## **SENATE BILL 699**

J1 9lr1383 CF HB 832 By: Senators Kelley, Augustine, Beidle, Benson, Feldman, Guzzone, Hayes,

#### By: Senators Kelley, Augustine, Beidle, Benson, Feldman, Guzzone, Hayes, Kramer, Lee, Nathan–Pulliam, and West

Introduced and read first time: February 4, 2019 Assigned to: Finance

Committee Report: Favorable with amendments Senate action: Adopted Read second time: March 17, 2019

CHAPTER \_\_\_\_\_

### 1 AN ACT concerning

# Maryland Medical Assistance Program – Home– and Community–Based Waiver Services – Prohibition on Denial

4 FOR the purpose of prohibiting the Maryland Department of Health from denying an  $\mathbf{5}$ individual access to a home- and community-based services waiver due to a lack of 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 10 time period, and certain services received by the individual would qualify for certain 11 funds; and generally relating to home- and community-based services under the 12Maryland Medical Assistance Program.

- 13 BY repealing and reenacting, with amendments,
- 14 Article Health General
- 15 Section 15–137

20

- 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:

#### Article - Health - General

[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.



EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

1 15–137.

$\frac{2}{3}$	(a) The Department may not deny an individual access to a home- and community-based services waiver due to a lack of funding for waiver services if:
45	(1) <b>(I)</b> The individual is living in a nursing facility at the time of the application for waiver services;
$6 \\ 7$	[(2)] (II) At least 30 consecutive days of the individual's nursing facility stay are eligible to be paid for by the Program;
8 9	[(3)] (III) The individual meets all of the eligibility criteria for participation in the home- and community-based services waiver; and
10 11	[(4)] (IV) The home- and community-based services provided to the individual would qualify for federal matching funds; OR
12 13	(2) (I) THE INDIVIDUAL IS LIVING AT HOME OR IN THE COMMUNITY AT THE TIME OF THE APPLICATION FOR WAIVER SERVICES;
14 15 16	(II) THE INDIVIDUAL RECEIVED HOME– AND COMMUNITY–BASED SERVICES THROUGH COMMUNITY FIRST CHOICE FOR AT LEAST 30 CONSECUTIVE DAYS;
17 18 19	(III) THE INDIVIDUAL WILL BE OR HAS BEEN TERMINATED FROM PARTICIPATION IN THE PROGRAM ON BECOMING ENTITLED TO OR ENROLLED IN MEDICARE PART A OR ENROLLED IN MEDICARE PART B;
18	PARTICIPATION IN THE PROGRAM ON BECOMING ENTITLED TO OR ENROLLED IN
18 19 20 21 22	PARTICIPATION IN THE PROGRAM ON BECOMING ENTITLED TO OR ENROLLED IN MEDICARE PART A OR ENROLLED IN MEDICARE PART B; (IV) THE INDIVIDUAL MEETS ALL OF THE ELIGIBILITY CRITERIA FOR PARTICIPATION IN THE HOME- AND COMMUNITY-BASED SERVICES WAIVER WITHIN 6 MONTHS AFTER BEING NOTIFIED OF ELIGIBILITY THE COMPLETION OF
<ol> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> </ol>	PARTICIPATION IN THE PROGRAM ON BECOMING ENTITLED TO OR ENROLLED IN MEDICARE PART A OR ENROLLED IN MEDICARE PART B; (IV) THE INDIVIDUAL MEETS ALL OF THE ELIGIBILITY CRITERIA FOR PARTICIPATION IN THE HOME- AND COMMUNITY-BASED SERVICES WAIVER WITHIN 6 MONTHS AFTER BEING NOTIFIED OF ELIGIBILITY THE COMPLETION OF THE APPLICATION; AND (V) THE HOME- AND COMMUNITY-BASED SERVICES PROVIDED

 $\mathbf{2}$