

Department of Legislative Services
Maryland General Assembly
2024 Session

FISCAL AND POLICY NOTE
First Reader

House Bill 1359 (Delegate Rosenberg, *et al.*)
Health and Government Operations

Facilities - Disabilities and Juveniles - Community Relations Plans

This bill requires the following facilities to establish a community relations plan: State residential centers for individuals with an intellectual disability in the Developmental Disabilities Administration (DDA), private group homes, juvenile care facilities, and juvenile detention facilities. The plans must describe the processes and procedures for (1) the facility to provide to communities identified by the local jurisdiction regular updates regarding community relations issues including parking, traffic, complaints, construction, and general activity around the facility; (2) communities to provide feedback regarding the community relations plan; and (3) the timing, format, and content of the regular updates provided. Each community relations plan be revised not less than every five years.

Fiscal Summary

State Effect: DDA can likely absorb the costs of making plans for the two State residential centers. However, future DDA expenditures (FY 2026 and later) may increase minimally to account for the costs of these plans in provider rates, as discussed below. The Department of Juvenile Services (DJS) did not respond to a request for information on the fiscal and operational impact of the bill.

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

Small Business Effect: Meaningful.

Analysis

Current Law:

Residential Centers

DDA within the Maryland Department of Health (MDH) provides direct services to developmentally disabled individuals in two State residential centers. State residential centers must hold a license and obtain a certificate of approval from the Secretary of Health before establishing a group home for individuals with developmental disabilities.

Private Group Homes

In addition to holding a license under Title 7, Subtitle 9 of the Health-General Article, a person must obtain a certificate of approval from the Secretary of Health before establishing a private group home. An application for a certificate of approval must provide required information, including (1) the name and address of the applicant; (2) the street address where the private group home is to be located or a description that identifies the property; (3) if the applicant does not own the property, the name of the owner; (4) a statement that the applicant will comply with specified laws, rules, and regulations; (5) a statement that the applicant has sufficient resources to establish a private group home; and (6) a statement that the applicant's facilities meet federal regulation requirements on program accessibility.

Juvenile Facilities

DJS must adopt regulations to set standards for juvenile detention facilities, including provisions establishing (1) a policy that eliminates the unnecessary use of detention and that prioritizes diversion and appropriate nonsecure alternatives; (2) criteria for the placement of a child in a particular juvenile detention facility; (3) population limits that may not be exceeded except in emergency circumstances; (4) a requirement that staffing ratios and levels of services be maintained during emergencies; (5) specifications for the architectural structure of a juvenile detention facility; (6) staff qualifications and training; (7) the ratio of staff to children; (8) the rights of children, as specified; (9) prohibitions against the use of excessive force against a child; (10) internal auditing and monitoring of programs and facilities; and (11) prohibitions against the use of physical restraints on an individual known to be in the third trimester of pregnancy or during labor, delivery, or postpartum recovery, as specified.

State Expenditures/Small Business Effect: MDH advises that there are approximately 2,700 operating group homes in the State that are affected by the bill. Such entities are

typically the size of an apartment or single-family home, and generally have no more than four residents and two staff members present at any given time.

If each intellectual/developmental disability private group home licensed by MDH were required to create independent public communication plans, seek public input, and provide regular public updates, the costs for such activities would be absorbed into the operating expenses of the group home provider.

Due to the way DDA sets rates for group homes, which takes into account provider financial statements to determine fair rates for each service, any operating expenses incurred by group homes to develop community relations plans could enter the State's budget in a future rate-rebasing cycle, beginning in fiscal 2026. MDH advises that it cannot quantify these potential expenses at this time. However, this analysis assumes that any such expenditures (and any such impact on DDA expenditures) will be minimal.

The State has the discretion to fully fund DDA rates and is not required to fund these rates at 100%. DDA rates are not currently funded at 100%. If the Governor and the General Assembly decide to fully-fund DDA's rates, these expenditures would be incorporated into the State's budget in fiscal 2026 or later.

Additional Information

Recent Prior Introductions: Similar legislation has been introduced within the last three years. See HB 297 of 2022.

Designated Cross File: None.

Information Source(s): Carroll, Frederick, and Prince George's counties; Department of Human Services; Department of Health; Department of Education; Department of Legislative Services

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