SENATE BILL 920

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5lr2424 CF HB 1142

By: Senator Gile

Introduced and read first time: January 28, 2025 Assigned to: Finance

Committee Report: Favorable with amendments Senate action: Adopted Read second time: March 16, 2025

CHAPTER _____

1 AN ACT concerning

2 Public Health – Maryland Interested Parties Advisory Group – Establishment

FOR the purpose of establishing the Maryland Interested Parties Advisory Group to ensure
 adequate access to applicable home- and community-based services and the
 existence of an adequate direct care workforce in the State; requiring the Maryland
 Department of Health to provide certain support to the Advisory Group; and
 generally relating to the Maryland Interested Parties Advisory Group.

- 8 BY adding to
- 9 Article Health General
- Section 15–1201 through 15–1205 to be under the new subtitle "Subtitle 12.
 Maryland Interested Parties Advisory Group"
- 12 Annotated Code of Maryland
- 13 (2023 Replacement Volume and 2024 Supplement)
- 14 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
- 15 That the Laws of Maryland read as follows:

16	Article – Health – General	

- 17 SUBTITLE 12. MARYLAND INTERESTED PARTIES ADVISORY GROUP.
- 18 **15–1201.**

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 (A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS 2 INDICATED.

3 (B) "ADVISORY GROUP" MEANS THE MARYLAND INTERESTED PARTIES 4 ADVISORY GROUP ESTABLISHED UNDER § 15–1202 OF THIS SUBTITLE AND 5 REQUIRED UNDER 42 C.F.R. § 447.203.

6 (C) "APPLICABLE SERVICE CATEGORIES" MEANS HOMEMAKER SERVICES, 7 HOME HEALTH AIDE SERVICES, PERSONAL CARE SERVICES, AND HABILITATION 8 SERVICES.

9 (D) "CONSUMER" MEANS AN APPLICANT FOR, A RECIPIENT OF, OR AN 10 INDIVIDUAL ELIGIBLE FOR MEDICAID HOME- AND COMMUNITY-BASED SERVICES, 11 OR THE INDIVIDUAL'S AUTHORIZED REPRESENTATIVE.

12 (E) "CONSUMER ORGANIZATION" MEANS A STATE OR LOCAL CONSUMER 13 ADVOCACY GROUP OR OTHER COMMUNITY-BASED ORGANIZATION THAT 14 REPRESENTS THE INTERESTS OF, OR PROVIDES DIRECT SERVICES TO, CONSUMERS 15 OF MEDICAID HOME- AND COMMUNITY-BASED SERVICES.

16 **(F) "DIRECT CARE WORKER" MEANS AN INDIVIDUAL:**

17(1) EMPLOYED BY A MEDICAID PROVIDER, STATE AGENCY, OR THIRD18PARTY;

19 (2) WHO CONTRACTS WITH A MEDICAID PROVIDER, STATE AGENCY, 20 OR THIRD PARTY;

21 (3) DELIVERING SERVICES UNDER A SELF-DIRECTED SERVICES 22 DELIVERY MODEL; OR

23 (4) WHO IS PAID TO PROVIDE HOME- AND COMMUNITY-BASED 24 SERVICES THROUGH AN APPLICABLE SERVICE CATEGORY.

(G) "HOME- AND COMMUNITY-BASED SERVICES" MEANS MEDICAID
HOME- AND COMMUNITY-BASED SERVICES DELIVERED THROUGH THE STATE PLAN,
A WAIVER UNDER § 1915(C) OF THE FEDERAL SOCIAL SECURITY ACT, A MANAGED
CARE PROGRAM, OR OTHER DEMONSTRATION PROGRAM.

29 (H) "PERSONAL CARE" HAS THE MEANING STATED UNDER § 19–301 OF THIS 30 ARTICLE.

