$\begin{array}{c} \rm J1 \\ \rm CF~SB~699 \end{array}$

By: Delegates Pena-Melnyk, B. Barnes, Barron, Bartlett, Carr, Charles, Cullison, Fennell, Hettleman, Lehman, J. Lewis, R. Lewis, Proctor, Rosenberg, Sample-Hughes, Valentino-Smith, and K. Young K. Young, Pendergrass, Bagnall, Bhandari, Hill, Johnson, Kelly, Kerr, Kipke, Krebs, Metzgar, Morgan, Saab, and Szeliga

Introduced and read first time: February 8, 2019 Assigned to: Health and Government Operations

Committee Report: Favorable with amendments

House action: Adopted

Read second time: March 27, 2019

CHAPTI	${ m ER}$

- 1 AN ACT concerning
- 2 Maryland Medical Assistance Program Home– and Community–Based Waiver 3 Services – Prohibition on Denial
- 4 FOR the purpose of prohibiting the Maryland Department of Health from denying an individual access to a home- and community-based services waiver due to a lack of 5 6 funding for waiver services if the individual is living at home or in the community at 7 a certain time, received certain services for a certain time period, will be or has been 8 terminated from the Maryland Medical Assistance Program due to becoming entitled 9 to or enrolled in a certain program, meets certain eligibility criteria within a certain time period, and certain services received by the individual would qualify for certain 10 funds; and generally relating to home- and community-based services under the 11 12 Maryland Medical Assistance Program.
- 13 BY repealing and reenacting, with amendments,
- 14 Article Health General
- 15 Section 15–137
- 16 Annotated Code of Maryland
- 17 (2015 Replacement Volume and 2018 Supplement)
- 18 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
- 19 That the Laws of Maryland read as follows:

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

<u>Underlining</u> indicates amendments to bill.

Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.



1 Article - Health - General

- 2 15–137.
- 3 (a) The Department may not deny an individual access to a home— and 4 community—based services waiver due to a lack of funding for waiver services if:
- 5 (1) (I) The individual is living in a nursing facility at the time of the 6 application for waiver services;
- 7 **[(2)] (II)** At least 30 consecutive days of the individual's nursing facility 8 stay are eligible to be paid for by the Program;
- 9 **[**(3)**] (III)** The individual meets all of the eligibility criteria for 10 participation in the home—and community—based services waiver; and
- [(4)] (IV) The home— and community—based services provided to the individual would qualify for federal matching funds; OR
- 13 (2) (I) THE INDIVIDUAL IS LIVING AT HOME OR IN THE COMMUNITY 14 AT THE TIME OF THE APPLICATION FOR WAIVER SERVICES;
- 15 (II) THE INDIVIDUAL RECEIVED HOME— AND 16 COMMUNITY-BASED SERVICES THROUGH COMMUNITY FIRST CHOICE FOR AT 17 LEAST 30 CONSECUTIVE DAYS;
- 18 (III) THE INDIVIDUAL WILL BE OR HAS BEEN TERMINATED FROM
 19 PARTICIPATION IN THE PROGRAM ON BECOMING ENTITLED TO OR ENROLLED IN
 20 MEDICARE PART A OR ENROLLED IN MEDICARE PART B;
- 21 (IV) THE INDIVIDUAL MEETS ALL OF THE ELIGIBILITY CRITERIA 22 FOR PARTICIPATION IN THE HOME- AND COMMUNITY-BASED SERVICES WAIVER 23 WITHIN 6 MONTHS AFTER BEING NOTIFIED OF ELIGIBILITY THE COMPLETION OF 24 THE APPLICATION; AND
- 25 (V) THE HOME- AND COMMUNITY-BASED SERVICES PROVIDED 26 TO THE INDIVIDUAL WOULD QUALIFY FOR FEDERAL MATCHING FUNDS.
- 27 (b) Nothing in this section is intended to result in a reduction of federal funds 28 available to the Department.
- SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect July 1, 2019.