Chapter 754

# (House Bill 1142)

## AN ACT concerning

### 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.

# BY adding to

Article - Health - General

Section 15–1201 through 15–1205 to be under the new subtitle "Subtitle 12. Maryland Interested Parties Advisory Group"

Annotated Code of Maryland

(2023 Replacement Volume and 2024 Supplement)

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:

#### Article - Health - General

#### SUBTITLE 12. MARYLAND INTERESTED PARTIES ADVISORY GROUP.

#### **15–1201.**

- (A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.
- (B) "ADVISORY GROUP" MEANS THE MARYLAND INTERESTED PARTIES ADVISORY GROUP ESTABLISHED UNDER § 15–1202 OF THIS SUBTITLE AND REQUIRED UNDER 42 C.F.R. § 447.203.
- (C) "APPLICABLE SERVICE CATEGORIES" MEANS HOMEMAKER SERVICES, HOME HEALTH AIDE SERVICES, PERSONAL CARE SERVICES, AND HABILITATION SERVICES.
- (D) "CONSUMER" MEANS AN APPLICANT FOR, A RECIPIENT OF, OR AN INDIVIDUAL ELIGIBLE FOR MEDICAID HOME—AND COMMUNITY—BASED SERVICES, OR THE INDIVIDUAL'S AUTHORIZED REPRESENTATIVE.

- (E) "CONSUMER ORGANIZATION" MEANS A STATE OR LOCAL CONSUMER ADVOCACY GROUP OR OTHER COMMUNITY-BASED ORGANIZATION THAT REPRESENTS THE INTERESTS OF, OR PROVIDES DIRECT SERVICES TO, CONSUMERS OF MEDICAID HOME- AND COMMUNITY-BASED SERVICES.
  - (F) "DIRECT CARE WORKER" MEANS AN INDIVIDUAL:
- (1) EMPLOYED BY A MEDICAID PROVIDER, STATE AGENCY, OR THIRD PARTY;
- (2) WHO CONTRACTS WITH A MEDICAID PROVIDER, STATE AGENCY, OR THIRD PARTY;
- (3) DELIVERING SERVICES UNDER A SELF-DIRECTED SERVICES DELIVERY MODEL; OR
- (4) WHO IS PAID TO PROVIDE HOME— AND COMMUNITY-BASED 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.
- (H) "Personal care" has the meaning stated under § 19-301 of this article.
- (I) "PROVIDER ASSOCIATION" MEANS A TRADE ASSOCIATION EXEMPT FROM FEDERAL INCOME TAXATION UNDER § 501(C)(6) OF THE INTERNAL REVENUE CODE THAT REPRESENTS DIRECT CARE EMPLOYERS.
  - (J) "WORKER ORGANIZATION" MEANS AN ORGANIZATION THAT:
- (1) IS EXEMPT FROM FEDERAL INCOME TAXATION UNDER §§ 501(C)(3) THROUGH (6) OF THE INTERNAL REVENUE CODE;
- (2) IS NOT DOMINATED, CONTROLLED, OR FUNDED BY A DIRECT CARE EMPLOYER; AND
- (3) HAS AT LEAST 2 YEARS OF DEMONSTRATED EXPERIENCE ENGAGING WITH AND ADVOCATING FOR DIRECT CARE WORKERS.

**15–1202.** 

- (A) THERE IS A MARYLAND INTERESTED PARTIES ADVISORY GROUP WITHIN THE DEPARTMENT.
  - (B) THE PRIMARY PURPOSE OF THE ADVISORY GROUP IS TO ENSURE:
- (1) ADVISE AND CONSULT ON MEDICAID PAYMENT RATES ARE SUFFICIENT TO PROVIDE RATE SUFFICIENCY, ENSURING ADEQUATE ACCESS TO APPLICABLE SERVICE CATEGORIES; AND
- (2) THE EXISTENCE OF AN ADEQUATE AND QUALIFIED DIRECT CARE WORKFORCE TO PROVIDE SERVICES IN THE STATE.