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"PROVIDER ASSOCIATION" MEANS A TRADE ASSOCIATION EXEMPT 1 **(I)** 2FROM FEDERAL INCOME TAXATION UNDER § 501(C)(6) OF THE INTERNAL REVENUE 3 **CODE** THAT REPRESENTS DIRECT CARE EMPLOYERS. 4 **(**J**)** "WORKER ORGANIZATION" MEANS AN ORGANIZATION THAT: $\mathbf{5}$ IS EXEMPT FROM FEDERAL INCOME TAXATION UNDER §§ (1) 501(C)(3) THROUGH (6) OF THE INTERNAL REVENUE CODE; 6 7 IS NOT DOMINATED, CONTROLLED, OR FUNDED BY A DIRECT CARE (2) 8 **EMPLOYER; AND** 9 HAS AT LEAST 2 YEARS OF DEMONSTRATED EXPERIENCE (3) 10 ENGAGING WITH AND ADVOCATING FOR DIRECT CARE WORKERS. 15 - 1202.11 12 THERE IS A MARYLAND INTERESTED PARTIES ADVISORY GROUP (A) 13 WITHIN THE DEPARTMENT. THE PRIMARY PURPOSE OF THE ADVISORY GROUP IS TO ENSURE: 14 **(B)** 15(1) ADVISE AND CONSULT ON MEDICAID PAYMENT RATES ARE 16 SUFFICIENT TO PROVIDE RATE SUFFICIENCY, ENSURING ADEQUATE ACCESS TO APPLICABLE SERVICE CATEGORIES; AND 1718 (2) THE EXISTENCE OF AN ADEQUATE AND QUALIFIED DIRECT CARE 19 WORKFORCE TO PROVIDE SERVICES IN THE STATE. 15 - 1203.20 (A) THE ADVISORY GROUP CONSISTS OF: 21THE DEPUTY SECRETARY, OF HEALTH CARE FINANCING, OR THE 22(1) **DEPUTY SECRETARY'S DESIGNEE:** 2324(2) THE SECRETARY OF LABOR, OR THE SECRETARY'S DESIGNEE; 25AND 26(3) THE FOLLOWING MEMBERS APPOINTED BY THE **Deputy** SECRETARY OF HEALTH CARE FINANCING, OR THE DEPUTY SECRETARY'S 2728**DESIGNEE:** 29**(I) THREE CONSUMERS;**

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1	(II) TWO REPRESENTATIVES OF CONSUMER ORGANIZATIONS;
2	(III) THREE DIRECT CARE WORKERS;
3	(IV) TWO REPRESENTATIVES OF WORKER ORGANIZATIONS; <u>AND</u>
4	(V) ONE REPRESENTATIVE OF A PROVIDER ASSOCIATION; AND
5	(VI) ONE REPRESENTATIVE OF THE GENERAL PUBLIC; AND
6 7 8 9 10	(3) ONE NONVOTING ADVISORY MEMBER FROM THE DIVISION OF HEALTH CARE FINANCING AND MEDICAID WITH ADVANCED DATA LITERACY TO ADDRESS ANY QUESTION OR ISSUE RELATED TO THE DATA EXAMINED BY THE ADVISORY GROUP THREE REPRESENTATIVES OF PROVIDER ASSOCIATIONS, OF WHOM:
$\frac{11}{12}$	1. Two shall be representatives of a residential service agency; and
$\frac{13}{14}$	2. ONE SHALL BE A REPRESENTATIVE OF AN EMPLOYER TRADE ASSOCIATION.
15 16 17 18 19	(B) TO THE EXTENT PRACTICABLE, THE MEMBERS APPOINTED TO THE ADVISORY GROUP SHALL REFLECT THE DIVERSITY OF LIVED EXPERIENCE WITH DISABILITY, AS WELL AS THE GEOGRAPHIC, RACIAL, ETHNIC, CULTURAL, GENDER, SEXUAL ORIENTATION, GENDER IDENTITY, GENDER EXPRESSION, AGE, AND SOCIOECONOMIC DIVERSITY OF THE STATE.
$20 \\ 21 \\ 22 \\ 23$	(C) (1) THE <u>DEPUTY</u> SECRETARY <u>OF HEALTH CARE FINANCING, OR THE</u> <u>DEPUTY SECRETARY'S DESIGNEE</u> , SHALL ESTABLISH AN APPLICATION PROCESS THAT IS ACCESSIBLE TO THE GENERAL PUBLIC FOR THE RECRUITMENT OF MEMBERS.
$\frac{24}{25}$	(2) THE APPLICATION AND CRITERIA FOR SELECTION SHALL BE PUBLISHED ON THE DEPARTMENT'S WEBSITE.
26 27	(D) (1) THE DEPUTY SECRETARY <u>, OF</u> HEALTH CARE FINANCING, OR THE DEPUTY SECRETARY'S DESIGNEE, SHALL CHAIR THE ADVISORY GROUP.
28 29 30 31 32	(2) THE DEPARTMENT SHALL PROVIDE STAFF AND SUPPORT FOR THE ADVISORY GROUP, INCLUDING APPROPRIATE LOGISTICAL, <u>AND</u> INFORMATIONAL, AND FINANCIAL SUPPORT TO ENSURE MEANINGFUL PARTICIPATION OF DIRECT CARE WORKERS AND CONSUMERS IN THE ADVISORY GROUP.

