombudsman is not required to disclose, and indeed is prohibited from disclosing, the identity of a resident or complainant unless specified consent is given as required under federal law. Thus, the bill conforms the State reporting requirement to confidentiality requirements included in federal law and regulation.

Additionally, the bill alters reporting requirements so that a person who believes a resident of a facility has been abused must report the alleged abuse to an appropriate law enforcement agency *and* the Office of Health Care Quality (OHCQ). If OHCQ receives such a report, OHCQ must promptly notify the LTC Ombudsman Program. The bill clarifies that (1) the person must report the alleged abuse to both specified entities, instead of to any one of three currently specified entities, and (2) unless the administrator of the facility is the alleged abuser, the recipient of a report must notify the administrator of the related institution, to the extent allowed by federal and State law. The bill also makes other technical and clarifying changes.

**Fiscal Summary**

**State Effect:** The bill is not anticipated to materially affect State operations or finances.

**Local Effect:** The bill is not anticipated to materially affect local operations or finances.

**Small Business Effect:** The Maryland Department of Aging (MDOA) has determined that this bill has minimal or no impact on small business (attached). The Department of Legislative Services concurs with this assessment. (The attached assessment does not reflect amendments to the bill.)

---

## Analysis

### Current Law:

#### *Mandatory Reporting*

Any health care practitioner, police officer, or human service worker who contacts, examines, attends, or treats an alleged vulnerable adult, and who has reason to believe that the alleged vulnerable adult has been subjected to abuse, neglect, self-neglect, or exploitation, must notify the local department of social services. If the health care practitioner, police officer, or human service worker is a staff member of a hospital or public health agency, he or she must immediately notify and give all the information required by law to the head of the institution or its designee. The report must be made by telephone, in writing, or by direct communication as soon as possible.

#### *Reporting Alleged Abuse in Health Care Facilities*

A person who believes that a resident has been abused must promptly report the alleged abuse to an appropriate law enforcement agency, the Secretary of Health and Mental Hygiene, or MDOA. A report may be oral or written, and it must contain as much information as the reporter is able to provide. The recipient of the report must promptly notify (1) the other two entities and (2) unless the administrator is the alleged abuser, the administrator of the facility. Any employee required to report abuse, who fails to do so within three days, is liable for a civil penalty of up to \$1,000.

**Background:** The LTC Ombudsman Program was established under federal mandate through the Older Americans' Act. LTC ombudsmen are advocates for residents of nursing homes, board and care homes, assisted living facilities, and similar adult care facilities. They work to resolve problems of individual residents and to bring about changes at the local, state, and national levels that will improve residents' care and quality of life.

Begun in 1972 as a demonstration program, the Ombudsman Program today exists in all states, the District of Columbia, Puerto Rico, and Guam. Each state has an Office of the State LTC Ombudsman, headed by a full-time state ombudsman. Local ombudsman staff and volunteers work in communities throughout the country as part of the statewide ombudsman programs.

The statewide programs are federally funded under Titles III and VII of the Older Americans' Act and other federal, state, and local sources. The National Administration on Aging-funded National Long-Term Care Ombudsman Resource Center provides training and technical assistance to state and local ombudsmen.

---

### **Additional Information**

**Prior Introductions:** None.

**Cross File:** None.

**Information Source(s):** Maryland Department of Aging; Baltimore, Carroll, Montgomery, Queen Anne's, and St. Mary's counties; Department of Health and Mental Hygiene; Department of Human Resources; Department of State Police; Department of Legislative Services

**Fiscal Note History:** First Reader - January 16, 2017  
kb/ljm Third Reader - March 17, 2017  
Revised - Amendment(s) - March 17, 2017  
Enrolled - May 4, 2017  
Revised - Amendment(s) - May 4, 2017

---

Analysis by: Nathan W. McCurdy

Direct Inquiries to:  
(410) 946-5510  
(301) 970-5510

## ANALYSIS OF ECONOMIC IMPACT ON SMALL BUSINESSES

TITLE OF BILL: Reporting and Investigation of Abuse in Related Institutions

BILL NUMBER: SB 47

PREPARED BY: Maryland Department of Aging – Andrew Ross, [andrew.ross@maryland.gov](mailto:andrew.ross@maryland.gov),  
410-767-2116

### PART A. ECONOMIC IMPACT RATING

This agency estimates that the proposed bill:

WILL HAVE MINIMAL OR NO ECONOMIC IMPACT ON MARYLAND SMALL  
BUSINESS

OR

WILL HAVE MEANINGFUL ECONOMIC IMPACT ON MARYLAND SMALL  
BUSINESSES

### PART B. ECONOMIC IMPACT ANALYSIS

Bill impacts Long-Term Care Ombudsmen who are not small business owners. Their revised actions due to this bill would have no economic impact on small businesses.