**15–1203.** 

- (A) THE ADVISORY GROUP CONSISTS OF:
- (1) THE DEPUTY SECRETARY, OF HEALTH CARE FINANCING, OR THE DEPUTY SECRETARY'S DESIGNEE;
- (2) THE DIRECTOR OF THE MARYLAND MEDICAL ASSISTANCE PROGRAM, OR THE DIRECTOR'S DESIGNEE:
- (3) (2) THE SECRETARY OF LABOR, OR THE SECRETARY'S DESIGNEE; AND
- (4) (3) THE FOLLOWING MEMBERS APPOINTED BY THE <u>DEPUTY</u> SECRETARY OF <u>HEALTH CARE FINANCING</u>, OR THE <u>DEPUTY SECRETARY'S</u> DESIGNEE:
  - (I) THREE CONSUMERS;
  - (II) TWO REPRESENTATIVES OF CONSUMER ORGANIZATIONS;
  - (III) THREE DIRECT CARE WORKERS;
  - (IV) TWO REPRESENTATIVES OF WORKER ORGANIZATIONS; AND
  - (V) ONE REPRESENTATIVE OF A PROVIDER ASSOCIATION; AND
  - (VI) ONE REPRESENTATIVE OF THE GENERAL PUBLIC; AND
- (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:

1. TWO SHALL BE REPRESENTATIVES OF A RESIDENTIAL SERVICE AGENCY; AND

**2.** ONE SHALL BE A REPRESENTATIVE OF AN EMPLOYER TRADE ASSOCIATION.

- (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.
- (C) (1) THE <u>DEPUTY</u> SECRETARY <u>OF HEALTH CARE FINANCING</u>, OR THE <u>DEPUTY SECRETARY'S DESIGNEE</u>, SHALL ESTABLISH AN APPLICATION PROCESS THAT IS ACCESSIBLE TO THE GENERAL PUBLIC FOR THE RECRUITMENT OF MEMBERS.
- (2) THE APPLICATION AND CRITERIA FOR SELECTION SHALL BE PUBLISHED ON THE DEPARTMENT'S WEBSITE.
- (D) (1) THE DEPUTY SECRETARY, OF HEALTH CARE FINANCING, OR THE DEPUTY SECRETARY'S DESIGNEE, SHALL CHAIR THE ADVISORY GROUP.
- (2) THE DEPARTMENT SHALL PROVIDE STAFF AND SUPPORT FOR THE ADVISORY GROUP, INCLUDING APPROPRIATE LOGISTICAL, AND INFORMATIONAL, AND FINANCIAL SUPPORT TO ENSURE MEANINGFUL PARTICIPATION OF DIRECT CARE WORKERS AND CONSUMERS IN THE ADVISORY GROUP.
- (E) (1) THE TERM OF AN APPOINTED MEMBER OF THE ADVISORY GROUP IS 3 YEARS.
- (2) THE SECRETARY SHALL ENSURE THAT MEMBERS SERVE STAGGERED TERMS.
- (3) AT THE END OF A TERM, AN APPOINTED MEMBER CONTINUES TO SERVE UNTIL A SUCCESSOR IS APPOINTED AND QUALIFIES.

- (4) A MEMBER WHO IS APPOINTED AFTER A TERM HAS BEGUN SERVES ONLY FOR THE REST OF THE TERM AND UNTIL A SUCCESSOR IS APPOINTED AND QUALIFIES.
- (5) THE SECRETARY MAY REMOVE OR SUSPEND A MEMBER OF THE ADVISORY GROUP FOR MISCONDUCT, INCOMPETENCE, OR NEGLECT OF DUTIES AFTER AN OPPORTUNITY FOR THE MEMBER TO BE HEARD.
  - (F) A MEMBER OF THE ADVISORY GROUP:
- (1) MAY NOT RECEIVE COMPENSATION AS A MEMBER OF THE ADVISORY GROUP; BUT
- (2) IS ENTITLED TO REIMBURSEMENT FOR EXPENSES UNDER THE STANDARD STATE TRAVEL REGULATIONS, AS PROVIDED IN THE STATE BUDGET.
- (G) (1) BEGINNING NOVEMBER 1, 2025, THE ADVISORY GROUP SHALL MEET ON A QUARTERLY BASIS ANNUALLY.
- (2) MEETING DATES, TIMES, AND LOCATIONS SHALL BE SELECTED TO MAXIMIZE MEMBER ATTENDANCE.