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THE TERM OF AN APPOINTED MEMBER OF THE ADVISORY GROUP

(1)

(E)

IS 3 YEARS.

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3 (2) THE SECRETARY SHALL ENSURE THAT MEMBERS SERVE STAGGERED TERMS. 4 $\mathbf{5}$ (3) AT THE END OF A TERM, AN APPOINTED MEMBER CONTINUES TO 6 SERVE UNTIL A SUCCESSOR IS APPOINTED AND QUALIFIES. 7 (4) A MEMBER WHO IS APPOINTED AFTER A TERM HAS BEGUN SERVES 8 ONLY FOR THE REST OF THE TERM AND UNTIL A SUCCESSOR IS APPOINTED AND 9 **QUALIFIES.** 10 (5) THE SECRETARY MAY REMOVE OR SUSPEND A MEMBER OF THE ADVISORY GROUP FOR MISCONDUCT, INCOMPETENCE, OR NEGLECT OF DUTIES 11 AFTER AN OPPORTUNITY FOR THE MEMBER TO BE HEARD. 12 13 **(F)** A MEMBER OF THE ADVISORY GROUP: 14 (1) MAY NOT RECEIVE COMPENSATION AS A MEMBER OF THE 15**ADVISORY GROUP; BUT** IS ENTITLED TO REIMBURSEMENT FOR EXPENSES UNDER THE 16 (2) STANDARD STATE TRAVEL REGULATIONS, AS PROVIDED IN THE STATE BUDGET. 17 18 (G) (1) BEGINNING NOVEMBER 1, 2025, THE ADVISORY GROUP SHALL 19 MEET ON A QUARTERLY BASIS ANNUALLY. 20(2) **MEETING DATES, TIMES, AND LOCATIONS SHALL BE SELECTED TO** 21 MAXIMIZE MEMBER ATTENDANCE. 2215 - 1204. 23THE DEPARTMENT (A) (1) SHALL ESTABLISH **STANDARDIZED** 24PROCEDURES FOR THE ADMINISTRATION OF THE ADVISORY GROUP AND MAKE THE 25PROCEDURES AVAILABLE TO THE PUBLIC ON A DEDICATED PAGE OF THE **DEPARTMENT'S WEBSITE.** 2627(2) THE DEDICATED PAGE ON THE DEPARTMENT'S WEBSITE SHALL 28**ALSO INCLUDE:** 29**(I)** A LIST OF CURRENT ADVISORY GROUP MEMBERS;

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1 2	(II) THE APPLICATION PROCESS AND SELECTION CRITERIA FOR ADVISORY GROUP MEMBERS;
$\frac{3}{4}$	(III) THE LOCATION, DATE, AND TIME OF EACH ADVISORY GROUP MEETING WITH AT LEAST 30 CALENDAR DAYS' ADVANCE NOTICE;
5 6	(IV) OPTIONS FOR VIRTUAL PARTICIPATION IN MEETINGS OF THE ADVISORY GROUP;
7 8	(V) PROCEDURES TO ENSURE MEANINGFUL PARTICIPATION FOR INDIVIDUALS WITH DISABILITIES AND LIMITED ENGLISH PROFICIENCY;
9 10	(VI) A NOTATION OF AT WHICH MEETINGS THE GENERAL PUBLIC WILL HAVE AN OPPORTUNITY TO TESTIFY OR MAKE COMMENTS; AND
$\begin{array}{c} 11\\ 12\\ 13 \end{array}$	(VII) IN ACCORDANCE WITH THE OPEN MEETINGS ACT, THE AGENDA AND MEETING MINUTES OF THE PREVIOUS MEETING OF THE ADVISORY GROUP, INCLUDING A LIST OF MEETING ATTENDEES.
$\begin{array}{c} 14\\ 15\\ 16\end{array}$	(B) THE DEPARTMENT SHALL PROVIDE SUFFICIENT DATA AND RESOURCES AT LEAST 30 DAYS IN ADVANCE OF A MEETING TO SUPPORT INFORMED PARTICIPATION IN ADVISORY GROUP DISCUSSIONS, INCLUDING:
17 18 19 20	(1) Distributing information collected by the Maryland Department of Labor under § 15-156 of this title, including data collected by residential service agencies related to direct care workforce:
$21 \\ 22 \\ 23 \\ 24 \\ 25$	(I) STABILITY, INCLUDING TOTAL NUMBERS OF FULL-TIME AND PART-TIME HOME CARE WORKERS, PERCENTAGE OF THE YEAR THAT THE EMPLOYEES WERE EMPLOYED, AVERAGE LENGTH OF EMPLOYMENT, TURNOVER RATE, VACANCIES, AND UNSTAFFED HOURS MEASURED BY HOURS ALLOTTED IN PLANS OF SERVICE FOR WHICH THE CONSUMER IS NOT RECEIVING CARE;
26 27 28 29 30	(II) Compensation and benefits, including the highest, lowest, median, and average hourly wage paid by provider agencies, number of hours authorized for overtime pay, number of hours paid for travel time between clients, and average days of earned sick and safe leave paid to home care workers each year;
31 32	(III) Employee benefits, including health, dental, and Vision benefits, life and disability insurance, paid leave, retirement,

33 AND TUITION REIMBURSEMENT;

1 (IV) PROVIDER COSTS RELATED TO THE WORKFORCE, $\mathbf{2}$ INCLUDING COSTS OF REQUIRED TRAININGS, TRAVEL COSTS FOR DIRECT CARE 3 WORKERS SUCH AS MILEAGE REIMBURSEMENT OR PUBLIC TRANSPORTATION SUBSIDIES, AND COSTS OF PERSONAL PROTECTIVE EQUIPMENT FOR DIRECT CARE 4 WORKERS: AND 5 6 (V) **DEMOGRAPHIC INFORMATION INCLUDING AGE, GENDER,** RACE AND ETHNICITY, HIGHEST EDUCATIONAL LEVEL ATTAINED, CERTIFICATIONS 7 HELD, AND NUMBER OF YEARS OF DIRECT CARE WORK EXPERIENCE CURRENT AND 8 9 **PROPOSED PAYMENT RATES:** 10 FEDERALLY REQUIRED INFORMATION WITH A DETAILED (2) 11 EXPLANATION OF THE METHODOLOGY AND DATA LIMITATIONS FOR EACH REPORT, 12 **INCLUDING:** 13**(I)** HOME- AND COMMUNITY-BASED SERVICES PAYMENT 14**TRANSPARENCY REPORTS:** 15(II) PAYMENT ADEQUACY REPORTS AS REQUIRED UNDER 42 16 C.F.R. § 441.311(E); AND 17(III) ACCESS-TO-CARE DATA, AS REQUIRED UNDER 42 C.F.R. § 441.311(D)(2); 18 BUREAU OF LABOR STATISTICS PUBLICLY AVAILABLE WAGE 19 (3) 20DATA AND OTHER LABOR MARKET AND WORKFORCE DATA; BENCHMARKING AND RATE STUDIES FOR HOME- AND 21 (4) 22COMMUNITY-BASED SERVICES CONDUCTED BY THE DEPARTMENT; 23(5) **RATE INFORMATION FROM NEIGHBORING OR SIMILARLY** SITUATED STATES; AND 2425(6) **ACCESS-TO-CARE METRICS, INCLUDING:** THE NUMBER OF CONSUMERS RECEIVING APPLICABLE 26**(I)** 27SERVICES; AND THE NUMBER OF UTILIZATION HOURS FOR APPLICABLE 28**(II)** 29SERVICE CATEGORIES; 30 (III) A DESCRIPTION OF HOW THE STATE MAINTAINS THE 31 **MEDICAID WAIVER WAITING LIST FOR HOME AND COMMUNITY BASED SERVICES;**