#### **15–1204.**

- (A) (1) THE DEPARTMENT SHALL ESTABLISH STANDARDIZED PROCEDURES FOR THE ADMINISTRATION OF THE ADVISORY GROUP AND MAKE THE PROCEDURES AVAILABLE TO THE PUBLIC ON A DEDICATED PAGE OF THE DEPARTMENT'S WEBSITE.
- (2) THE DEDICATED PAGE ON THE DEPARTMENT'S WEBSITE SHALL ALSO INCLUDE:
  - (I) A LIST OF CURRENT ADVISORY GROUP MEMBERS;
- (II) THE APPLICATION PROCESS AND SELECTION CRITERIA FOR ADVISORY GROUP MEMBERS;
- (III) THE LOCATION, DATE, AND TIME OF EACH ADVISORY GROUP MEETING WITH AT LEAST 30 CALENDAR DAYS' ADVANCE NOTICE;
- (IV) OPTIONS FOR VIRTUAL PARTICIPATION IN MEETINGS OF THE ADVISORY GROUP;

- (V) PROCEDURES TO ENSURE MEANINGFUL PARTICIPATION FOR INDIVIDUALS WITH DISABILITIES AND LIMITED ENGLISH PROFICIENCY;
- (VI) A NOTATION OF AT WHICH MEETINGS THE GENERAL PUBLIC WILL HAVE AN OPPORTUNITY TO TESTIFY OR MAKE COMMENTS; AND
- (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.
- (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:
- (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:
- (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:
- (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:
- (III) EMPLOYEE BENEFITS, INCLUDING HEALTH, DENTAL, AND VISION BENEFITS, LIFE AND DISABILITY INSURANCE, PAID LEAVE, RETIREMENT, AND TUITION REIMBURSEMENT;
- (IV) PROVIDER COSTS RELATED TO THE WORKFORCE, INCLUDING COSTS OF REQUIRED TRAININGS, TRAVEL COSTS FOR DIRECT CARE WORKERS SUCH AS MILEAGE REIMBURSEMENT OR PUBLIC TRANSPORTATION SUBSIDIES, AND COSTS OF PERSONAL PROTECTIVE EQUIPMENT FOR DIRECT CARE WORKERS; AND
- (V) DEMOGRAPHIC INFORMATION INCLUDING AGE, GENDER, RACE AND ETHNICITY, HIGHEST EDUCATIONAL LEVEL ATTAINED, CERTIFICATIONS

# HELD, AND NUMBER OF YEARS OF DIRECT CARE WORK EXPERIENCE CURRENT AND PROPOSED PAYMENT RATES;

- (2) FEDERALLY REQUIRED INFORMATION WITH A DETAILED EXPLANATION OF THE METHODOLOGY AND DATA LIMITATIONS FOR EACH REPORT, INCLUDING:
- (I) HOME- AND COMMUNITY-BASED SERVICES PAYMENT TRANSPARENCY REPORTS;
- (II) PAYMENT ADEQUACY REPORTS AS REQUIRED UNDER 42 C.F.R. § 441.311(E); AND
- (III) ACCESS-TO-CARE DATA, AS REQUIRED UNDER 42 C.F.R. § 441.311(D)(2);
- (3) BUREAU OF LABOR STATISTICS PUBLICLY AVAILABLE WAGE DATA AND OTHER LABOR MARKET AND WORKFORCE DATA;
- (4) BENCHMARKING AND RATE STUDIES FOR HOME— AND COMMUNITY-BASED SERVICES CONDUCTED BY THE DEPARTMENT;
- (5) RATE INFORMATION FROM NEIGHBORING OR SIMILARLY SITUATED STATES; AND
  - (6) ACCESS-TO-CARE METRICS, INCLUDING:
- (I) THE NUMBER OF CONSUMERS RECEIVING APPLICABLE SERVICES; AND
- (II) THE NUMBER OF UTILIZATION HOURS FOR APPLICABLE SERVICE CATEGORIES;
- (HI) A DESCRIPTION OF HOW THE STATE MAINTAINS THE MEDICAID WAIVER WAITING LIST FOR HOME AND COMMUNITY BASED SERVICES;
  - (IV) THE NUMBER OF INDIVIDUALS ON THE WAITING LIST;
- (V) THE AVERAGE LENGTH OF TIME NEW WAIVER ENROLLEES
  WAITED TO ENROLL; AND
- (VI) THE NUMBER OF TIMES INDIVIDUALS MUST RE-APPLY TO RECEIVE SERVICES.