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1	(iv) The number of individuals on the waiting list;
$2 \\ 3$	(v) The average length of time new waiver enrollees waited to enroll; and
4 5	(vi) The number of times individuals must re-apply to receive services.
6 7 8	(C) THE DEPARTMENT SHALL CONSULT THE ADVISORY GROUP BEFORE MAKING CHANGES TO PAYMENT RATES FOR APPLICABLE SERVICE CATEGORIES AND SHALL AFFORD DEFERENCE TO THE ADVISORY GROUP'S RECOMMENDATIONS.
9 10 11 12	(D) (1) TO SUPPORT THE ADVISORY GROUP AND ENGAGE THE BROADER DIRECT CARE WORKFORCE AND CONSUMERS ACROSS THE STATE, THE DEPARTMENT SHALL DEVELOP A PUBLIC EDUCATION AND COMMUNICATION PLAN TO INFORM DIRECT CARE WORKERS AND DIRECT CARE CONSUMERS OF:
$\begin{array}{c} 13\\14 \end{array}$	(I) THE ADVISORY GROUP, ITS PURPOSE, MEETINGS, AND OPPORTUNITIES FOR INPUT; AND
$\begin{array}{c} 15\\ 16 \end{array}$	(II) A SUMMARY OF ITS ANNUAL REPORT AND ANY RECOMMENDATIONS.
17	(2) THE PUBLIC EDUCATION AND COMMUNICATION PLAN MUST:
18 19	(I) Ensure broad language access and be culturally competent;
20 21 22	(II) USE TARGETED METHODS THAT WILL EFFECTIVELY ENGAGE DIRECT CARE WORKERS AND DIRECT CARE CONSUMERS, INCLUDING ADVERTISING AND OTHER MARKETING TOOLS;
23 24 25 26 27 28	(III) INCLUDE AN OPTION FOR DIRECT CARE WORKERS AND DIRECT CARE CONSUMERS TO PROVIDE INFORMATION, INCLUDING A MAILING ADDRESS, E-MAIL ADDRESS, OR TELEPHONE NUMBER, FOR PURPOSES OF RECEIVING ONGOING COMMUNICATION FROM THE DEPARTMENT CONCERNING THE ADVISORY GROUP AND OPPORTUNITIES FOR ENGAGEMENT WITH THE ADVISORY GROUP; AND
29 30 31	(iv) Require each residential service agency to provide information regarding the Advisory Group directly to its employees.

15–1205.