- (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.
- (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:
- (I) THE ADVISORY GROUP, ITS PURPOSE, MEETINGS, AND OPPORTUNITIES FOR INPUT: AND
- (II) A SUMMARY OF ITS ANNUAL REPORT AND ANY RECOMMENDATIONS.
  - (2) THE PUBLIC EDUCATION AND COMMUNICATION PLAN MUST:
- (I) ENSURE BROAD LANGUAGE ACCESS AND BE CULTURALLY COMPETENT:
- (II) USE TARGETED METHODS THAT WILL EFFECTIVELY ENGAGE DIRECT CARE WORKERS AND DIRECT CARE CONSUMERS, INCLUDING ADVERTISING AND OTHER MARKETING TOOLS:
- (HI) 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
- (IV) REQUIRE EACH RESIDENTIAL SERVICE AGENCY TO PROVIDE INFORMATION REGARDING THE ADVISORY GROUP DIRECTLY TO ITS EMPLOYEES.

15-1205.

- (A) THE ADVISORY GROUP SHALL:
- (1) EVALUATE THE SUFFICIENCY OF MEDICAID PAYMENT RATES FOR APPLICABLE SERVICE CATEGORIES; AND

- (2) EXAMINE WORKING CONDITIONS FOR THE DIRECT CARE WORKFORCE, INCLUDING CURRENT WAGE RATES AND OFFERED BENEFITS, INITIATIVES FOR RETENTION AND RECRUITMENT OF WORKERS, TRAINING REQUIREMENTS, AND ACCESS TO WORKER ORGANIZATIONS;
- (3) EVALUATE CHALLENGES TO ACCESSING CARE FOR APPLICABLE MEDICAID HOME- AND COMMUNITY-BASED SERVICES<del>; AND</del>
- (4) DEVELOP A COMMUNICATION PLAN FOR THE DEPARTMENT'S ENGAGEMENT WITH DIRECT CARE WORKERS AND CONSUMERS.
- (B) (1) ON OR BEFORE SEPTEMBER 1 EACH YEAR, BEGINNING IN 2026, THE ADVISORY GROUP SHALL REPORT ITS ACTIVITIES AND RECOMMENDATIONS TO THE GOVERNOR AND, IN ACCORDANCE WITH § 2–1257 OF THE STATE GOVERNMENT ARTICLE, THE GENERAL ASSEMBLY.
  - (2) THE REPORT OF THE ADVISORY GROUP SHALL ADDRESS:
- (I) RECOMMENDATIONS FOR INCREASING MEDICALD PAYMENT RATES FOR APPLICABLE SERVICE CATEGORIES;
- (II) EMPLOYMENT STANDARDS FOR DIRECT CARE WORKERS, INCLUDING A WAGE FLOOR AND EFFORTS TO COMBAT MISCLASSIFICATION OF EMPLOYEES:
- (III) REMOVING BARRIERS TO ACCESS TO CARE AND RECOMMENDATIONS ON HOW TO IMPROVE ACCESS TO QUALITY AND CONTINUOUS CARE:
- (IV) MEANS THE STATE CAN USE TO COMMUNICATE INFORMATION TO DIRECT CARE WORKERS AND CONSUMERS ABOUT THE PURVIEW OF THE ADVISORY GROUP, ITS PURPOSE, ITS MEETINGS AND HEARINGS, AND OPPORTUNITIES TO PROVIDE INPUT; AND
- (V) THE ADVISORY GROUP'S REVIEW OF ANY RACIAL, GENDER, OR ECONOMIC DISPARITIES IMPACTING DIRECT CARE WORKERS OR CONSUMERS AND EXAMPLES OF RATES AND DELIVERY SYSTEMS FOR APPLICABLE SERVICES IN 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 A MAJORITY VOTE.

- (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) (E) (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 Health Care Financing</u>, or the <u>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.

Approved by the Governor, May 20, 2025.