1	(A) THE ADVISORY GROUP SHALL:
2	(1) EVALUATE THE SUFFICIENCY OF MEDICAID PAYMENT RATES FOR
3	APPLICABLE SERVICE CATEGORIES; <u>AND</u>
4	(2) Examine working conditions for the direct care
$\frac{4}{5}$	WORKFORCE, INCLUDING CURRENT WAGE RATES AND OFFERED BENEFITS,
6	INITIATIVES FOR RETENTION AND RECRUITMENT OF WORKERS, TRAINING
7	REQUIREMENTS, AND ACCESS TO WORKER ORGANIZATIONS;
8	(3) EVALUATE CHALLENGES TO ACCESSING CARE FOR APPLICABLE
9	MEDICAID HOME- AND COMMUNITY-BASED SERVICES ; AND
10	(4) DEVELOP A COMMUNICATION PLAN FOR THE DEPARTMENT'S
10	ENGAGEMENT WITH DIRECT CARE WORKERS AND CONSUMERS.
12	(B) (1) ON OR BEFORE SEPTEMBER 1 EACH YEAR, BEGINNING IN 2026,
$\frac{13}{14}$	THE ADVISORY GROUP SHALL REPORT ITS ACTIVITIES AND RECOMMENDATIONS TO THE GOVERNOR AND, IN ACCORDANCE WITH § 2–1257 OF THE STATE GOVERNMENT
15	ARTICLE, THE GENERAL ASSEMBLY.
16	(2) The report of the Advisory Group shall address:
17	(1) Recommendations for increasing Medicaid
18	PAYMENT RATES FOR APPLICABLE SERVICE CATEGORIES;
19	(II) Employment standards for direct care workers,
20	INCLUDING A WAGE FLOOR AND EFFORTS TO COMBAT MISCLASSIFICATION OF
21	EMPLOYEES;
22	(III) REMOVING BARRIERS TO ACCESS TO CARE AND
$\frac{22}{23}$	RECOMMENDATIONS ON HOW TO IMPROVE ACCESS TO QUALITY AND CONTINUOUS
24	CARE;
05	(D) MEANS THE STATE CAN USE TO COMMUNICATE
$\frac{25}{26}$	(iv) Means the State can use to communicate information to direct care workers and consumers about the purview
$\frac{20}{27}$	OF THE ADVISORY GROUP, ITS PURPOSE, ITS MEETINGS AND HEARINGS, AND
28	
40	OPPORTUNITIES TO PROVIDE INPUT; AND
29 30	OPPORTUNITIES TO PROVIDE INPUT; AND (V) THE ADVISORY GROUP'S REVIEW OF ANY RACIAL, GENDER, OR ECONOMIC DISPARITIES IMPACTING DIRECT CARE WORKERS OR CONSUMERS

OTHER STATES WITH FAVORABLE CONDITIONS FOR DIRECT CARE WORKERS AND CONSUMERS.
(3) ANY RECOMMENDATIONS ADOPTED BY THE ADVISORY GROUP MUST RECEIVE AN AFFIRMATIVE VOTE OF AT LEAST SEVEN MEMBERS <u>A MAJORITY</u> <u>VOTE</u> .
(4) BEFORE THE SUBMISSION OF THE REPORT UNDER PARAGRAPH (1) OF THIS SUBSECTION, THE DEPARTMENT SHALL REVIEW THE REPORT ON RECEIPT FROM THE ADVISORY GROUP AND WITHIN 60 DAYS AFTER RECEIVING THE REPORT RESPOND TO ANY RECOMMENDATION, INCLUDING ANY JUSTIFICATION FOR DECLINING TO IMPLEMENT A RECOMMENDATION OF THE ADVISORY GROUP.
(5) Following the Department's review of the annual report, the Department shall:
(I) PROVIDE THE ADVISORY GROUP WITH AN OPPORTUNITY TO MAKE CHANGES TO THE REPORT; AND
(H) (C) POST THE DEPARTMENT SHALL POST THE REPORT TO THE DEPARTMENT'S WEBSITE WITHIN 30 DAYS AFTER THE REPORT HAS BEEN FINALIZED.
(C) (D) THE ADVISORY GROUP MAY HOLD OPPORTUNITIES TO SOLICIT AND COLLECT TESTIMONY FROM THE PUBLIC AND INVITE INPUT FROM EMPLOYER ORGANIZATIONS, WORKER ORGANIZATIONS, CONSUMER ADVOCACY GROUPS, AND OTHER STAKEHOLDERS IN THE DIRECT CARE INDUSTRY.
(d) (<u>e</u>) (1) An employer or State agency may not take retaliatory action against a direct care worker or consumer for participation in the Advisory Group.
(2) THIS SECTION DOES NOT LIMIT THE RIGHTS OF DIRECT CARE WORKERS UNDER STATE OR FEDERAL EMPLOYMENT OR LABOR LAW, OR COLLECTIVE BARGAINING AGREEMENTS.
SECTION 2. AND BE IT FURTHER ENACTED, That the <u>Deputy</u> Secretary <u>of</u> <u>Health Care Financing, or the Deputy Secretary's designee</u> , shall appoint the initial members of the Maryland Interested Parties Advisory Group on or before October 1, 2025.
SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect July 1, 2025.

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